

Client Name:

Date:

1. Are there coverage concerns or additional insurance needs you would like to discuss?
2. Have there been any significant events in your life since we last met?
(This may include getting married or divorced, having children, changing jobs, acquisition of new property, etc.)
3. Do you have insurance policies at other carriers?
(If so, please provide the policy type, carrier name, and if available the policy number.)
4. Is there anything you would like to see happen differently in our communication in the coming year?

Please identify your preferences when it comes to communication.

Do you prefer communication by:

by email

phone

text message

How often would you like to review your insurance policies?

every other year

annually

as I (the client) need

5. Are there any final thoughts you would like to share?

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