HANDY HOUSEHOLD CHECKLIST

USE THIS HANDY HOUSEHOLD CHECKLIST TO HELP DETERMINE YOUR INSURANCE NEEDS

	VALUE
LOUNGEROOM	
Wall to Wall Carpet	$_____
Rugs/Mats	$_____
Colour TV	$_____
Stereo Equipment	$_____
Video Recorder	$_____
Records/Tapes	$_____
Piano/Organ etc.	$_____
Lounge Suite	$_____
Coffee Table/s	$_____
Book Case/Books	$_____
Wall Unit/s	$_____
Bar/Alcoholic Beverages	$_____
Ornaments/Pictures	$_____
Curtains/Drapes	$_____
Other	$_____
Total	$_____
DINING / FAMILY ROOM	
Wall to Wall Carpet	$_____
Rugs/Mats	$_____
Sideboard/Buffet/Table & Chairs	$_____
Crockery/Cutlery/Glasses	$_____
Curtains/Drapes	$_____
Other	$_____
Total	$_____
CLOTHING	
Clothes	$_____
Shoes	$_____
Total	$_____

	VALUE
KITCHEN/BATHROOM/LAUNDRY	
Refrigerator	$_____
Freezer	$_____
Dishwasher	$_____
Kitchen Table & Chairs	$_____
Cutlery/Crockery/Glasses	$_____
Pots & Pans	$_____
Food/Food Containers	$_____
Blender/Frypan	$_____
Toaster	$_____
Electric Jug	$_____
Cake Mixer/Food Processor	$_____
Scales	$_____
Stools	$_____
Washing Machine	$_____
Clothes Dryer	$_____
Iron	$_____
Ironing Board	$_____
Linen (Kitchen/Bathroom)	$_____
Other	$_____
Total	$_____
GENERAL HOUSEHOLD ITEMS	
Heaters/Fans	$_____
Sewing Machine	$_____
Vacuum Cleaner/Polisher	$_____
Lawnmower	$_____
Garden Tools	$_____
Electric Power Tools	$_____
Rubbish Bin	$_____
Bicycles	$_____
Pot Plants	$_____
Other	$_____
Total	$_____

	VALUE
ALL BEDROOMS	
Wall to Wall Carpet	$_____
Rugs/Mats	$_____
Beds/Mattresses	$_____
Wardrobes	$_____
Dressing Tables/Chests	$_____
Bedside Tables	$_____
Mirrors & Lamps	$_____
Portable TV	$_____
Radios/Alarms/Clocks	$_____
Blankets/Sheets	$_____
Photos/Pictures	$_____
Baby Furnishings	$_____
Cosmetics	$_____
Toys	$_____
Other	$_____
Total	$_____
VALUABLES, FURS, CAMERAS, PAINTINGS ETC	
Paintings/Pictures	$_____
Jewellery	$_____
Watches	$_____
Camera/Projector	$_____
Other	$_____
Total	$_____
MISCELLANEOUS SECTION	$_____
e.g. Hobbies	$_____
Pool Table	$_____
Spectacles	$_____
Sports Equipment	$_____
Total	$_____

TOTAL WORTH OF HOUSEHOLD CONTENTS	$_____
INSURANCE ON ABOVE PROPERTY	$_____
INCREASE REQUIRED, IF ANY	$_____