Personal Flood Insurance Policy Application

Policy Form	Policy Type
House Connective Connective	New □ Endorsement □
Cooperative Other permanent structure	Current Flood Policy #:
Other permanent of detailed	Current recurrency n.
Requested Policy Effective Date:	
Writing Company: Fodoral Incurance Compan	at the Insured Property Location
Writing Company: Federal Insurance Compan	<u>y</u>
Producer Name	
Producer Street Address	
Producer City/State/Zipcode	
Producer Phone Number	
Producer Number	
Sub-producer Number	
Insured's Name:	
Mailing Address:	
City/State/Zipcode:	
Property Address (If different from Insured's Mailing ad	ddress above – do not use P.O. Box)
Property Location:	
City/State/Zipcode:	
Corresponding Chubb Homeowners policy numb	per
If House coverage is being requested, what is th Homeowners Policy? \$	e house amount of coverage on the Chubb
If Contents coverage is being requested, what is Homeowners Policy? \$	the contents amount of coverage on the Chubb

Flood Zone:Month & Year	Built/Substanti	al Improvement	Date:		
County/Parish: Co		Comm#:			
		2-4 family □			
Mortgagee's name:					
Loan number:					
Address: City/State/Zipcode:					
Other additional interest:					
Reference number:					
Address:					
City/State/Zipcode:					
Coverage and Premium:	Total coverage	Increased			Total premium
Dwelling or other permanent structure	amount	coverage amount	Rate	Premium	
Contents					
Additions and alterations					
Contents in a basement - \$15,000 plus					
Real property in a basement - \$30,000 plus					
Additional living expenses - \$7,500 plus					
Rebuilding to code - \$30,000 plus					
Deductible:		Deductible credit or charge			
		Subtotal			
		State surcharge State tax			
		Total Prepaid Amount			
Payment Option: Full Premium	Attached ¬	Bill Me □ Bill	Mortgag		Other
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	ne above statements are corr atements may be punishable		•	lge. I understand that any false under applicable law.
Si	gnature of Insured or Produc	er .	Date	Daytime phone number
Pr	roducer Name	<u>-</u>	City/State	
Lic	cense Number			
Вι	uilding Information (or atta	ch printout fr	om rating disk):
		WEST ELEVATE		AGE BELOW THE OR IN A BASEMENT. POLICY.
1.		Rated, submit	Certification ar	H, V, V1-V30, and if Pre-Firm and complete elevation data below: es A, AO, and AH.)
	Building Diagram #	Тур	e of Cert: None	e With BFE Without BFE
	Lowest Floor Elevation: (Nearest Est Foot +/-)		Base Flood Ele	evation: equals Elev Diff
	Highest Adjacent Grade (H.	AG):		
	Lowest Adjacent Grade (LA	،G):		
	Is Dwelling Flood-Proofed:	Yes □ No	O 🗆	
2.	Distance from nearest oceawater? Yes No	ın/gulf/river/lak	ke:	Within 1,000 feet of a major body of
3.	Is dwelling substantially imp	proved? Yes	□ No □	
4.	Is dwelling in course of con- Yes No	struction? Yes	s □ No □ Is dv	welling the insured's principal residence?
5.	Is building elevated (include	es dwelling cra	wl spaces)?	Yes □ No □
6.	Is the area below the elevation	ted floor enclo	sed? Yes	□ No □
	Type of enclosure walls: B	Breakaway □	Lattice	Solid perimeter □
	C	Other (describe	e)	

7.	Basement enclosed area: None □ Finished □ Unfinished □						
8.	Is the lowest floor living area off ground by means of: Piers □ Posts □ Piles □ Columns □ Solid perimeter walls □ Parallel shear walls □						
	Other (describe)						
9.	Does basement or enclosed area contain machinery and equipment? Yes No						
10	0. Garage or enclosed area is used for: Parking/Storage/Access: □						
	Other (describe)						
11	11.Number of floors in entire building (including basement/enclosed area, if any): 1 floor □ 2 floors □ 3 or more floors □						
	If condo/co-op, what floor is your unit on? 1^{st} floor \square 2^{nd} floor \square 3^{rd} floor or higher \square						
	Do you have access to basement storage? Yes □ No □						
12	Type of building: Split-level □ Townhouse/Rowhouse □ Condo/Co-op □						
13	Any flood or water damage losses, <i>paid or unpaid,</i> in the last 10 years? Yes □ No □						
	Date of loss Amount of loss (Use Notes section below for loss details)						
14	Location of contents:						
	Basement only (limited coverage) Basement and above						
	Lowest floor only – Lowest floor above ground level & higher floors □						
	Above ground level one full floor or more $\ \square$						
No	tes:						
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