Information and planning steps you can use to make the most of...

Your Touch Point Advantage

COVERAGE REVIEWS

One of the best opportunities agents have to demonstrate their value to their customers is when they conduct coverage reviews.

Our customer research tells us that customers want to work with someone they can trust to help them make certain that their insurance needs are taken care of based on their own unique needs.

A COVERAGE

REVIEW

QUESTIONNAIRE

OR CHECKLIST

SENT TO THE

CUSTOMER IN

ADVANCE CAN

MAKE THE

PROCESS GO

MORE QUICKLY.

Our research also shows us that most customers would welcome a review conducted by their agent.

However, one of the biggest problems agents constantly face is finding the time.

Conducting a comprehensive coverage review

with a customer can be a quite lengthy process when you attempt to cover everything over the phone or face-to-face. In some cases customers don't have all the information in hand or they need time to think about the questions.

Having a coverage review questionnaire or checklist that you send to the customer in advance can make the process go more quickly and smoothly. It can also give you a better ability to focus attention on the customer and their needs instead of being distracted by collecting information and details during

the review itself.

You can pick and choose from the following list of questions to create a form to send customers in advance. This way you can tailor both the questions and the length of time needed for the review to your own needs and selling style.

You can also create a second version of your form.
Use the first version to send to your customer in advance and also have a second, more complete version in hand, to use during the review itself.

These tools are being made available for your use by PIA and The Partnership.



PIA recognizes and appreciates the participation and support of the following Partnership companies:

Central Insurance

Encompass

Erie Insurance

Harleysville

The Hartford

Liberty Agency Markets

MetLife Auto & Home

Motorists Insurance

Progressive

Selective

State Auto

Travelers

Use the following list of questions to help you decide which questions to ask on your own coverage review forms:

Personal Insurance Review:
We will use this review to evaluate your present coverage and if any changes are in order, we will contac
you. This information, like all of your personal business, will be kept in the strictest of confidence.
Full Name
Address
City
Email Email
Home Phone
Work Phone (Required)
Years at current residence
Occupation
Please note: Insurance coverage cannot be bound without a written binder from our office.
Policies presently owned
Personal automobile policy: My present policy expires MonthYear
Currently insured by
Homeowners policy: My present policy expires MonthYear
Currently insured by
Personal umbrella policy: My present policy expires MonthYear
Other policy May present policy expires MonthYear
Protection preferences:
Excessively low: Absolute minimum policy limits / coverage forms required by law or contract.
About average: Limits / coverage forms that offer average protection under typical circumstances.
Above average: Limits / coverage forms that are significantly better than average, when available.
Deductible preferences:
\$250 or less: I like my insurance to cover the little things even though the premiums are higher.
\$500 to \$1,000: Keep my premiums affordable, but maintain my coverage for serious dollar claims.
Over \$1,000: I am not concerned about minor claims. I'll pay for events below my deductible.
Contact preferences: In the future, you may contact me by the following method(s).
Check all that apply:
Telephone callEmailPostal mailNewsletter Other
Enter brief details on any personal insurance claims in the past X years:
Auto insurance:
Home insurance:
Other policy:

YOUR TOUCH POINT ADVANTAGE

Reason(s) why you are seeking anot		
·		Better quality of service
Better insurance company	Better coverage	
Other		
Would you consider adding excess I	iability insurance or increasing	g existing coverage?
Are you subject to floods? Would yo	u like to purchase flood cove	rage?
Regarding auto insurance, have you	J:	
Added or removed a driver	that we don't know about?	
Acquired or sold a vehicle w	ve don't know about?	
Decided you want to increa	se your liability coverage?	
Decided you want a higher	deductible to reduce premiu	ım amounts?
Changed how you drive you	ur vehicle to work?	
Had a driving student with a	'B' or higher average that no	ow qualifies for a Good Student Discount?
Would you be interested in a person million is approximately \$150.00 annuments		over your home and auto? The cost for \$1
Would you like to add earthquake c	coverage? Approximate cost	is .35 per thousand.
Are you satisfied with the service you	u are receiving?	
Are you pleased with our service?		
Do you have a mortgage term life in	nsurance policy?	
Do you have any questions or comm	nents about your insurance pr	rotection?
Is there anything we can do that we	are not?	
Would you like disability income, in t	he case of an accident or sic	:kness?
Would you like to review your need to	for long term care insurance?	!
Would you like your life insurance rev	viewed?	
Would you like information on medic	cal insurance?	
Are you interested in Identity Theft Pr	rotection?	
Do we insure all vehicles in your house	sehold? If not, please provide	e the number and where they are insured in

Do we insure all vehicles in your household? If not, please provide the number and where they are insured in the comment box located at the end of this form.

Do you conduct any business (including daycare) in your home?

Do you need insurance on your business?

Do you need to review or purchase life insurance coverage?

Do you own a boat or jet ski?

Do you own a business?

Do you own any business equipment?

Do you own any cars, trucks, motorcycles or motorhomes that we do not insure for you?

YOUR TOUCH POINT ADVANTAGE

Do you own any other home or rental property we do not insure? If so, please describe locations in the comments box at the end of this form.

Do you own any other motorized vehicles, such as a moped, motorcycle, mini-bikes, boats, golf carts, etc.

Do you own or rent any other homes by yourself or with others that we do not insure?

If we do not insure your home, when does your home insurance renew?

If we do not currently insure your home, would you like us to review your current coverage?

If we do not insure your auto presently, would you like us to review it?

Would you like information on a Trust?

Would you like information on disability protection?

Send me more information on...

Home

Life

Valuable Items

Financial Planning

Auto

Health

Excess Liability

Business

Other

Do you have any employees?

Do you need coverage for backup of sewers, flood or earthquake?

Is any student at school over 100 miles from primary residence?

Are you interested in increasing your liability coverage or uninsured/underinsured?

Are you interested in purchasing a \$1,000,000 Umbrella Liability Policy?

Do any of your vehicles have custom equipment?

Do you drive a company car or other vehicle on a regular basis: Do you drive a vehicle is used in business?

Do you have a loan on a vehicle on your policy?

Do you have any outbuildings or separate garages on your property?

Do you serve on charitable, social or government boards?

Have you done any remodeling or made other improvements to your home?

Is the amount of insurance on your home less than it would take to rebuild it?

Would you be interested in a broader coverage on your contents?

Do you have collectibles such as antiques, fine arts, stamps or coins?

Do you own jewelry, furs or silverware valued at over \$1000?

Do you have any special equipment that may need to have special coverage?

Do you own any costly sporting goods, guns or musical instruments?

Do you own any jewelry, fine arts, silverware, furs, computers you would like to list on the policy? If so, please send us the details as your policy currently limits the coverage on these items.

Do you want to add rental reimbursement for your auto if your vehicle is damaged in an accident?

Do you want to add towing coverage for disablement of your vehicle?

If you do not have this protection now, would you like to add full glass, towing, or rental?

Is any vehicle driven less than 12,500 miles a year?

Is the garaging address for any auto is different from your residential address?

Within the past year, have you:

Made new improvements or upgrades? (addition/remodel)

Had a student living away at school that we didn't know about?

Installed a burglar/fire alarm or dead bolt locks? (possible credit)

Decided you need new or additional Water Back-Up coverage?

Decided you need new or additional Flood or Earthquake coverage?

Purchased, inherited, or been gifted items that need to be covered?

Checked the VALUE lately for your currently insured items? (We can only pay up to the amount that is insured.)

Put valuable items in a bank vault that used to be at home?

Would you like to add home extended replacement protection?

Would you like to add replacement cost on your contents if you do not have it already?

Would you like us to increase your liability limits?

Are all of the licensed drivers in the house listed on the policy?

Do you have a woodstove? Please state the last time it was inspected in the comment box at the end of this form.

Do you have burglar, fire alarms, or smoke detectors? If so, please state which in the comments box located at the end of this form. We want to make sure you are getting proper credits.

Do you own a pool?

If you do own a pool, does it have any features or water slides?

Do you have home, condo or renter insurance with another company?

Does your spouse have a separate auto policy?

Please indicate protection options you are interested in. Not all options are available with all insurance carriers that we represent.

Accident forgiveness

Auto loan/lease gap coverage

Disappearing deductible

Vehicle must have full coverage

New vehicle replacement value

Pet injury related to accident- up to \$500

Comments: Please provide any additional comments that will help us make sure you have the appropriate protection:

Additional Comments or Questions:

YOUR TOUCH POINT ADVANTAGE

If you've had changes in your life or are not sure if we have all the information we need, please complete the information below:

ADDITIONAL COMMENTS: