

Excess Flood Application

GENERAL INFORMATION

Insured :
Mailing Address :
Property Address (if different to above)

UNDERWRITING INFORMATION

100% R.C Values : Building (s) \$ _____ Contents \$ _____ B.I. \$ _____ (12 months)

Primary Carrier _____ **Policy No:** _____

NFIP Flood Zone _____

OCCUPANCY (check all which apply):

Residential

Single Family Condominium # of Condo Units _____ Apartment Primary Residence? Yes No

Commercial Building

Office Building Hotel/Motel Other (describe operation) _____

Commercial Contents

If Contents coverage required, describe type of Contents _____

Is Contents Skidded or Shelved? Yes No If Yes, at what height? _____ ft

CONSTRUCTION

a) Type: Frame Masonry Fire Resistive Other (describe) _____

b) Year Built _____

c) Buildings on driven pilings? Yes No . If Yes, what type? _____

d) Is first Floor Parking only? Yes No

e) Basement or enclosure? Yes No if Yes, are Wash Through or Breakaway Walls present? Yes No

f) Square Footage of the Lowest Floor? _____ sf.

g) Number of stories? _____

LOSS RECORD

Any Flood losses past 5 years Yes No

if yes, amount (s) and date (s) loss(es) _____

ADDITIONAL INFORMATION REQUIRED:

- Elevation Certificate for all Flood Zone A / V properties
- Copy of underlying NFIP Declaration Page
- If underlying is an All Risk Policy, require underlying Flood wording.

REQUESTED COVERAGE

Buildings: Limit \$ _____ Contents: Limit \$ _____ Loss of Income \$ _____

Effective Date Required _____

INSURED SIGNATURE: _____