

# HMS HOME WARRANTY APPLICATION

Contract # or Order Confirmation Number (Provided by HMS)

## PROPERTY INFORMATION

Property Address to be Covered \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing address if different from above \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

This mailing address is for:  Buyer  Seller

## SELLER INFORMATION

Name(s) \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

Listing Start Date \_\_\_\_\_ Listing End Date \_\_\_\_\_

## BUYER INFORMATION

Name(s) \_\_\_\_\_

Closing Date \_\_\_\_\_ Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

## AGENT INFORMATION

Real Estate Office/Member Broker No. \_\_\_\_\_ Main Office Phone Number \_\_\_\_\_

Real Estate Office Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Real Estate Agent Name \_\_\_\_\_

Real Estate Agent E-mail Address \_\_\_\_\_ Real Estate Agent Cell Phone \_\_\_\_\_

**Disclosure:** In addition to representing the home seller and/or buyer, the named real estate agent/company also will be completing certain warranty-related processing, administrative and other services. Your charge for this warranty may include an amount paid to the real estate agent/company for performing these services.

**This coverage includes only those systems, appliances and components that were in proper operating condition at the contract effective date. The following systems, appliances and components should be excluded from coverage:**

**Acceptance of Coverage:** Applicant acknowledges that he/she understands the terms and conditions of coverage and authorizes closing agent to pay the required fees upon closing.

**Waiver of Coverage:** I hereby decline the protection plan that has been presented to me. I agree to hold real estate broker and agent harmless in the event of a subsequent mechanical failure that otherwise would have been covered under the protection plan.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### PAYMENT

Please make checks payable to : HMS Home Warranty  
Mail to: P.O. Box 559003 Fort Lauderdale, FL 33355-9003

## 1. PLANS & PRICING

**Buyer:** Coverage to begin at closing \$489

**Seller/Buyer:** Coverage to begin at enrollment, converts to buyer at closing \$489

**Seller Air/Heat Coverage (Optional)** \$75

**Existing Homeowner:** No real estate transaction \$489

**Duplex (2 attached units)** \$639

*For coverage on duplex units for Sellers, please call for a quote.*

**New Home Construction (Years 2-4)\*** \$589

*\*Not Available on Multi-Unit*

## 2. ADDITIONAL SYSTEMS & COMPONENTS

Each Additional Central Heating \$100

Each Additional Central A/C \$50

Each Additional Refrigerator \$25

## 3. OPTIONAL BUYER ONLY COVERAGE (Each Item, Per Unit)

*Prices are based on single items; Multiples of each item can be purchased*

Deductible Buy Down (to \$50) \$100

Outside Gas Line \$60

Outside Sewer Line \$60

Outside Water Line \$60

Outside Gas/Sewer/Water Line (combo) \$120

Pool \$205

Spa \$205

Combo Pool/Spa (shared equipment) \$205

Septic Tank/Pumping \$45

Water Softener \$50

Well Pump System \$75

Well Pump System w/Booster Pump \$150

**Premier Upgrade Package (\$1,000)\*** \$89

**\*The Premier Upgrade Package (PUP) provides Buyers with extra coverage for items excluded under any home warranty. Some examples include, but not limited to: fees required for permits mandated by federal or local government, upgrades as required when replacing heating or air systems and non covered items associated with a covered claim. See Terms, Conditions and Limitations in the Agreement.**

## 4. TOTAL DUE AT CLOSING

Total All Fees: (Sections 1, 2, and 3) \$ \_\_\_\_\_

7% Sales Tax (South Dakota only) \$ \_\_\_\_\_

**For multiple years, multiply the total by the number of years:**

\$ \_\_\_\_\_ X \_\_\_\_\_ = \$ \_\_\_\_\_  
(Total of All Fees with tax) (Number of Years) (Total Price)

**Warranty Funded By:**  Seller  Buyer  Other

### TO ENROLL:

- Online: [www.hmsnational.com](http://www.hmsnational.com)
- E-mail: [enroll@hmsnational.com](mailto:enroll@hmsnational.com)
- Phone: 1.800.247.3680
- Fax: 1.800.468.7307

**DO NOT CALL A CONTRACTOR YOURSELF. TO FILE A CLAIM CALL: 888.432.1033.**

**Coverage is subject to a Trade Service Call fee up to your deductible of \$100 per service call, per trade agent unless the optional lower deductible is purchased. Additional charges may apply to certain repairs or replacements.**