

Sample Renters Insurance Lead



For: Tom Agent
Type: Med Sup
Quote Needed: ASAP

Contact Information

Name: Jim Customer **Email:** ilovegolf33@yahoo.com
Address: 123 Sample Lane **Daytime Phone:** (123) 234-0934
Anywhere, CA 90012 **Evening Phone:** (123) 234-4523
Time to Contact: Morning **Fax:** (123) 690-6574
Additional Comments: I will be out of town next week. Please call my cell (123) 845-5122

Insurance Information

Currently Insured: No **Credit History:** Good
Company: n/a
Social Security: **Birthdate:** 4/21/1988

Property Information

Address: 456 Sample Ave **Type of Dwelling:** Apartment
Anywhere, CA 90012
County: Sample **Year Built:** 1999
Square Footage: 1000 **Stories:** 3
Bedrooms: 2 **Bathrooms:** 2
Heat Source: Electric **Fireplaces:**
Siding: Vinyl **Distance to Fire less than 500 feet Hydrant:**
Distance to Fire Station: less than 5 miles
Additional Features: Smoke Detectors, Fire Extenguishers, Dead Bolts, Fire Alarm

Coverage Requested

Contents: \$15,000
Liability: \$50,000 **Deductible:** \$500

Claims History (Last Five Years)

Claims: 0