NATIONAL FLOOD INSURANCE PROGRAM
FLOOD INSURANCE APPLICATION

NEW RENEWAL TRANSFER (NFP ONLY) PRIOR POLICY #:

FOR RENEWAL, BILL: INSURED LOSS PAYEE FIRST MORTGAGEE OTHER (as specified in the "2nd Mortgages/Other" box below)
SECOND MORTGAGEE

NAME AND MAILING ADDRESS OF AGENT / PRODUCER
AGENCY NO: AGENT'S TAX ID: PHONE (A/C No. Ext): EMAIL ADDRESS:

PROPERTY LOCATION
NOTE: ONE BUILDING PER POLICY - BLANKET COVERAGE NOT PERMITTED

IS INSURED PROPERTY LOCATION SAME AS INSURED'S MAILING ADDRESS?

IS INSURANCE REQUIRED FOR DISASTER ASSISTANCE?

FOR AN ADDRESS WITH MULTIPLE BUILDINGS AND/OR FOR A BUILDING WITH ADDITIONS OR EXTENSIONS, DESCRIBE THE INSURED BUILDING:

IS INSURED PROPERTY LOCATION SAME AS INSURED'S MAILING ADDRESS?

PROPERTY LOCATION
NAME OF COUNTY / PARISH:

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IS BUILDING LOCATED ON FEDERAL LAND?

IS BUILDING A BUSINESS PROPERTY?

BUILDING PURPOSE
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FLOOD INSURANCE APPLICATION, PART 2 (OF 2)

All data provided by the insured or obtained from the elevation certificate should be reviewed and transcribed below. This page must be completed for all buildings.

**SECTION I - ALL BUILDING TYPES**

1. **Building Use**
   - Main house / building
   - Agricultural building
   - Poolhouse, clubhouse, recreation building
   - Detached guest house
   - Detached garage
   - Warehouse
   - Tool/storage shed

2. **Garage**
   - a) Is there a garage attached to or part of the building? YES NO
   - If the answer to 2a is YES, answer 2b through 2f.
   - b) Total area of the garage: square feet.
   - c) Are there any openings (excluding doors) that are designed to allow the passage of floodwaters through the garage? YES NO
   - If yes, number of permanent flood openings within one (1) foot above the adjacent grade: Total area of all permanent openings: square inches.
   - d) Is the garage used solely for parking of vehicles, building access, and/or storage? YES NO
   - If yes, check the applicable items:
     - Furnace
     - Water heater
     - Elevator equipment
     - Other machinery and/or equipment servicing the building (describe):

3. **Basement / Subgrade Crawlspace**
   - a) Is the basement / subgrade crawlspace floor below grade on all sides? YES NO
   - b) If yes, is the basement / subgrade crawlspace floor below grade on all sides? YES NO
   - c) Indicate material used for enclosure:
     - Masonry walls (if breakaway, submit certification documentation)
     - Masonry walls (non-breakaway)
     - Other (describe):

4. **Additions and Extensions (if Applicable)**
   - Coverage is:
     - Building including addition(s) and extension(s)
     - Building excluding addition(s) and extension(s)
   - Provide policy number for addition or extension:

**SECTION II - ELEVATED BUILDINGS**

1. **Elevating Foundation Type**
   - Piers, posts or piles
   - Reinforced concrete piers or concrete piers or columns
   - Reinforced concrete shear walls
   - Solid foundation walls
   - Other (describe):

2. **Machinery and Equipment Below the Elevated Floor**
   - Does the area below the elevated floor contain machinery and/or equipment? YES NO
   - If yes, check one of the following:
     - Furnace
     - Water heater
     - Elevator equipment
     - Other machinery and/or equipment servicing the building (describe):

3. **Area Below the Elevated Floor**
   - a) Is the area below the elevated floor enclosed? YES NO
     - If yes, check one of the following: Fully Partially
   - b) Does the area below the elevated floor contain elevators? YES NO
     - If yes, how many? Yes, number of permanent flood openings within 1 foot above the adjacent grade: Total area of all permanent flood openings: square feet.
   - c) Are flood openings engineered? YES NO
     - If yes, indicate number of permanent flood openings within 1 foot above the adjacent grade: Total area of all permanent flood openings: square inches.

4. **Flood Openings**
   - a) Is the enclosed area / crawlspace constructed with openings (excluding doors) to allow the passage of floodwaters through the enclosed area? YES NO
     - If yes, indicate number of permanent flood openings within 1 foot above the adjacent grade: Total area of all permanent flood openings: square inches.
   - b) Are flood openings engineered? YES NO
     - If yes, submit certification.

**SECTION III - MANUFACTURED (MOBILE) HOMES / TRAVEL TRAILERS**

1. **Manufactured (Mobile) Home / Travel Trailer Data**
   - Year of Manufacture: __________
   - Make: __________
   - Model Number: __________
   - Serial Number: __________ X __________ feet
   - Dimensions: __________ feet
   - Are there any permanent additions and/or extensions? YES NO
   - If yes, the dimensions are: __________ X __________ feet

2. **Anchoring**
   - The manufactured (mobile) home / travel trailer anchoring system utilizes (Check all that apply):
     - Over-the-top ties
     - Ground anchors
     - Frame ties
     - Slab anchors
     - Frame connectors
     - Other (describe):

3. **Installation**
   - The manufactured (mobile) home / travel trailer was installed in accordance with (Check all that apply):
     - Manufacturer’s specifications
     - Local floodplain management standards
     - State and/or local building standards

**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 FEDERAL LAW.**

SIGNATURE OF INSURANCE AGENT / PRODUCER DATE (MM/DD/YYYY) SIGNATURE OF INSURED (OPTIONAL) DATE (MM/DD/YYYY)

ACORD 301 (2015/04)
FLOOD INSURANCE
FLOOD INSURANCE APPLICATION

NONDISCRIMINATION
No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

PRIVACY ACT
The information requested is necessary to process your Flood Insurance Application for a flood insurance policy. The authority to collect the information is Title 42, U.S. Code, Sections 4001 to 4028. Disclosures of this information may be made: to federal, state, tribal, and local government agencies, fiscal agents, your agent, mortgage servicing companies, insurance or other companies, lending institutions, and contractors working for us, for the purpose of carrying out the National Flood Insurance Program; to current Severe Repetitive Loss property owners and Preferred Risk Policy owners for the purpose of property loss history evaluation; to the American Red Cross for verification of nonduplication of benefits following a flood event or disaster; to law enforcement agencies or professional organizations when there may be a violation or potential violation of law; to a federal, state or local agency when we request information relevant to an agency decision concerning issuance of a grant or other benefit, or in certain circumstances when a federal agency requests such information for a similar purpose from us; to a Congressional office in response to an inquiry made at the request of an individual; to the Office of Management and Budget (OMB) in relation to private relief legislation under OMB Circular A-19; and to the National Archives and Records Administration in records management inspections. Providing the information is voluntary, but failure to do so may delay or prevent issuance of the flood insurance policy.

GENERAL
This information is provided pursuant to Public Law 96-511 (Paperwork Reduction Act of 1980, as amended) dated December 11, 1980, to allow the public to participate more fully and meaningfully in the Federal paperwork review process.

AUTHORITY
Public Law 96-511, amended, 44 U.S.C. 3507; and 5 CFR 1320.

PAPERWORK BURDEN DISCLOSURE NOTICE
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NOTE: Do not send your completed form to this address.