

ATTENTION:

AARP MEMBERS REQUESTING A QUOTE FOR HOMEOWNERS, CONDO OR RENTERS INSURANCE

Thank you for your interest in the **AARP[®] Homeowners Insurance Program from The Hartford¹**.

Attached is your convenient “Request for Quote” form. If you would like to receive a homeowners, condo or renters insurance quote from this Program, simply complete all requested information on the form and return it to The Hartford at the following address:

The Hartford
P.O. Box 14195
Lexington, KY 40512-9918

For the most accurate quote, please fully complete all requested information. If you qualify, we'll send you a no-obligation quote to compare with your current coverage and premium.

Sincerely,

Susan L. Castaneda

Susan L. Castaneda
Assistant Vice President, The Hartford

AARP and its affiliates are not insurers. Paid endorsement. The Hartford pays royalty fees to AARP for the use of its intellectual property. These fees are used for the general purposes of AARP. AARP membership is required for Program eligibility in most states.

The AARP Homeowners Insurance Program from The Hartford is underwritten by Hartford Fire Insurance Company and its affiliates, One Hartford Plaza, Hartford, CT 06155. In California, the Program is underwritten by Property & Casualty Company of Hartford. In Washington, Michigan and Minnesota, the Program is underwritten by Trumbull Insurance Company. In Pennsylvania, the Program is underwritten by Hartford Underwriters Insurance Company. Homeowners product is not available in all areas, including the state of Florida. Specific features, credits and discounts may vary and may not be available in all states in accordance with state filings and applicable law.

¹ In Texas, the Home Program is underwritten by Trumbull Insurance Company.

REQUEST A FREE QUOTE FROM THE AARP HOME INSURANCE PROGRAM



Thank you for your interest in the AARP® Homeowners Insurance Program from The Hartford. This program offers quality protection, added benefits, and claim service that goes the extra mile.

Note: MOBILE HOME COVERAGE is not available through the AARP Homeowners Insurance Program from The Hartford.

To request a free, no-obligation quote, complete this form and mail to:

THE HARTFORD, PO BOX 14195, LEXINGTON, KY 40512-9918

CODE: 003542

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ E-mail Address: _____

General Information

AARP membership number is: _____

Your Name: _____ Date of Birth: _____ Gender: _____ Marital Status: _____

Your Spouse's Name (if applicable): _____ DOB: _____

Number of Household Residents (including yourself): _____

Name of your current insurance company: _____ Expiration Date: _____

Residence Information

Address of home to be insured: Street Address _____

City _____ County _____ State _____ ZIP _____

Do you own this residence? Yes ___ No ___ Is this residence rented to others? Yes ___ No ___

Is this your primary residence? Yes ___ No ___ If No, indicate primary address: _____

Is business conducted on the premises? Yes ___ No ___ If Yes, please explain: _____

What is the total number of mortgages? _____ Is there a swimming pool? Yes ___ No ___

Loss Information

Have you had any homeowners losses or claims at any residence during the last 7* years? Yes ___ No ___

If Yes, give details below (Use additional sheet if necessary)

Date of Loss	Amount of Loss	Address of Loss	Description
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

Do you own a dog? Yes ___ No ___ If Yes, what breed? _____

Any bite history? Yes ___ No ___

Fire Protection / Security Information

Residence is: Inside City Limits ___ Outside City Limits ___ Miles to responding fire station: _____

Name of fire department/district providing fire protection: _____

Distance to Fire Hydrant: Within 1000 feet ___ Over 1000 feet ___

Do you or your spouse work more than 24 hours per week? Yes ___ No ___

Do you have an alarm? Yes ___ No ___ If Yes: Fire ___ Burglar ___

Please indicate where the alarm sounds: Residence ___ Police/Fire Dept ___ Monitoring Company ___

Is your residence in a 50+ age community governed by a management group? Yes ___ No ___

Dwelling Information

Type of Dwelling: 1 Family ___ 2 Family ___ 3 Family ___ 4 Family ___ Duplex ___

Year of construction: _____

Heating System Type:

Coal Stove ___ Electric Heat ___ Electric Space Heater ___ Fireplace ___ Floor Furnace ___ Gas ___
Heat Pump ___ Kerosene ___ Oil ___ Pellet Stove ___ Wall Unit ___ Wood Stove ___ None ___
Other - Please Describe _____

If home is over 50 years old, indicate the year the heating system was updated: _____

If built prior to 1967: Does home have less than 100 amperage electrical service? Yes ___ No ___

If built prior to 1945: Does home have "knob and tube" wiring? Yes ___ No ___

Underground oil tank? Yes ___ No ___

Style of home:

___ 1 Story (Ranch, Rambler, Cottage) ___ 1 1/2 Story (Cape Cod, A-Frame, Loft)
___ 2 Story (Colonial, Federal Colonial) ___ 2 1/2 Story (Victorian)
___ Bi-Level/Raised Ranch ___ Tri-Level/Split Level
___ Townhouse/Rowhouse (end) ___ Condo (co-op)
___ Townhouse/Rowhouse (center) ___ Manufactured/Modular
___ Mobile Home Other (please specify) _____

Square footage of the total living area of home: _____ (Do not include: porches, breezeways, decks, built in or attached garages; Do include: finished area in attic and additions)

Home Construction

Foundation Type: Slab ___ Crawlspace ___ Full Basement ___ Piers/Pilings ___

If Full Basement: Walkout ___ Fully Enclosed ___ If Finished, specify: _____ % Finished

What type of exterior does your home have (if more than one, specify approximate % of each type)?

Brick Veneer over Frame _____ % Solid Brick with no Frame _____ % Wood Siding _____ %
Stucco _____ % Aluminum/Metal Siding _____ % Vinyl Siding _____ % Concrete Block _____ %
Logs over Frame _____ % Solid Logs over Frame _____ % Hardboard/Cement Fiber _____ %
Other (specify) _____ %

Specify roof type (ex. asphalt shingles, wood shake, slate, tile): _____

Age of your current roof: _____

Attached Structures

Garages: None ___ 1-car ___ 2-car ___ 3-car ___ Attached ___ Detached ___ Built-in ___

Carport: None ___ 1-car ___ 2-car ___ 3-car ___ Attached ___ Detached ___

Condo / Apartment / Townhouse / Rowhouse

If Apartment or Condo: Coverage amount requested for household contents: \$ _____

How many apartments/condos are in your building? _____

If Condo, Townhouse or Rowhouse: Does an association cover the exterior? Yes ___ No ___

If Townhouse/Rowhouse: Number of units between firewalls _____

Additional Information

Note: Homeowners insurance does not cover loss due to flood. Would you like information regarding flood or home business insurance? Flood _____ Home Business _____

*DC, DE, GA, LA, MD, SC and TX please answer for 3 years.

As part of our underwriting procedures, we order consumer reports relating to credit and loss history. Upon your request, we will advise you of the name and address of the consumer reporting agency from whom we obtain such reports.

For VT residents: In order to provide a quote, please sign below to authorize us to order a consumer report relating to credit. Without your signature, we are unable to offer you a quotation. This report may also be ordered in connection with any other insurance applied for from us.

Signature: _____ Date: _____