

AZINSURANCEGUY.COM

ONE LINK TO ALL YOUR INSURANCE NEEDS

Don Rice & Associates, LLC

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Name	_____
Address:	_____ _____ _____
Phone:	_____
Cell:	_____
Fax:	_____
Email:	_____
DOB:	_____
SSN:	_____
DL#	_____

Property	_____
Policy Usage	Homeowners Primary
Yr. Built:	_____
Const:	Frame on Stucco
Roof:	Shingle
Garage#	_____
Loan \$:	_____
Sprinklered:	Yes No
Floater:	Jewelery Arts
	LLP Secd
	Sq Ft: _____
	Brick
	Tile
	Stories _____
	Mortgage: _____
	Alarm: Fire Burglar Both
	Block
	Wood
	Pool: Yes No
	Invest home
	Baths# _____
	Other: _____
	Other: _____

Auto/Home Security System	Auto/Home/Life Sprinkler	Affinity New HH	Retire. Comm. Interior Insp.
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Year	_____	Make:	_____	Model:	_____
VIN:	_____				
Driver:	_____	DL#	_____	SSN:	_____
DOB:	_____	Tickets	_____	Claims:	_____

Year	_____	Make:	_____	Model:	_____
VIN:	_____				
Driver:	_____	DL#	_____	SSN:	_____
DOB:	_____	Tickets	_____	Claims:	_____

Year	_____	Make:	_____	Model:	_____
VIN:	_____				
Driver:	_____	DL#	_____	SSN:	_____
DOB:	_____	Tickets	_____	Claims:	_____

BI/PD	_____	UM/UIM:	_____	Comp/Coll:	_____
Towing	Yes No	Rental:	Yes No	Glass:	Yes No

Good Student	Yes Discount	Anti Theft	Multi Car
Paid in Full	EFT Discount	Alternative Fuel	New Parent