

**Bill Taylor & Associates**  
Request for Commercial Property Quote

Named Insured: \_\_\_\_\_

Physical Address of Property: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Construction: \_\_\_\_\_ Frame \_\_\_\_\_ Brick Veneer \_\_\_\_\_ Metal \_\_\_\_\_ Concrete

Age: \_\_\_\_\_ Square Feet: \_\_\_\_\_ # of Stories \_\_\_\_\_

Updates (please enter year updates were completed):

Wiring: \_\_\_\_\_ Plumbing: \_\_\_\_\_ Roof: \_\_\_\_\_ Heating/AC: \_\_\_\_\_

Occupancy: \_\_\_\_\_ Prior Insurance Carrier: \_\_\_\_\_

Values:

Building: \_\_\_\_\_ ACV \_\_\_\_\_ R/C \_\_\_\_\_ Co-Ins \_\_\_\_\_

Contents: \_\_\_\_\_ ACV \_\_\_\_\_ R/C \_\_\_\_\_ Co-Ins \_\_\_\_\_

Income: \_\_\_\_\_ Co-Ins \_\_\_\_\_

Signs: \_\_\_\_\_ ACV \_\_\_\_\_ R/C \_\_\_\_\_ Co-Ins \_\_\_\_\_

Fences: \_\_\_\_\_ ACV \_\_\_\_\_ R/C \_\_\_\_\_ Co-Ins \_\_\_\_\_

Distance to fire hydrant \_\_\_\_\_ ft City Limits: \_\_\_\_\_ Inside \_\_\_\_\_ Outside

Alarm System: \_\_\_\_\_ Sprinklers: \_\_\_\_\_ Yes \_\_\_\_\_ No

# of Insurance Losses: \_\_\_\_\_ Total Paid: \_\_\_\_\_ Loss Runs Requested: \_\_\_\_\_