

Personal Lines Checklist

Named Insured:

Current Coverages : Homeowners:

: Auto:

: Umbrella:

Surveyor: _____ Diary Date for survey update: _____

Date of Survey: _____

Method of Survey: telephone meeting (check one)

Name of Customer representative surveyed: _____

(check appropriate column; check off every category of insurance)

Categories of Insurance

Requested/Remarks Offered	N/A	Offered	Rejected	Already Has	More Info
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Homeowners

(for each category list all coverages, and options available in agency, including optional limits and floaters)

Automobile

(for each category list all coverages, and options available in agency, including optional limits and floaters)

Umbrella

Flood Insurance

Other