



6300 W 143rd St Ste 120
Overland Park, KS 66223
(913) 904-1020
info@aspireins.com

Date: _____

Investment Property Quote Information

Owner Information

Primary Contact Name: _____ DOB: _____

Ownership Name: _____ Tax ID (FEIN/ Owner SSN): _____

Entity type: Individual Corporation LLC Trust Estate Partnership Non-Profit

of Owners: _____ Additional Names: _____

Primary Mailing Address: _____ Years of Experience:- _____

Primary phone: _____ Primary Email: _____

Property Information

Address 1: _____ Year Built: _____ Sq Ft Above Grade: _____

of Stories: _____ # of Units: _____ Foundation Type: Slab Basement Crawlspace

% Tenant Occupied: _____ % Owner Occupied: _____ Approx Market Value:\$ _____

Annual Revenue:\$ _____ Sprinklered?: Y N Central Fire Alarm?: Y N

Office Occupancy?: Y N Currently Insured? Y N

Address 2: _____ Year Built: _____ Sq Ft Above Grade: _____

of Stories: _____ # of Units: _____ Foundation Type: Slab Basement Crawlspace

% Tenant Occupied: _____ % Owner Occupied: _____ Approx Market Value:\$ _____

Annual Revenue:\$ _____ Sprinklered?: Y N Central Fire Alarm?: Y N

Office Occupancy?: Y N Currently Insured? Y N

Address 3: _____ Year Built: _____ Sq Ft Above Grade: _____

of Stories: _____ # of Units: _____ Foundation Type: Slab Basement Crawlspace

% Tenant Occupied: _____ % Owner Occupied: _____ Approx Market Value:\$ _____

Annual Revenue:\$ _____ Sprinklered?: Y N Central Fire Alarm?: Y N

Office Occupancy?: Y N Currently Insured? Y N

Use multiple forms if more space is needed.



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Underwriting Questions

Any Commercial Operations? (If Yes describe): Y N: _____

Is property professionally managed? Y N Does owner self-manage?: Y N

Is property used for student housing?: Y N

Does commercial cooking occur on the premises?: Y N

Is there a pool, hot tub, and/or spa at this location?: Y N

Is the porch or roofline sagging?: Y N

Are Functioning smoke/heat detectors installed?: Y N

Are there any structural issues?: Y N

Does property contain any knob and tube or aluminum wiring?: Y N

Does Property contain a wood-burning stove?: Y N

Are there any detached structures? (If yes, describe): Y N : _____

Are there any existing city/state housing code violations associated with this property?: Y N

Are there any local/state rental law, code or statute violations associated with this property?: Y N

Are locks changed or replaced upon a tenant leaving?: Y N

Does location have a wood shake roof?: Y N

When required, are the heating, electrical and plumbing systems serviced by a professional?: Y N

Is premises kept in a well-maintained condition?: Y N

Is the property on stilts?: Y N

Is the location greater than 2 stories?: Y N

Is there a mortgage on the property?: Y N

Loss Information

Address 1 - Losses at this location? (if yes, date and description): _____

Address 2 - Losses at this location? (if yes, date and description): _____

Address 3 - Losses at this location? (if yes, date and description): _____

Please allow up to 48 hours after for quote. An Agent will reach out if more information is needed.

Use multiple forms if more space is needed.