



American Standard/AllBright Insurance Agencies

PO Box 35989
Houston TX 77235
(Mailing)

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Houston TX 77054
(Physical)



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(713) 665-9725 Fax

(800) 261-1524 Toll-free
(832) 415-2633 eFax

Requested By: _____ Phone: _____
Email: _____ (optional) Fax: _____

Coverage, Dwelling, or Loan Amount \$ _____

Type of Insurance: **Homeowners** (Owner Occupied) **Dwelling/Hazard** (Tenant Occupied) **Flood**

Primary Insured or Borrower

Name _____ DOB ___/___/___ *SSN _____
Occupation _____ Employer _____

*SSN is optional for quotes, but required for binding

Second Insured or Co-Borrower

Name _____ DOB ___/___/___ *SSN _____
Occupation _____ Employer _____

Insured Phone# _____ **1st time home-buyer?** **YES** **NO**

Property Address:

Mailing Address (if different from property):

Discounts apply for 1st-time home buyers and new home purchases.

Property Information

(Must complete if home is brand-new construction. Optional otherwise as we can obtain from CAD records)

Year Built:	Construction (choose predominant type): <input type="checkbox"/> Brick/Veneer, Hardi-plank, or Cement-fiber <input type="checkbox"/> Frame with siding (wood or aluminum) <input type="checkbox"/> Stucco or Asbestos	Amenities: Swimming Pool <input type="checkbox"/> Yes <input type="checkbox"/> No Fireplace <input type="checkbox"/> Yes <input type="checkbox"/> No
Size _____ sq ft	# of Levels or Floors <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	Garage: <input type="checkbox"/> Attached <input type="checkbox"/> Detached <input type="checkbox"/> Carport

Mortgagee Information: (ISAOA) (ATIMA)

Loan #: _____
Closing Date: _____

We Want Your Homeowners and Flood Insurance Business!!!