

## ACORD 29 (2016/03) - Evidence of Flood Insurance

ACORD 29, Evidence of Flood Insurance, provides a coverage statement for additional insureds, lender's loss payables, loss payees and mortgagees. The form may also be used for condominium unit owner mortgagees.

ACORD 29, Evidence of Flood Insurance, provides information about coverages currently in force on a policy. For NFIP policies, this form can only be used for issued or existing NFIP policies. A separate Evidence of Flood Insurance is needed for each building.

Research reveals that information included on the form satisfies requirements of mortgagees in most situations. For NFIP policies, the statutory requirements for flood insurance must be at minimum the lowest of, but may exceed, the following: The outstanding balance of the loan(s), the insurable value (replacement cost value), or the maximum amount of insurance available under the NFIP for the type of property. Sufficient space is provided in the Remarks section of the form to include any additional information that may be required.

Although many lenders pay the premium for certain types of policies such as Homeowners, inclusion of the premium amount is inappropriate on the form. This information will be communicated to the payor via an invoice.

### IMPORTANT

ACORD is required to file certificates, on behalf of form users, in a number of states. Please access the ACORD website to download the Forms Filing Requirements document for complete details.

### Form Page 1

Section Name	Field Name	Description
IDENTIFICATION SECTION	Date	Enter date: The date on which the form is completed. (MM/DD/YYYY)
IDENTIFICATION SECTION	Producer	Enter text: The full name of the producer / agency.
IDENTIFICATION SECTION	Address Line 1	Enter text: The mailing address line one of the producer / agency.
IDENTIFICATION SECTION	Address Line 2	Enter text: The mailing address line two of the producer / agency.
IDENTIFICATION SECTION	City	Enter text: The mailing address city name of the producer / agency.
IDENTIFICATION SECTION	State	Enter code: The mailing address state or province code of the producer / agency.
IDENTIFICATION SECTION	Zip	Enter code: The mailing address postal code of the producer / agency.
IDENTIFICATION SECTION	Contact Name	Enter text: The name of the individual at the producer's establishment that is the primary contact.
IDENTIFICATION SECTION	Phone	Enter number: The producer's contact person's phone number. If applicable, include the area code and extension.
IDENTIFICATION SECTION	Fax	Enter number: The producer's contact person's fax number.

<b>IDENTIFICATION SECTION</b>	<b>Email Address</b>	Enter text: The producer's contact person's e-mail address.
<b>IDENTIFICATION SECTION</b>	<b>Producer Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>IDENTIFICATION SECTION</b>	<b>Named Insured And Address</b>	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
<b>IDENTIFICATION SECTION</b>	<b>Address Line 1</b>	Enter text: The named insured's mailing address line one.
<b>IDENTIFICATION SECTION</b>	<b>Address Line 2</b>	Enter text: The named insured's mailing address line two.
<b>IDENTIFICATION SECTION</b>	<b>City</b>	Enter text: The named insured's mailing address city name.
<b>IDENTIFICATION SECTION</b>	<b>State</b>	Enter code: The named insured's mailing address state or province code.
<b>IDENTIFICATION SECTION</b>	<b>Zip</b>	Enter code: The named insured's mailing address postal code.
<b>IDENTIFICATION SECTION</b>	<b>Insurer A</b>	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
<b>IDENTIFICATION SECTION</b>	<b>NAIC #</b>	Enter code: The identification code assigned to the insurer by the National Association of Insurance Commissioners (NAIC).
<b>IDENTIFICATION SECTION</b>	<b>Insurer B</b>	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
<b>IDENTIFICATION SECTION</b>	<b>NAIC #</b>	Enter code: The identification code assigned to the insurer by the National Association of Insurance Commissioners (NAIC).
<b>IDENTIFICATION SECTION</b>	<b>Insurer C</b>	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
<b>IDENTIFICATION SECTION</b>	<b>NAIC #</b>	Enter code: The identification code assigned to the insurer by the National Association of Insurance Commissioners (NAIC).
<b>IDENTIFICATION SECTION</b>	<b>Evidence Number</b>	Enter number: The producer assigned evidence number for the certificate.
<b>IDENTIFICATION SECTION</b>	<b>Revision Number</b>	Enter number: The producer assigned revision number for the certificate.
<b>IDENTIFICATION SECTION</b>	<b>Page Count</b>	Enter number: The total number of pages applicable to this form (e.g., Page 1 of 4). If only one page, indicate Page 1 of 1.
<b>IDENTIFICATION SECTION</b>	<b>This replaces prior evidence dated</b>	Enter date: The date the prior Evidence of Property Insurance, which this form replaces, was issued to this additional interest.
<b>PROPERTY INFORMATION</b>	<b>Address Line 1</b>	Enter text: The first address line of the physical location.

<b>PROPERTY INFORMATION</b>	<b>Address Line 2</b>	Enter text: The second address line of the physical location.
<b>PROPERTY INFORMATION</b>	<b>City</b>	Enter text: The city of the physical location.
<b>PROPERTY INFORMATION</b>	<b>State</b>	Enter code: The state or province of the physical location.
<b>PROPERTY INFORMATION</b>	<b>Zip</b>	Enter code: The postal code of the physical location.
<b>PROPERTY INFORMATION</b>	<b>Description</b>	Enter text: The description of the location used to differentiate locations such as vacant land, apartment buildings, townhouses, single family dwellings, farms. Provide the number of acres if farm land. As used here, the description of the location used to identify the insured building, including details such as the building use and number. If unit owner of a condominium association, include unit owner name and unit number. If unit owner on a dwelling form, include condominium association name and unit number.
<b>COVERAGE / RISK INFORMATION</b>	<b>Date of Construction</b>	Enter date: The date the structure was constructed. As used here, the date the building was constructed as per the flood insurance application.
<b>COVERAGE / RISK INFORMATION</b>	<b>Current Flood Zone</b>	Enter code: The code indicating the updated Flood Insurance Rate Map (FIRM) flood zone on which the property is located.
<b>COVERAGE / RISK INFORMATION</b>	<b>Flood Risk / Rated Zone</b>	Enter code: The code indicating the flood zone used for rating the policy, as shown on the flood insurance policy declaration. Refer to Definitions of FEMA Flood Zone Designations.
<b>COVERAGE / RISK INFORMATION</b>	<b>Grandfathered? Y/N</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the building coverage is grandfathered for flood.
<b>COVERAGE / RISK INFORMATION</b>	<b>Replacement Cost</b>	Enter amount: The estimated total dollar amount required to rebuild the residence without depreciation.
<b>COVERAGE / RISK INFORMATION</b>	<b>Unit Owner</b>	Check the box (if applicable): Indicates the condo coverage is for a single unit. As used here, indicates coverage is for the unit owner.
<b>COVERAGE / RISK INFORMATION</b>	<b>Association Building</b>	Check the box (if applicable): Indicates the condo coverage is for an entire building.
<b>COVERAGE / RISK INFORMATION</b>	<b># Units</b>	Enter number: The number of separate units in structure (including non-residential).
<b>COVERAGE / RISK INFORMATION</b>	<b>Single Family</b>	Check the box (if applicable): Indicates the residence is occupied by one family.
<b>COVERAGE / RISK INFORMATION</b>	<b>2-4 Family</b>	Check the box (if applicable): Indicates the residence is occupied by 2 - 4 families.
<b>COVERAGE / RISK INFORMATION</b>	<b>Other Occupancy</b>	Check the box (if applicable): Indicates occupancy type is other than those listed.
<b>COVERAGE / RISK INFORMATION</b>	<b>Describe Other Occupancy</b>	Enter text: The description of the building's occupancy.

<b>COVERAGE / RISK INFORMATION</b>	<b>Other Residential</b>	Check the box (if applicable): Indicates the residence is occupied by other than those types listed.
<b>COVERAGE / RISK INFORMATION</b>	<b>Non-Residential</b>	Check the box (if applicable): Indicates the residence is non-residential (i.e., hotel / motel).
<b>COVERAGE / RISK INFORMATION</b>	<b>Residential</b>	Check the box (if applicable): Indicates that the contents coverage type is residential.
<b>COVERAGE / RISK INFORMATION</b>	<b>Non-Residential</b>	Check the box (if applicable): Indicates that the contents coverage type is non-residential.
<b>COVERAGE / RISK INFORMATION</b>	<b>Other Contents Coverage Type</b>	Check the box (if applicable): Indicates that the contents coverage type is other than those listed.
<b>COVERAGE / RISK INFORMATION</b>	<b>Other Contents Coverage Type Description</b>	Enter text: The description of the contents coverage.
<b>PRIMARY POLICY</b>	<b>Policy Number</b>	Enter identifier: The identifier assigned by the insurer to the policy, or submission, being referenced exactly as it appears on the policy, including prefix and suffix symbols. If required for self-insurance, the self-insured license or contract number.
<b>PRIMARY POLICY</b>	<b>Effective Date</b>	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. (MM/DD/YYYY) As used here, 12:01 A.M. local time at the insured property location.
<b>PRIMARY POLICY</b>	<b>Expiration Date</b>	Enter date: The date on which the terms and conditions of the policy will expire. (MM/DD/YYYY) As used here, 12:01 A.M. local time at the insured property location.
<b>PRIMARY POLICY</b>	<b>Ins Letter</b>	Enter code: The Company Letter of the insurer (A-C), as identified in the "Insurer(s) Affording Coverage" form section, associated with the flood policy.
<b>PRIMARY POLICY</b>	<b>Building Deductible</b>	Enter deductible: The deductible amount for building coverage.
<b>PRIMARY POLICY</b>	<b>Building Total Amount of Insurance</b>	Enter limit: The limit amount for basic building coverage.
<b>PRIMARY POLICY</b>	<b>Contents Deductible</b>	Enter deductible: The deductible amount for contents coverage.
<b>PRIMARY POLICY</b>	<b>Contents Total Amount of Insurance</b>	Enter limit: The limit amount for basic contents coverage.
<b>PRIMARY POLICY</b>	<b>NFIP / WYO</b>	Check the box (if applicable): Indicates the market is NFIP / WYO.
<b>PRIMARY POLICY</b>	<b>Private / Alt. Market</b>	Check the box (if applicable): Indicates the market is private or alternate.
<b>PRIMARY POLICY</b>	<b>Dwelling Form Policy</b>	Check the box (if applicable): Indicates the policy is a dwelling / residential policy.
<b>PRIMARY POLICY</b>	<b>General Property Form Policy</b>	Check the box (if applicable): Indicates policy type is general property.

<b>PRIMARY POLICY</b>	<b>Residential Condo Bldg Assn Policy</b>	Check the box (if applicable): Indicates policy type is residential condominium building association.
<b>PRIMARY POLICY</b>	<b>Standard Policy</b>	Check the box (if applicable): Indicates the type of policy / perils insured is standard.
<b>PRIMARY POLICY</b>	<b>Preferred Risk Policy</b>	Check the box (if applicable): Indicates that the policy type is Preferred Risk or PRP, a lower cost Standard Flood Insurance Policy written under the Dwelling Form or General Property Form.
<b>PRIMARY POLICY</b>	<b>Other Product Type</b>	Check the box (if applicable): Indicates the form/policy type is other than those listed.
<b>PRIMARY POLICY</b>	<b>Describe Other Product Type</b>	Enter text: The description of the policy type.
<b>PRIMARY POLICY</b>	<b>Preferred Risk Policy Eligibility Extension</b>	Check the box (if applicable): Indicates the product is part of the flood insurance rating option from FEMA as part of the National Flood Insurance program to help reduce the financial burden placed on property owners whose buildings are newly mapped into a high risk flood area.
<b>PRIMARY POLICY</b>	<b>Group Flood Insurance Policy</b>	Check the box (if applicable): Indicates the policy type is a group flood insurance policy.
<b>PRIMARY POLICY</b>	<b>Mortgage Portfolio Protection Program Policy</b>	Check the box (if applicable): Indicates policy type is mortgage portfolio protection.
<b>EXCESS POLICY 1</b>	<b>Indicates Excess Policy is a "Following Form" Policy Type</b>	Check the box (if applicable): Indicates excess policy is a "following form" policy type.
<b>EXCESS POLICY 1</b>	<b>Policy Number</b>	Enter identifier: The policy number of the excess flood policy.
<b>EXCESS POLICY 1</b>	<b>Effective Date</b>	Enter date: The date on which the terms and conditions of the excess flood commence. As used here, 12:01 A.M. local time at the insured property location.
<b>EXCESS POLICY 1</b>	<b>Expiration Date</b>	Enter date: The date on which the terms and conditions of the excess flood policy expires. As used here, 12:01 A.M. local time at the insured property location.
<b>EXCESS POLICY 1</b>	<b>Ins Letter</b>	Enter code: The Company Letter of the insurer (A-C), as identified in the "Insurer(s) Affording Coverage" form section, associated with the flood policy.
<b>EXCESS POLICY 1</b>	<b>Building Deductible</b>	Enter deductible: The deductible amount for building coverage.
<b>EXCESS POLICY 1</b>	<b>Building Total Amount of Insurance</b>	Enter limit: The limit amount for basic building coverage.
<b>EXCESS POLICY 1</b>	<b>Contents Deductible</b>	Enter deductible: The deductible amount for contents coverage.
<b>EXCESS POLICY 1</b>	<b>Contents Total Amount of Insurance</b>	Enter limit: The limit amount for basic contents coverage.
<b>EXCESS POLICY 1</b>	<b>NFIP / WYO</b>	Check the box (if applicable): Indicates the market is NFIP / WYO.

<b>EXCESS POLICY 1</b>	<b>Private / Alt. Market</b>	Check the box (if applicable): Indicates the market is private or alternate.
<b>EXCESS POLICY 1</b>	<b>Dwelling Form Policy</b>	Check the box (if applicable): Indicates the policy is a dwelling / residential policy.
<b>EXCESS POLICY 1</b>	<b>General Property Form Policy</b>	Check the box (if applicable): Indicates policy type is general property.
<b>EXCESS POLICY 1</b>	<b>Residential Condo Bldg Assn Policy</b>	Check the box (if applicable): Indicates policy type is residential condominium building association.
<b>EXCESS POLICY 1</b>	<b>Standard Policy</b>	Check the box (if applicable): Indicates the type of policy / perils insured is standard.
<b>EXCESS POLICY 1</b>	<b>Preferred Risk Policy</b>	Check the box (if applicable): Indicates that the policy type is Preferred Risk or PRP, a lower cost Standard Flood Insurance Policy written under the Dwelling Form or General Property Form.
<b>EXCESS POLICY 1</b>	<b>Other Product Type</b>	Check the box (if applicable): Indicates the form/policy type is other than those listed.
<b>EXCESS POLICY 1</b>	<b>Describe Other Product Type</b>	Enter text: The description of the policy type.
<b>EXCESS POLICY 1</b>	<b>Preferred Risk Policy Eligibility Extension</b>	Check the box (if applicable): Indicates the product is part of the flood insurance rating option from FEMA as part of the National Flood Insurance program to help reduce the financial burden placed on property owners whose buildings are newly mapped into a high risk flood area.
<b>EXCESS POLICY 1</b>	<b>Group Flood Insurance Policy</b>	Check the box (if applicable): Indicates the policy type is a group flood insurance policy.
<b>EXCESS POLICY 1</b>	<b>Mortgage Portfolio Protection Program Policy</b>	Check the box (if applicable): Indicates policy type is mortgage portfolio protection.
<b>EXCESS POLICY 1</b>	<b>Business Income</b>	Check the box (if applicable): Indicates Business Income coverage applies.
<b>EXCESS POLICY 1</b>	<b>Extra Expense</b>	Check the box (if applicable): Indicates Extra Expense coverage applies.
<b>EXCESS POLICY 1</b>	<b>Additional Living Expense</b>	Check the box (if applicable): Indicates Additional Living Expense coverage applies.
<b>EXCESS POLICY 1</b>	<b>Limit</b>	Enter limit: The applicable limit for additional living expense coverage if the mortgage or loan requires Extra Expense or Additional Living Expense coverage. Use Remarks section to enter more than one limit.
<b>EXCESS POLICY 1</b>	<b>Actual Loss Sustained</b>	Check the box (if applicable): Indicates the coverage is on an actual loss sustained basis.
<b>EXCESS POLICY 1</b>	<b># of Months</b>	Enter number: The number of months of coverage if coverage is provided on an actual loss sustained basis.
<b>EXCESS POLICY 2</b>	<b>Indicates Excess Policy is a "Following Form" Policy Type</b>	Check the box (if applicable): Indicates excess policy is a "following form" policy type.
<b>EXCESS POLICY 2</b>	<b>Policy Number</b>	Enter identifier: The policy number of the excess flood policy.

<b>EXCESS POLICY 2</b>	<b>Effective Date</b>	Enter date: The date on which the terms and conditions of the excess flood commence. As used here, 12:01 A.M. local time at the insured property location.
<b>EXCESS POLICY 2</b>	<b>Expiration Date</b>	Enter date: The date on which the terms and conditions of the excess flood policy expires. As used here, 12:01 A.M. local time at the insured property location.
<b>EXCESS POLICY 2</b>	<b>Ins Letter</b>	Enter code: The Company Letter of the insurer (A-C), as identified in the "Insurer(s) Affording Coverage" form section, associated with the flood policy.
<b>EXCESS POLICY 2</b>	<b>Building Deductible</b>	Enter deductible: The deductible amount for building coverage.
<b>EXCESS POLICY 2</b>	<b>Building Total Amount of Insurance</b>	Enter limit: The limit amount for basic building coverage.
<b>EXCESS POLICY 2</b>	<b>Contents Deductible</b>	Enter deductible: The deductible amount for contents coverage.
<b>EXCESS POLICY 2</b>	<b>Contents Total Amount of Insurance</b>	Enter limit: The limit amount for basic contents coverage.
<b>EXCESS POLICY 2</b>	<b>NFIP / WYO</b>	Check the box (if applicable): Indicates the market is NFIP / WYO.
<b>EXCESS POLICY 2</b>	<b>Private / Alt. Market</b>	Check the box (if applicable): Indicates the market is private or alternate.
<b>EXCESS POLICY 2</b>	<b>Dwelling Form Policy</b>	Check the box (if applicable): Indicates the policy is a dwelling / residential policy.
<b>EXCESS POLICY 2</b>	<b>General Property Form Policy</b>	Check the box (if applicable): Indicates policy type is general property.
<b>EXCESS POLICY 2</b>	<b>Residential Condo Bldg Assn Policy</b>	Check the box (if applicable): Indicates policy type is residential condominium building association.
<b>EXCESS POLICY 2</b>	<b>Standard Policy</b>	Check the box (if applicable): Indicates the type of policy / perils insured is standard.
<b>EXCESS POLICY 2</b>	<b>Preferred Risk Policy</b>	Check the box (if applicable): Indicates that the policy type is Preferred Risk or PRP, a lower cost Standard Flood Insurance Policy written under the Dwelling Form or General Property Form.
<b>EXCESS POLICY 2</b>	<b>Other Product Type</b>	Check the box (if applicable): Indicates the form/policy type is other than those listed.
<b>EXCESS POLICY 2</b>	<b>Describe Other Product Type</b>	Enter text: The description of the policy type.
<b>EXCESS POLICY 2</b>	<b>Preferred Risk Policy Eligibility Extension</b>	Check the box (if applicable): Indicates the product is part of the flood insurance rating option from FEMA as part of the National Flood Insurance program to help reduce the financial burden placed on property owners whose buildings are newly mapped into a high risk flood area.
<b>EXCESS POLICY 2</b>	<b>Group Flood Insurance Policy</b>	Check the box (if applicable): Indicates the policy type is a group flood insurance policy.
<b>EXCESS POLICY 2</b>	<b>Mortgage Portfolio Protection Program Policy</b>	Check the box (if applicable): Indicates policy type is mortgage portfolio protection.

<b>EXCESS POLICY 2</b>	<b>Business Income</b>	Check the box (if applicable): Indicates Business Income coverage applies.
<b>EXCESS POLICY 2</b>	<b>Extra Expense</b>	Check the box (if applicable): Indicates Extra Expense coverage applies.
<b>EXCESS POLICY 2</b>	<b>Additional Living Expense</b>	Check the box (if applicable): Indicates Additional Living Expense coverage applies.
<b>EXCESS POLICY 2</b>	<b>Limit</b>	Enter limit: The applicable limit for additional living expense coverage if the mortgage or loan requires Extra Expense or Additional Living Expense coverage. Use Remarks section to enter more than one limit.
<b>EXCESS POLICY 2</b>	<b>Actual Loss Sustained</b>	Check the box (if applicable): Indicates the coverage is on an actual loss sustained basis.
<b>EXCESS POLICY 2</b>	<b># of Months</b>	Enter number: The number of months of coverage if coverage is provided on an actual loss sustained basis.
<b>REMARKS</b>	<b>Remarks</b>	Enter text: The additional comments or special conditions that may exist. ACORD 101, Additional Remarks Schedule, may be attached if more space is required.
<b>ADDITIONAL INTEREST</b>	<b>Name and Address</b>	Enter text: The additional interest's full name.
<b>ADDITIONAL INTEREST</b>	<b>Address Line 1</b>	Enter text: The additional interest's mailing address line one.
<b>ADDITIONAL INTEREST</b>	<b>Address Line 2</b>	Enter text: The additional interest's mailing address line two.
<b>ADDITIONAL INTEREST</b>	<b>City</b>	Enter text: The additional interest's mailing address city name.
<b>ADDITIONAL INTEREST</b>	<b>State</b>	Enter code: The additional interest's mailing address state or province code.
<b>ADDITIONAL INTEREST</b>	<b>Zip</b>	Enter code: The additional interest's mailing address postal code.
<b>ADDITIONAL INTEREST</b>	<b>Loan Number</b>	Enter identifier: The loan number, account number or other controlling number that the additional interest may have assigned the insured.
<b>ADDITIONAL INTEREST</b>	<b>Additional Insured</b>	Check the box (if applicable): Indicates the additional interest type is an additional insured.
<b>ADDITIONAL INTEREST</b>	<b>Lender's Loss Payable</b>	Check the box (if applicable): Indicates the additional interest type is a lender's loss payable.
<b>ADDITIONAL INTEREST</b>	<b>Loss Payee</b>	Check the box (if applicable): Indicates the additional interest type is a loss payee.
<b>ADDITIONAL INTEREST</b>	<b>Mortgagee</b>	Check the box (if applicable): Indicates the additional interest type is a mortgagee.
<b>ADDITIONAL INTEREST</b>	<b>Unit-Owners Mortgagee</b>	Check the box (if applicable): Indicates the additional interest type is unit-owner's mortgagee.
<b>ADDITIONAL INTEREST</b>	<b>Other Additional Interest</b>	Check the box (if applicable): Indicates the additional interest is other than those listed.
<b>ADDITIONAL INTEREST</b>	<b>Describe Other Additional Interest</b>	Enter text: The description of the other type of additional interest.
<b>ADDITIONAL INTEREST</b>	<b>Primary</b>	Check the box (if applicable): Indicates the additional interest has been added or named to the policy. As used here, indicates the additional interest has been added to the primary policy.



<b>ADDITIONAL INTEREST</b>	<b>Excess Policy 1</b>	Check the box (if applicable): Indicates the additional interest has been added or named to the policy. As used here, indicates the additional interest has been added to excess policy #1.
<b>ADDITIONAL INTEREST</b>	<b>Excess Policy 2</b>	Check the box (if applicable): Indicates the additional interest has been added or named to the policy. As used here, indicates the additional interest has been added to excess policy #2.
<b>SIGNATURE</b>	<b>Authorized Representative</b>	Sign here: Accommodates the signature of the authorized representative (e.g., producer, agent, broker, etc.) of the company(ies) listed on the document. This is required in most states.