

The Butler Agency

BUILDER'S RISK QUOTE REQUEST

Date of Request: _____ Building Coverage: \$ _____
(at completion)

Contractor's Information

Contractor's Name: _____ Year's Exp: _____

Mailing Address: _____

City, State, ZIP: _____

Contact Phone: (C) _____ (O) _____

Email Address: _____

Project Information

Property Owner: _____

Property Location: _____

Intended Use of Building: _____

County of Property Location: _____ Length of Project: _____ (months)

Distance to Tidal Water: _____ (ft. or mi.)

Roof Type/ Material: _____

Foundation Type/ Material: _____

Construction Type: _____ No. of Stories: _____

Percentage of Building that is Glass: _____ % Impact Glass: Yes / No

Total Sq. ft. (inc. garage, porches etc.): _____ Bldg. Enclosure Date: _____

Foundation Pour Date: _____ Roof Topped Out Date: _____

Percentage Completed by Nov. 1? _____ % Written Contract? Yes / No

Flood Zone: _____ Flood Policy: Yes / No

Mortgagee Information: _____
