

**Excess Flood Insurance Policy  
Application**

**Policy Form** House  Condominium   
Cooperative   
Other permanent structure

**Policy Type**  
New  Endorsement

Underlying Flood Policy #: \_\_\_\_\_

Requested Policy Effective Date: \_\_\_\_\_ 12:01 AM Standard Time  
at the Insured Property Location

Writing Company: **Federal Insurance Company**

Producer Name \_\_\_\_\_

Producer Street Address \_\_\_\_\_

Producer City/State/Zipcode \_\_\_\_\_

Producer Phone Number \_\_\_\_\_

Producer Number \_\_\_\_\_

Subproducer Number \_\_\_\_\_

Insured's Name: \_\_\_\_\_

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

City/State/Zipcode: \_\_\_\_\_

Property Address (If different from Insured's Mailing address above – do not use P.O. Box)

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

City/State/Zipcode: \_\_\_\_\_

Corresponding Chubb Homeowners policy number \_\_\_\_\_

Effective \_\_\_\_\_ to \_\_\_\_\_

If House coverage is being requested, what is the house amount of coverage on the Chubb Homeowners Policy? \$ \_\_\_\_\_

If Contents coverage is being requested, what is the contents amount of coverage on the Chubb Homeowners Policy? \$ \_\_\_\_\_

Flood Zone: \_\_\_\_\_ Month & Year Built/Substantial Improvement Date: \_\_\_\_\_

County/Parish: \_\_\_\_\_ Comm#: \_\_\_\_\_

Building Occupancy: Single family  2-4 family

Mortgagee's name: \_\_\_\_\_

Loan number: \_\_\_\_\_

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

City/State/Zipcode: \_\_\_\_\_

Other additional interest: \_\_\_\_\_

Reference number: \_\_\_\_\_

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

City/State/Zipcode: \_\_\_\_\_

**Coverage and Premium:**

	Self insured retained limits	Total coverage amount	Increased coverage amount	Rate	Premium	Total premium
Dwelling or other permanent structure	\$250,000					
Contents	\$100,000					
Additions and alterations	\$250,000					
Contents in a basement	\$100,000					
Real property in a basement	\$250,000					
Additional living expenses - \$7,500 plus						
Rebuilding to code	\$250,000					
					<b>Subtotal</b>	
					<b>State surcharge</b>	
					<b>State tax</b>	
					<b>Total Prepaid Amount</b>	

Payment Option: Full Premium Attached  Bill Me  Bill Mortgagee  Bill Other

The above statements are correct to the best of my knowledge. I understand that any false statements may be punishable by fine and/or imprisonment under applicable law.

\_\_\_\_\_  
Signature of Insured or Producer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Daytime phone number

\_\_\_\_\_  
Producer Name

\_\_\_\_\_  
City/State

\_\_\_\_\_  
License Number

**Building Information (or attach printout from rating disk):**

**NOTE: THERE IS LIMITED COVERAGE BELOW THE  
LOWEST ELEVATED FLOOR AND/OR IN A BASEMENT.  
PLEASE REFER TO THE POLICY.**

1. If Post-Firm construction in Zones A, A1-A30, AE, AO, AH, V, V1-V30, and if Pre-Firm construction and Elevation-Rated, submit Certification and complete elevation data below: (Certification optional for non-basement buildings in Zones A, AO, and AH.)

Building Diagram # \_\_\_\_\_ Type of Cert: None  With BFE  Without BFE

Lowest Floor Elevation: \_\_\_\_\_ **minus** Base Flood Elevation: \_\_\_\_\_ **equals** Elev Diff  
(Nearest Est Foot +/-) \_\_\_\_\_

Highest Adjacent Grade (HAG): \_\_\_\_\_

Lowest Adjacent Grade (LAG): \_\_\_\_\_

Is Dwelling Flood-Proofed: Yes  No

2. Distance from nearest ocean/gulf/river/lake: \_\_\_\_\_ Within 1,000 feet of a major body of water? Yes  No

3. Is dwelling substantially improved? Yes  No

4. Is dwelling in course of construction? Yes  No  Is dwelling the insured's principal residence?  
Yes  No

5. Is building elevated (includes dwelling crawl spaces)? Yes  No

6. Is the area below the elevated floor enclosed? Yes  No

Type of enclosure walls: Breakaway  Lattice  Solid perimeter

Other (describe) \_\_\_\_\_

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. Garage or enclosed area is used for: Parking/Storage/Access:

Other (describe) \_\_\_\_\_

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<sup>st</sup> floor  2<sup>nd</sup> floor  3<sup>rd</sup> floor or higher

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, *paid or unpaid*, 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 –  
above ground level  Lowest floor above ground level & higher  
floors

Above ground level one full floor or  
more

**Notes:**

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**Florida Fraud Warning:**

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

**Pennsylvania Fraud Warning:**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

**Washington Fraud Warning:**

It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.