



Personal Liability / Excess Liability Insurance Quote

Comprehensive personal liability on its own (no homeowners policy needed), or excess liability on top of the policy you already have. For your home, rental homes, vacant homes and land, including out-of-state owners. Up to 4 units per location.

Please print clearly, then email a scan or photo of every page to info@okcib.com or bring it to our office. Questions marked * are required. You can also fill this out online at okcib.com - just ask us for the link.

YOUR CONTACT INFORMATION

First Name * _____
Last Name * _____
Phone * _____
Email * _____

QUESTIONS

Applicant name or business name, exactly as it should appear on the policy (you, your LLC, trust, etc.) *

Your mailing address (where you get your mail, even if it is out of state) *

Street

City / State / ZIP

When do you want coverage to start? * _____ MM / DD / YYYY

Form of business *

☐ Individual(s) ☐ Corporation ☐ Partnership ☐ LLC ☐ Trust ☐ Family Limited Partnership ☐ Other

Only if "Form of business" = Other:

Other form of business: describe _____

Does this person or entity have any business interests other than residential real estate? *

☐ Yes ☐ No

Only if "Does this person or entity have any business interests other than r..." = Yes:

Describe the other business interests

Is the applicant a contractor, developer or in the business of flipping properties? *

☐ Yes ☐ No

How many properties in total do you (the entity and/or managing partner) own? *

Is anyone in the household a federal or state political figure, professional athlete or coach, music or TV entertainer, CEO of a Fortune 500 company, social media influencer, or someone with assets over \$10 million? *

☐ Yes ☐ No

What coverage do you need? *

- ☐ Comprehensive Personal Liability (liability only, no other policy underneath)
☐ Excess Comprehensive Personal Liability (sits on top of a liability policy you already have)

Only if "What coverage do you need?" = liability only:

Liability limit wanted *

☐ \$100,000 ☐ \$300,000 ☐ \$500,000 ☐ \$1 million ☐ Not sure, quote options

Only if "What coverage do you need?" = Excess:

Excess: liability limit on your current (primary) policy _____

Only if "What coverage do you need?" = Excess:

Excess: excess limit you want _____

Only if "What coverage do you need?" = Excess:

Excess: is the underlying policy written on a personal lines form (e.g. a homeowners or dwelling fire policy)?

☐ Yes ☐ No

Location #1: address of the property to be covered (rental, residence or vacant land) *

Street

City / State / ZIP

Number of dwelling units *

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Vacant land (no dwelling)

How is this location used? *

☐ Rental dwelling (rented to tenants) ☐ Owner / applicant occupied ☐ Vacant dwelling ☐ Vacant land

Only if "How is this location used?" = Vacant land:

Vacant land: number of acres _____

Only if "How is this location used?" = Vacant dwelling:

Vacant dwelling: is it up for sale?

☐ Yes ☐ No

Only if "How is this location used?" = Vacant dwelling:

Vacant dwelling: will it be occupied within 60 days?

☐ Yes ☐ No

Is there a swimming pool? *

☐ Yes ☐ No

Only if "Is there a swimming pool?" = Yes:

Pool: is it surrounded by a fence with a self-latching gate?

☐ Yes ☐ No

Only if "Is there a swimming pool?" = Yes:

Pool: is there a diving board over four feet high and/or a waterslide?

☐ Yes ☐ No

Do you have more locations to cover? *

☐ Yes ☐ No

Add each additional location to be covered (list only locations you want covered)

Only if "Do you have more locations to cover?" = Yes:

(this section)

Additional location #1**Location address**

Street

City / State / ZIP

Number of dwelling units☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Vacant land (no dwelling)**How is this location used?**☐ Rental dwelling (rented to tenants) ☐ Owner / applicant occupied ☐ Vacant dwelling ☐ Vacant land*Only if "How is this location used?" = Vacant land:***Vacant land: number of acres***Only if "How is this location used?" = Vacant dwelling:***Vacant dwelling: is it up for sale?**☐ Yes ☐ No*Only if "How is this location used?" = Vacant dwelling:***Vacant dwelling: will it be occupied within 60 days?**☐ Yes ☐ No**Is there a swimming pool?**☐ Yes ☐ No*Only if "Is there a swimming pool?" = Yes:***Pool: is it surrounded by a fence with a self-latching gate?**☐ Yes ☐ No*Only if "Is there a swimming pool?" = Yes:***Pool: is there a diving board over four feet high and/or a waterslide?**☐ Yes ☐ No**Additional location #2****Location address**

Street

City / State / ZIP

Number of dwelling units☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Vacant land (no dwelling)**How is this location used?**☐ Rental dwelling (rented to tenants) ☐ Owner / applicant occupied ☐ Vacant dwelling ☐ Vacant land*Only if "How is this location used?" = Vacant land:***Vacant land: number of acres***Only if "How is this location used?" = Vacant dwelling:***Vacant dwelling: is it up for sale?**☐ Yes ☐ No*Only if "How is this location used?" = Vacant dwelling:***Vacant dwelling: will it be occupied within 60 days?**☐ Yes ☐ No**Is there a swimming pool?**☐ Yes ☐ No

Only if "Is there a swimming pool?" = Yes:

Pool: is it surrounded by a fence with a self-latching gate?

☐ Yes ☐ No

Only if "Is there a swimming pool?" = Yes:

Pool: is there a diving board over four feet high and/or a waterslide?

☐ Yes ☐ No

More than 2? List the rest on an extra sheet.

Have you had any liability losses or claims in the past three years? *

☐ Yes ☐ No

List each liability loss or claim in the past three years

Only if "Have you had any liability losses or claims in the past three years?" = Yes:

(this section)

Loss / claim #1

Date of loss _____ MM / DD / YYYY

Type of loss (e.g. slip and fall, dog bite) _____

Description of the loss

Status

☐ Open ☐ Closed

Amount paid / reserves (\$) _____

Loss / claim #2

Date of loss _____ MM / DD / YYYY

Type of loss (e.g. slip and fall, dog bite) _____

Description of the loss

Status

☐ Open ☐ Closed

Amount paid / reserves (\$) _____

More than 2? List the rest on an extra sheet.

1. Do you have any policies with United States Liability Insurance Group (USLI: United States Liability Insurance Co., Mt. Vernon Fire, U.S. Underwriters or Mt. Vernon Specialty)? *

☐ Yes ☐ No

2. In the next 12 months, will there be any construction or renovation at any location? *

☐ Yes ☐ No

Only if "2. In the next 12 months, will there be any construction or renovat..." = Yes:

a. Will a licensed general contractor (other than you) be hired to do the work? *

☐ Yes ☐ No

Only if "2. In the next 12 months, will there be any construction or renovat..." = Yes:

b. Will the work include demolition? *

☐ Yes ☐ No

3. Do you or anyone in your household own exotic pets, farm animals or saddle animals? *

☐ Yes ☐ No

Only if "3. Do you or anyone in your household own exotic pets, farm animals..." = Yes:

What animals? _____

4. Is any location a group home, nursing home, boarding / rooming house or model home? *

☐ Yes ☐ No

5. Is any business carried on at any location? *

☐ Yes ☐ No

Only if "5. Is any business carried on at any location?" = Yes:

Describe the business

6. Will there be any farming or hunting on any property? *

☐ Yes ☐ No

7. Is any location a mobile home? *

☐ Yes ☐ No

8. Is any location over 6,000 square feet? *

☐ Yes ☐ No

9. Are there any hazardous conditions at any location (boarded-up windows; cracked or uneven sidewalks; missing, broken or defective steps or handrails; unsafe porches; piled-up debris)? *

☐ Yes ☐ No

Only if "9. Are there any hazardous conditions at any location (boarded-up w..." = Yes:

Describe every hazardous condition *

10. Is any location rented out short-term (daily, weekly, monthly, Airbnb / VRBO)? *

☐ Yes ☐ No

11. Are any of the residents students? *

☐ Yes ☐ No

Is any of the locations vacant land? *

☐ Yes ☐ No

Only if "Is any of the locations vacant land?" = Yes:

12. Vacant land: are there any structures on it (other than one locked shed or garage of 500 sq ft or less used to maintain the land)? *

☐ Yes ☐ No

Only if "Is any of the locations vacant land?" = Yes:

13. Vacant land: is there a boat dock or boat slip? *

☐ Yes ☐ No

Only if "Is any of the locations vacant land?" = Yes:

14. Vacant land: do any activities (business, recreational or other) take place on it, with or without your permission? *

☐ Yes ☐ No

Only if "Is any of the locations vacant land?" = Yes:

15. Vacant land: are there any natural or man-made ponds or lakes? *

☐ Yes ☐ No

Does anyone need to be listed on the policy (additional insured, loss payee or mortgage company)? *

☐ Yes ☐ No

List each person or company to be added to the policy

Only if "Does anyone need to be listed on the policy (additional insured, lo..." = Yes:

(this section)

Additional interest #1

Name _____

Relationship / interest (e.g. property manager, lender) _____

Address

Street _____

City / State / ZIP _____

Add them as

(check all that apply)

☐ Additional Insured ☐ Loss Payee ☐ Mortgagee

Additional interest #2

Name _____

Relationship / interest (e.g. property manager, lender) _____

Address

Street _____

City / State / ZIP _____

Add them as

(check all that apply)

☐ Additional Insured ☐ Loss Payee ☐ Mortgagee

More than 2? List the rest on an extra sheet.

Mortgagee: the lender, its address and the loan #, if any

Remarks: anything else the underwriter should know

Upload your current policy (for an excess quote, the dec page of the policy underneath)

Please attach a copy with this form.

How would you like us to contact you?

☐ Call ☐ Email ☐ Text

I confirm these answers are true to the best of my knowledge, and I understand the insurance company may obtain a consumer report (Fair Credit Reporting Act) as part of underwriting. *

(check all that apply)

☐ I agree

I confirm the answers above are true and complete to the best of my knowledge. Sending this form does not bind coverage; nothing is in force until confirmed in writing by OKC Insurance Brokers.

Signature

Date