



# New England Excess Exchange, Ltd.

P O Box 650 • Barre, VT 05641 • 800.548.4301 • Fax 800.347.4935

info@neee.com • www.neee.com

## FLOOD APPLICATION

### APPLICANT INFORMATION

Name: \_\_\_\_\_

Proposed Effective Date: \_\_\_\_\_

Proposed Expiration Date: \_\_\_\_\_

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

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

### UNDERWRITING INFORMATION

NFIP Flood Zone: \_\_\_\_\_

Total Expiring NFIP Premium: \_\_\_\_\_

Year of Construction: \_\_\_\_\_

Total Renewal NFIP Premium: \_\_\_\_\_

Is property grandfathered with the NFIP?  Yes  No

### OCCUPANCY (CHECK ALL THAT APPLY)

	Yes	No		Yes	No	# of Units
Single Family	<input type="checkbox"/>	<input type="checkbox"/>	Residential Apartment/Duplex	<input type="checkbox"/>	<input type="checkbox"/>	_____
Residential Condominium	<input type="checkbox"/>	<input type="checkbox"/>	Commercial Condominium	<input type="checkbox"/>	<input type="checkbox"/>	_____
Commercial	<input type="checkbox"/>	<input type="checkbox"/>				

If this is a business, please describe operations:  
\_\_\_\_\_

If business and contents coverage is desired, please provide description of contents/inventory and how it is stored:  
\_\_\_\_\_

Construction: (check all that apply)  Frame  Fire Resistive  Masonry Other: \_\_\_\_\_

Number of Floors \_\_\_\_\_ Building built on driven pilings  Yes  No

Basement Enclosure  Yes  No If Yes, are wash-through or breakaway walls present  Yes  No

Is Building Elevated  Yes  No If Yes, at what height \_\_\_\_\_

Any Prior Flood Losses  Yes  No If Yes, please attach loss runs or describe loss(es) below:  
\_\_\_\_\_

Primary Residence  Yes  No

### TOTAL VALUES

Coverage Type:		Values
A) Buildings	100% Replacement Cost (excl. value of land)	\$ _____
B) Contents	100% Replacement Cost	\$ _____
C) Business Income/Rental Value	12 Months	\$ _____

### FLOOD LIMITS REQUIRED

Coverage Type:	Limit Requested	Deductible
A) Buildings	\$ _____	\$ _____
B) Contents	\$ _____	\$ _____
C) Business Income/Rental Value	\$ _____	\$ _____

### CHECKLIST

- Elevation certificate attached if property is Post-Firm and located in A or V Flood Zone  Yes  No
- If NFIP is underlying, we require a copy of the underlying NFIP declarations page. Attached?  Yes  No

### ADDITIONAL INTEREST

Interest:  Additional Insured  Lienholder  Loss Payee  Mortgagee  Trustee

Name: \_\_\_\_\_

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

Reference/Loan #: \_\_\_\_\_

Insured's Signature: \_\_\_\_\_ Date: \_\_\_\_\_