



Excess Flood Application

General Information

Note: Internet Explorer is required to use automatic submission feature in browser. All other browsers are not supported & require manual download and return to salessupport@pfc.com.

| | | | | |
|--|----------------------|-----------------------|---------------|-----|
| Application Date | | Vendor Number | Client Number | |
| Proposed Insured | | | | |
| Property Address | | City | State | Zip |
| Mailing Address <i>(if different from above)</i> | | City | State | Zip |
| Contact Person Name | Contact Person Phone | Contact Person E-mail | | |
| How did you hear about PFI? | | Explain: | | |

Underwriting Information

| | | | | | | |
|--|----------|---------------|----------|-----------------|----------|------------------|
| 100% Total Insurable Values: | \$ | Building(s) | \$ | Contents | \$ | B.I. (12 Months) |
| Requested Coverage: | Limit \$ | Building(s) | Limit \$ | Contents | Limit \$ | B.I. (12 Months) |
| Note: Premium is based on Total Insurable Value along with the requested coverage limit. If TIV is not reported accurately at time of quote and coverage binds, this could affect the premium and/or how a claim is settled as per the 90% Values Clause Endorsement. | | | | | | |
| Primary Carrier | | Policy Number | | NFIP Flood Zone | | |

Occupancy *(check all that apply)*

| | | | | | | | |
|--|-----------------|-------------|-----------------------------------|------------|--------------------|-----|----|
| Residential | Single Family | Condominium | Number of Condo Units: | Apartment: | Primary Residence? | Yes | No |
| Commercial Building | Office Building | Hotel/Motel | Other <i>(describe operation)</i> | | | | |
| Commercial Contents <i>(if contents coverage is required, describe type of contents below)</i> | | | | | | | |

Are contents skidded or shelved? **Yes** **No** If "Yes", as what height?

Construction

| | | | | | | | |
|----------------------------------|---------|----------------|-------------------------|----------|---|-----|----|
| Type - Frame | Masonry | Fire Resistive | Other <i>(describe)</i> | | Year Built | | |
| Buildings on driven pilings? | | | Yes | No | Is first floor parking? | Yes | No |
| Basement or enclosure? | | | Yes | No | If yes , are wash-through or breakway walls present? | Yes | No |
| Is the building elevated? | | | Yes | No | If yes , at what height? | | ft |
| Square footage of lowest floor | | | | ft | Number of stories | | |
| Distance from source of flooding | | | | miles | Describe source flooding | | |
| Vacant or Occupied | | | Vacant | Occupied | | | |

Loss Record

Any flood losses in last 5 years? **Yes** **No**
If yes, amount(s) and date(s) of loss(es)

Additional Information Required

- Elevation Certificate for all flood zone A/V properties
- Copy of underlying NFIP Declaration Page
- If underlying is an All Risk Policy, require underlying definition of flood

STATEMENT: Any person who knowingly and with intent to defraud any insurance company or another person, who 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 the person to criminal and civil penalties. This application becomes a part of the insurance policy if bound. I have read and fully understand the above information, as well as answered the questions to the best of my knowledge.

I agree to receive policies, endorsements, invoices and other correspondence via the email address on file with PFI. Updates will be handled during the regular course of business.

Requested By:

Authorized Client Signature **(Required)**

Date

* Optional Coverage / Endorsements Available Upon Underwriter Approval | Note: This is not a Binder. Coverage will not be considered bound unless written confirmation is provided by Proctor Financial, Inc.