



# FLORIDA MANUFACTURED HOME INSURANCE, INC.

P.O. Box 908  
 Zephyrhills, FL 33539-0908  
 www.fmhii.com

Phone: (813)782-5504  
 Fax: (813)788-1996  
 E-mail: info@fmhii.com



## Request for Quotation - Mobile Home Insurance

In order to receive a quote, please complete this form and email it, fax it or send it via regular mail.

**NOTE:** If your home is currently insured with anyone other than Citizens, **keep your current policy.** The coverage under this program is designed for those who do not have coverage or for those who cannot afford their current Citizens premium.

### PERSONAL INFORMATION

Name:		Email:	
Occupation:		Employer:	
Mailing Address:		City:	State: Zip:
Physical Address:		City:	State: Zip:
Home Phone:	Northern Phone:	Other Phone:	

### MOBILE HOME INFORMATION

Year:	Make:	Model:	
Length:	Width:	Serial #:	Name of Park:
Primary Residence?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
» » » If "No", how is the home used?			
Any Animals?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
» » » If "Yes", number & kind/breed:			
Currently Insured?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
» » » If "Yes", name of company:		Expiration Date:	

### ATTACHMENT INFORMATION (maximum 3 attachments / maximum value per attachment is \$5,000)

1) Type (check one):	<input type="checkbox"/> Weather-tight Room	<input type="checkbox"/> Screen Room	<input type="checkbox"/> Carport	<input type="checkbox"/> Shed
Approximate Value: \$	Length:	Width:	Year Built:	
2) Type (check one):	<input type="checkbox"/> Weather-tight Room	<input type="checkbox"/> Screen Room	<input type="checkbox"/> Carport	<input type="checkbox"/> Shed
Approximate Value: \$	Length:	Width:	Year Built:	
3) Type (check one):	<input type="checkbox"/> Weather-tight Room	<input type="checkbox"/> Screen Room	<input type="checkbox"/> Carport	<input type="checkbox"/> Shed
Approximate Value: \$	Length:	Width:	Year Built:	

### LIENHOLDER INFORMATION

Name of Lienholder:	Loan Number:
Address of Lienholder:	City: State: Zip:

### AFFILIATED ASSOCIATION (DISCOUNT APPLIES)

FLAROC  FMHA  FMO

### NOTES