

VAGABUNDOS BOAT AND TRAVEL CLUB

P.O. Box 549, Rio Vista, CA 94571 Phone: 707-374-5511 Fax: 707-374-6844 Email: info@vagabundos.com

MEXICAN HOMEOWNER'S INSURANCE APPLICATON

Primary Insured Contact Information

Name:	Member Number:		
Phone Number:	Email:		

Insured Property Address:

Ensuring your address is correct is extremely important as it may affect the price of the quote. Consequently, we encourage you to verify that the address entered into our application appears the same as it does on the deed, mortgage, or other legal documents.

Property Address:	
Lot or Apartment Number:	
City of Insured Property:	
State of Insured Property:	
Postal Code:	

INSURED PROPERTY DETAILS

Type of Home: _____ Single Family _____ Townhouse _____ Condo (See Below)

Your condo association bylaws define what you are responsible for insuring. Please select the type of insurance your bylaws require.

_____ Contents Coverage Only _____ Building (walls, alterations, fixtures) and contents

Year Built: ______ Square Footage: ______ # of Property Owners _____

Primary Dwelling Replacement Cost: _____

Distance from Ocean or River:_____ Meters (over 500 meter to get Hurricane Insurance)

Construction Type:	Masonry/Concrete/Steel w/Palapa		
	Masonry/Concrete/Steel		
	Wood/Frame w/Palapa		
	Wood/Frame		
	Wood Foam Block for Concrete and Foam w/Palapa		
	Foam Block or Concrete w/ Foam		
Roof Type:	Masonry/Concrete/Steel w/Palapa		
	Masonry/Concrete/Steel		
	Wood Frame/Palapa		
	Wood/Frame w/Composition Shingles		
	Palapa Metal Tile		
Does the insured location have	e any other structures? Yes Sq. Footage:		
	No		
Do any of the other structures	have a wood frame or any primarily made of wood?		
Yes	No		
Do any of the other structures	use wood, shake, or composite as roof material?		
Yes	No		
Coverage			
Value of Personal Property: \$_			
Perils Insured Against for Perso	onal Property: All Risk Named Perils		
Loss Settlement for Personal F	Property: Replacement Cost Actual Cash Value		
Personal Liability Limit:	(Recommend at least \$300,000)		
Theft Coverage:			
Do you want water and flood c	overage? Yes No		
Underwriting			
Number of floors?	Gated Community? Yes No		

Is home ever rented? _____ Yes _____ No

Please indicate total amount of time home is occupied:

_____ less than 3 months

_____ less than 6 months

_____ less than 9 months

_____ more than 9 months

Fire Protection

_____ Fire alarm/smoke detection

_____ Fire sprinklers

_____ Fire extinguishers

Theft Protection

____ Dead bolt locks

_____Bars on Windows

_____ Security alarm (local or monitored)

Hurricane Protection

Do windows have storm shutters? _____ Yes _____ No

Other Information

Date of last update or remodel _____Never

_____5 years or less

_____6 – 10 years

_____ More than 10 years

Number of previous losses more than \$5,000 in past 3 years? _____

Describe the loss ______ Value of Loss _____ (\$5,000 or less)

Describe the loss ______ Value of Loss _____ (\$5,000 or less)

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Do you have any solar panels or related equipment to be covered? \$_____ (value)

Do you want to increase the sublimit on certain personal property? _____Yes _____No (If yes, complete the following)

Currency:		\$1,000	\$2,000	\$3,000	
Securities, accounts, deeds:		\$3,000	\$5,000		
Jewelry:	\$3,000	\$5,000	\$7,000	\$10,000	
Silverware:	\$5,000	\$7,000	\$10,000		
Business property off premises:			\$1,000	\$2,000	\$3,000
Artwork:		\$5,000	\$7,000	\$10,000	
Shrubs and trees:		\$5,000	\$7,000	\$10,000	

If you would like to make any notes

Deductibles:

Dwelling & Personal Property: \$					(\$500 or higher)	
Earthquake:	\$2,000	\$3,000	\$4,000	\$8,000	\$16,000	
Hurricane:	\$2,500	\$3,750	\$5,000	\$10,000	\$20,000	