



Home Warranty Application

EASY ENROLLMENT OPTIONS

Online: own.onlinehsa.com

Phone: 800.367.1448

Mail WITH payment: HSA, P.O. Box 650993 • Dallas, TX 75265-0993

Mail WITHOUT payment: HSA, 1524 US HWY 30 E • Carroll, IA 51401

HSA Policy Number
(for your reference)

PROPERTY INFORMATION (REQUIRED)

937 Orchard St

Property Address to be Covered

Racine WI 53405

City

State

Zip

Listing Expiration Date (if selling)

REAL ESTATE PROFESSIONAL INFORMATION

COOPERATING REAL ESTATE ASSOCIATE: ☐ BUYER ☐ SELLER

Shorewest Realtors

Real Estate Company Information

Main Office Number

Agent Mobile Phone Number

Robin Polzin

rpolzin@shorewest.com

Agent Name

Agent Email

COOPERATING REAL ESTATE ASSOCIATE: ☐ BUYER ☐ SELLER

Main Office Number

Agent Mobile Phone Number

Agent Name

Agent Email

CLOSING INFORMATION

Escrow/Closing/Title Company

Main Office Phone Number

Fax Phone Number

ESTIMATED CLOSING DATE

Closing Number

Closing Representative Name

Email Address

SELLER INFORMATION

David Johnson

First Name

Last Name

(262) 498-5677

djohnson53789@gmail.com

Phone Number

Email Address

Mailing Address - Only if different from covered property

BUYER INFORMATION

First Name

Last Name

Phone Number

Email Address

Mailing Address - Only if different from covered property

*If the upgrade package has been selected and the property is a multiple family dwelling, the upgrade must be purchased for each unit.

**Not available on multi-year properties.

†Not available for condos/townhomes/mobile homes.

‡Add tax where required by law. To obtain exact tax amounts please call 800.367.1448. Final tax will be calculated on the order confirmation.

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SELECT COVERAGE DESIRED: \$100 Trade Call Fee

COVERAGE:

☐ Buyer and Seller Coverage

(Seller Coverage is not available for multi-family dwellings.)

☐ Buyer Coverage Only

	1 YEAR	2 YEAR	NEW CONSTRUCTION (YEARS 2-4) (Coverage begins one year after closing)
Single family (SFH)	☒ \$520	☐ \$1,040	☐ \$640
Condo/townhome/mobile home	☐ \$480	☐ \$960	☐ \$590
Duplex	☐ \$750		
Triplex	☐ \$1,125		
Fourplex	☐ \$1,500		
Call 800.367.1448 for optional coverage pricing.			

SELLER HVAC OPTION

Central heat,
air conditioning/heat pump

(Only available when Buyer and Seller Coverage
is purchased.)

☐ \$60

☐ \$60

BUYER OPTIONS

Call 800.367.1448 for condo new construction, buyer condo/townhome mobile homes, duplex, triplex, fourplex and coverage pricing.

	SFH	SFH	SFH NEW CONSTRUCTION
BUYER 7 STAR UPGRADE*	☐ \$149	☐ \$298	☐ \$149
Electronics Protection Plan**	☐ \$216		
Water well pump/septic system†	☐ \$100	☐ \$200	☐ \$125
Water softener	☐ \$40	☐ \$80	☐ \$50
Electronic air cleaner	☐ \$40	☐ \$80	☐ \$50
Clothes washer and dryer	☐ \$70	☐ \$140	☐ \$85
Home freezer	☐ \$40	☐ \$80	☐ \$50
Hot tub	☐ \$125	☐ \$250	☐ \$155
Swimming pool†	☐ \$150	☐ \$300	☐ \$185
Pool/hot tub combination (Must share common mechanicals)†	☐ \$175	☐ \$350	☐ \$215

TOTAL

Subtotal \$ _____

Sales Tax‡ \$ _____

Total (payment due at closing) \$ _____

Please mail payment in with application.

Coverage Limitations: Some limitations and general exclusions apply to covered items. Please read the sample contract section of this brochure for details.

ACKNOWLEDGEMENT: By application for this contract, seller and/or buyer represent that, to the best of their knowledge, all Component Parts are in Proper Working Order on the date of application for this coverage. Proper Working Order means that the Component Parts are functioning as intended and expected for its age, and within the safety standards as established by the system manufacturer. Further, seller and/or buyer agree that failure to notify Home Security of America, Inc. ("HSA") prior to repair or replacement of any Component Part may result in a refusal of coverage on that Component Part.

HSA discloses to the purchaser of this home warranty, and the purchaser consents and acknowledges by his/her signature that the real estate brokerage associated with the initiating real estate associate may receive a minimal fee for services rendered in marketing or administering the sale of this home warranty plan.

Coverage Desired: ☒ Seller and Buyer Coverage ☐ Buyer Coverage Only

Applicant signature _____ Date _____

WAIVER: Purchase of this home warranty is not mandatory. HSA home warranty is not the only home warranty available. No other services are contingent upon the purchase of a home warranty. I have reviewed the Home Warranty Protection plan and hereby decline coverage. I agree to hold the real estate broker and real estate professional harmless in the event of a subsequent mechanical failure which otherwise would have been covered under the warranty plan.

Signature David Johnson Date 9/16/2026

HSA22 - TN. WI