



## *Agent Information*

Agent:

Agency Code:

Contact:

Phone:

Email:

New                      Renewal

Policy Number:

# National Flood Insurance Application

Please read this application carefully and complete all sections.

## Section I – Applicant:

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

Mailing Address: \_\_\_\_\_

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

Property Location: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Section II – Underwriting Information:

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

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

If Post-FIRM Construction and Zone A or V, elevation certificate must be attached.

Occupation: Single Family: \_\_\_\_\_ Commercial \_\_\_\_\_ Residential Duplex/Apartment: \_\_\_\_\_ # of Units: \_\_\_\_\_

Residential – Condominium: \_\_\_\_\_ # of Units: \_\_\_\_\_ Commercial – Condominium: \_\_\_\_\_ # of Units: \_\_\_\_\_

If a business, description of operations: \_\_\_\_\_

Construction Type: Frame: \_\_\_\_\_ Fire Resistive: \_\_\_\_\_ Masonry: \_\_\_\_\_ Other: \_\_\_\_\_

Number of floors including basement: \_\_\_\_\_

Square footage of lowest floor? \_\_\_\_\_

### Basement Information:

Basement or enclosure: Yes \_\_\_\_\_ No \_\_\_\_\_ Finished \_\_\_\_\_ Unfinished \_\_\_\_\_

If yes, are all 4 sides below grade? : Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, are wash through or breakaway walls present? : Yes \_\_\_\_\_ No \_\_\_\_\_

Machinery and equipment within the basement or crawl space?

Furnace or Boiler: \_\_\_\_\_ Heat Pump: \_\_\_\_\_ Air Conditioner: \_\_\_\_\_ Hot Water Heater: \_\_\_\_\_

Oil Tank: \_\_\_\_\_ Elevator Equipment: \_\_\_\_\_ Cistern: \_\_\_\_\_ Other Machinery: \_\_\_\_\_

List total value of machinery & equipment: \_\_\_\_\_

### Elevated Building:

Is the building elevated? : Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, at what height? \_\_\_\_\_ ft.

If yes: On Pilings: \_\_\_\_\_ Concrete Piers/Columns: \_\_\_\_\_ Concrete Shear Walls: \_\_\_\_\_ Solid Perimeter Walls: \_\_\_\_\_

If yes, are wash through or breakaway walls present? : Yes \_\_\_\_\_ No \_\_\_\_\_

Is area below the raised floor enclosed? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes size of enclosure in square feet? \_\_\_\_\_

If yes, is area enclosed with:

Light Wood Lattice: \_\_\_\_\_ Masonry Walls: \_\_\_\_\_ Solid Walls: \_\_\_\_\_ Breakaway Walls: \_\_\_\_\_ Insect Screening: \_\_\_\_\_



Dual Commercial

Does Area have flood vents, openings or breakout panels? Yes No

Garage Information:

None Attached Detached Total Square Feet \_\_\_\_\_

Additional Information:

Is there a mid-level foyer in the building? Yes No Size of the mid-level foyer? \_\_\_\_\_

Is mid-level foyer used for purposes other than building access? Yes No

Are there elevators below the base flood elevation? Yes No

Number of elevators : \_\_\_\_\_

Elevator enclosure material? Please describe \_\_\_\_\_

Property Purchase Date \_\_\_\_\_ Is policy for: Owner Tenant

Is the intended use of the building for business? Yes No

Is the building a rental property? Yes No

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

Distance to closest body of water: \_\_\_\_\_ Ocean: \_\_\_\_\_ River: \_\_\_\_\_ Other: \_\_\_\_\_

Section III – NFIP Limits Required:

Requested effective Date: \_\_\_\_\_

Total insurable values Building replacement cost: \$ \_\_\_\_\_ Contents replacement cost: \$ \_\_\_\_\_

Requested NFIP Limits: Building: \$ \_\_\_\_\_ Contents: \$ \_\_\_\_\_ Deductible: \$ \_\_\_\_\_

Section IV – Mortgagee Information:

Primary mortgagee: \_\_\_\_\_ Loan #: \_\_\_\_\_

Mailing address: \_\_\_\_\_

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

Section V – Notice to Insured:

Note: This application shall become a part of the Certificate. I/We hereby declare that the above statements and particulars are true, that I/we have not suppressed or misstated any material facts and I/we agree that this Application form shall be the basis of the Contract with Underwriters.

Signature of Applicant (Insured)

Date