OKC Insurance Brokers
11901 N MacArthur Blvd STE D9, Oklahoma City, OK 73162
(405) 509-9433 | OKCIB.com

Wind & Hail Deductible Buy-Down Quote

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 * _____

Date of Birth (needed to start your quote) * _____ MM / DD / YYYY

QUESTIONS

Address *
Street

City / State / ZIP

Previous (under 2 years) or Mailing Address
Street

City / State / ZIP

Construction Type: *

- ☐ Frame - Wood-frame construction
- ☐ Joisted masonry (masonry walls with wood joisted roof/floors)
- ☐ Brick Veneer (wood frame with brick exterior)
- ☐ Non-Combustible - Made entirely of non-combustible materials (e.g., metal walls/roof)
- ☐ Masonry Non-Combustible - Masonry exterior walls with non-combustible interior support
- ☐ Fire Resistive - Reinforced concrete or protected steel - fire resistance rating of at least 2 hours

Roof Type: *
(check all that apply)

☐ Asphalt/Shingle (most common) ☐ Tile ☐ Wood Shingle ☐ Slate ☐ Metal

Distance to Saltwater: *

☐ <1000 Feet ☐ 1,000 ft-1 Mile ☐ 1 Mile - 10 Miles ☐ 10+ Miles

Any Losses in the Past 5 Years? *

☐ Yes ☐ No

If you have had a claim/losses:
(check all that apply)

☐ Roof ☐ Theft ☐ Water

Property ownership *

☐ Renewal ☐ New Purchase ☐ Pending Offer

Do you have a Mortgage? *

☐ Yes ☐ No

Deductible Buy Back Retention? *

☐ $2,500 ☐ $5,000 ☐ $10,000 ☐ $25,000 ☐ $50,000

Wind/Hail Deductible On Your Current Policy *

☐ 1% ☐ 2% ☐ 3% ☐ 5%

Property Information (Found on your Insurance Policy) _____

Property Carrier * _____

Property Policy Number: _____

Overlying Policy Coverage in Place (Found On Your Declaration Sheet) * _____

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

How would you like us to contact you?

☐ Call ☐ Email ☐ Text

Do you have coverage for this now? *

☐ Yes ☐ No

Only if "Do you have coverage for this now?" = Yes:

Who is it with now? _____

Only if "Do you have coverage for this now?" = Yes:

When does that policy expire? _____ MM / DD / YYYY

NOTES - Please explain any losses in the previous 5 Years.

_____

_____

_____

Upload your old policy

Please attach a copy with this form.

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