



P.O. Box 650 • 57 Parker Rd. • Barre, VT 05641 • 800-548-4301 • 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)

Single Family Residential Apartment/Duplex Residential Condominium Commercial Commercial Condominium # of Units Construction: (check all that apply) Frame Fire Resistive Masonry Other: Number of Floors Building built on driven pilings Basement Enclosure If Yes, are wash-through or breakaway walls present Is Building Elevated If Yes, at what height Any Prior Flood Losses If Yes, please attach loss runs or describe loss(es) below: Primary Residence

TOTAL VALUES

Coverage Type: Values A) Buildings 100% Replacemet Cost (excl. value of land) B) Contents 100% Replacemet Cost C) Busines Income/Rental Value 12 Months

FLOOD LIMITS REQUIRED

Coverage Type: Limit Requested Deductible A) Buildings B) Contents C) Busines Income/Rental Value

CHECKLIST

Elevation certificate attached if property is Post-Firm and located in A or V Flood Zone If NFIP is underlying, we require a copy of the underlying NFIP declartions page. Attached?

ADDITIONAL INTEREST

Interest: Additional Insured Lienholder Loss Payee Mortgagee Trustee Name: Address: Reference/Loan #:

Insured's Signature: Date: