



FLOOD APPLICATION

APPLICANT INFO

Applicant Name:
Co-Applicant Name:
Mailing Address: City: State: Zip:

RISK INFORMATION

Risk Address: City: State: Zip:
Occupancy: (Dwelling: Primary/Secondary/Tenant/Vacant) (Commerical: Condo, Retail, Office Bldg., Restaurant, Other)

CONSTRUCTION

FLOOD INFORMATION

Frame/Masonry/Fire-Resist: Primary or Excess Flood:
Number of Stories: Flood Zone:
Is there a Basement?: (None/Unfinished/Finished) Located in a CBRA Zone?: (Yes/No)
Is there an Enclosure?: (Yes/No) Base Flood Elevation:
Is the Building Elevated?: (Yes/No) Lowest Floor Elevation:
Foundation: (Slab/Pilings/Crawspace) Elevation Difference:
Year Built: Any Prior Flood Losses in Last 5 Years: (Yes/No)
Square Feet: Any Portion of the Building Over Water?: (Yes/No)
Post-Firm OR Pre-Firm

LIMITS

Replacement Cost Building: Building Limits: Deductible:
Contents Limits: Deductible:
ALE/BI Limits: Deductible:

MORTGAGEE

First Mortgagee: Name: Address: City: State: Zip: Loan #:
Second Mortgagee: Name: Address: City: State: Zip: Loan #:

AGENCY

PREMIUM

Agency Name: Agency Address: Agency City: Agency State: Agency Zip:
Base Premium: Total Fees: Taxes: Total Premium:

DISCLOSURE

Effective Date:

The applicant warrants the truthfulness of the information on this application. Any misrepresentation and/or concealment herein will void all coverage.

Applicant Signature: Date:
Producer Signature: Date: