



Vacant Dwelling Insurance Quote

Vacant homes and small residential or commercial buildings (up to 4 units) - 3, 6, or 12-month terms.

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

Named Insured (your name or company/LLC exactly as it should appear on the policy)

First Name * _____

Last Name * _____

Phone * _____

Email * _____

Date of Birth * _____ MM / DD / YYYY

QUESTIONS

Other Persons on This Quote (optional)

Additional Person #1

Full Name _____

Related to Named Insured?

☐ Spouse ☐ Domestic Partner ☐ Relative ☐ Business Partner ☐ Co-Owner ☐ Friend ☐ Not Related

Date of Birth _____ MM / DD / YYYY

Additional Person #2

Full Name _____

Related to Named Insured?

☐ Spouse ☐ Domestic Partner ☐ Relative ☐ Business Partner ☐ Co-Owner ☐ Friend ☐ Not Related

Date of Birth _____ MM / DD / YYYY

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

Property Address (the vacant dwelling) *

Street _____

City / State / ZIP _____

County _____

Mailing Address (if different)

Street

City / State / ZIP

Is the property residential or commercial? *

☐ Residential ☐ Commercial

How many units? (up to 4) *

☐ 1 ☐ 2 ☐ 3 ☐ 4

What best describes the property? *

☐ Vacant - no work being done ☐ Vacant - being renovated by me (the owner) ☐ Vacant - being renovated by a contractor

Is the property a condominium? *

☐ Yes ☐ No

Are all dwellings totally vacant? *

☐ Yes ☐ No

Are all dwellings 4 units or less? *

☐ Yes ☐ No

Have you had any losses on the property in the last 3 years? *

☐ Yes ☐ No

Have you had a foreclosure, repossession or bankruptcy during the past 5 years? *

☐ Yes ☐ No

Is any dwelling intended for demolition? *

☐ Yes ☐ No

During the past 5 years, have you been indicted for or convicted of any degree of the crime of fraud, bribery, arson or any other arson-related crime? *

☐ Yes ☐ No

Is any dwelling partially constructed? *

☐ Yes ☐ No

Is any dwelling constructed of logs? *

☐ Yes ☐ No

Is any dwelling constructed on stilts? *

☐ Yes ☐ No

Are any of the buildings listed on a historical register? *

☐ Yes ☐ No

Are all buildings locked/secured to prevent unauthorized entry? *

☐ Yes ☐ No

Is there a pond, lake, pool or hot tub on the premises? *

☐ Yes ☐ No

Are there any nuisance hazards on the property (swing sets, vehicles, debris, trampoline, fuel tanks, underground tanks, etc.)? *

☐ Yes ☐ No

Is any lot size more than 5 acres? *

☐ Yes ☐ No

Is the dwelling equipped with functioning circuit breakers? *

☐ Yes ☐ No

Is the dwelling a mobile/manufactured home? *

☐ Yes ☐ No

Was the property acquired within the past year? *

☐ Yes ☐ No

Month/Year Purchased (MM/YYYY) * _____ MM / YYYY

Do you want Actual Cash Value (ACV) or Replacement Cost (RC)? *

☐ Actual Cash Value (ACV) ☐ Replacement Cost (RC) ☐ Not Sure

Dwelling Value (\$) * _____

Describe the neighborhood *

☐ Above Average - well-kept, stable ☐ Average ☐ Below Average - declining or many vacant properties

Describe the building condition *

☐ Above Average - move-in ready ☐ Average - minor wear ☐ Below Average - needs work

Date Vacated (when did the property become vacant?) * _____ MM / DD / YYYY

Prior use of the building when it was occupied? * _____

What do you plan to do with the property? *

☐ Sell it ☐ Rent it out ☐ Renovate then sell ☐ Renovate then rent ☐ Move in / occupy it ☐ Demolish it
☐ Undecided

Does someone check on the property on a regular basis? *

☐ Yes ☐ No

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

How long do you need coverage? *

☐ 3 Months ☐ 6 Months ☐ 12 Months

Construction type *

☐ Frame (wood) ☐ Frame / Brick Veneer ☐ Brick / Masonry ☐ Concrete / Fire Resistive ☐ Other / Not sure

Year Built * _____

Square Feet * _____

Number of Stories * _____

Building Coverage Amount (\$) * _____

Personal Property / Contents Coverage (\$ - leave blank if the building is empty)

Deductible

☐ \$1,000 ☐ \$2,500 ☐ \$5,000

Include liability coverage? (protects you if someone is hurt on the property) *

☐ Yes ☐ No

Only if "Include liability coverage? (protects you if someone is hurt on the..." = Yes:

Liability limit *

☐ \$25,000 ☐ \$50,000 ☐ \$100,000 ☐ \$300,000 ☐ \$500,000 ☐ \$1,000,000

Include theft coverage? (copper, appliances, fixtures - the #1 vacant-property claim) *

☐ Yes ☐ No

Is there a central station fire and burglar alarm? *

☐ Yes ☐ No

Is there a 24-hour watchman on the property? *

☐ Yes ☐ No

Does the building have a sprinkler system? *

☐ Yes ☐ No

More buildings at this location? Add each one (up to 4 total)

Additional building #1

Building Address / Description _____

Construction Type _____

Year Built _____

Square Feet _____

Number of Stories _____

Building Coverage Amount (\$) _____

Additional building #2

Building Address / Description _____

Construction Type _____

Year Built _____

Square Feet _____

Number of Stories _____

Building Coverage Amount (\$) _____

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

Anything else we should know?

Upload your old/current policy (optional)

Please attach a copy with this form.

How would you like us to contact you?

☐ Call ☐ Email ☐ Text

Do you or a household member have Armed Forces Insurance (AFI), USAA, or AAA membership?

☐ Yes ☐ No

Only if "propertyAddress[state]" = OK:

Does the applicant have an auto policy through our agency?

☐ Yes ☐ No

Is the property currently insured? *

☐ Yes ☐ No

Only if "Is the property currently insured?" = Yes:

Current Carrier *

☐ STATE FARM ☐ ALLSTATE ☐ FARMERS ☐ PROGRESSIVE ☐ TRAVELERS ☐ LIBERTY MUTUAL
☐ NATIONWIDE ☐ USAA ☐ AMERICAN NATIONAL ☐ FOREMOST ☐ SAFECO ☐ STEADILY ☐ OBIE
☐ OPENLY ☐ NATIONAL GENERAL ☐ OTHER

Only if "Current Carrier" = OTHER:

If Other, please specify the carrier * _____

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