

## FLOOD APPLICATION FORM

### APPLICANT DETAILS:

Insured: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

### UNDERWRITING INFORMATION:

NFIP Flood Zone: \_\_\_\_\_

Foundation Type: \_\_\_\_\_

If Basement, how much of value is below ground: \_\_\_\_\_

Date of Construction: \_\_\_\_\_

Square footage: \_\_\_\_\_

Number of Floors (excluding basement): \_\_\_\_\_

Building built on driven pillings:  Yes  No

Is Building Elevated:  Yes  No If yes, at what height: \_\_\_\_\_

Construction (check any that apply):  Frame  Fire Resistive  Masonry  Other: \_\_\_\_\_

Primary Residence:  Yes  No

Any prior Flood losses?  Yes  No If Yes, please attach loss run or description of loss(es)

### OCCUPANCY (CHECK ALL THAT APPLY):

Single Family  Residential Apartment/Duplex\*  Commercial

Residential Condominium\*  Commercial Condominium\*

\*If checked, # of units: \_\_\_\_\_

If a business, please describe operation: \_\_\_\_\_

If business and contents coverage is desired, please provide a description of contents/inventory and how it is stored: \_\_\_\_\_

### TOTAL VALUES:

Buildings (100% Replacement Cost Values) \$ \_\_\_\_\_

Contents (100% Replacement Cost Values) \$ \_\_\_\_\_

Business Income/Rental Value (12 months) \$ \_\_\_\_\_

## FLOOD LIMITS REQUESTED:

Buildings \$ \_\_\_\_\_  
 Contents \$ \_\_\_\_\_  
 Business Income/Rental Value \$ \_\_\_\_\_







## CHECKLIST

- Elevation Certificate attached if property is Post-Firm and located in an A or V Flood Zone?  Yes  No
- If NFIP is underlying, require a copy of the underlying NFIP declaration page. Attached?  Yes  No
- If underlying is an All Risk policy, require sight of the underlying Flood wording. Attached?  Yes  No
- Completed application with the Insured's signature and date of signing:  Yes  No

I confirm that to the best of my knowledge, all information provided above is complete, true and correct. Failure to declare material facts may result in Coverage being wholly or partially limited in the event of a claim.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Mortgagee(s)/AI(s): \_\_\_\_\_

Building Type	Diagram No	Building Type	Diagram No
 <b>Slab on Grade (Non-Elevated)</b>	1A, 1B, and 3	 <b>Basement (Non-Elevated)</b>	2A, 2B, and 4
 <b>Crawlspace (Elevated or Non-Elevated Subgrade Crawlspace)</b>	8 or 9	 <b>Elevated without Enclosure on Posts, Piles, or Piers</b>	5
 <b>Elevated with Enclosure Not on Posts, Piles, or Piers (Solid Foundation Walls)</b>	7	 <b>Elevated with Enclosure on Posts, Piles, or Piers</b>	6