

FLOOD INSURANCE APPLICATION

DATE: _____ POLICY EFFECTIVE DATE: _____

Applicant's Name: _____ **Birth Date:** _____ **S.S. #** _____
Current Address: _____ **Occupation:** _____

Co-Applicant's Name: _____ **Birth Date:** _____ **S.S. #** _____
Current Address: _____ **Occupation:** _____

Phone: _____ **E-mail:** _____

Purchased Price/Amount to Insure: _____ **Amount Financed:** _____
Property Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Mortgagee Clause: _____ **Loan #:** _____
Address: _____

Send renewal Bill to: Mortgage Company _____ Insured _____

Number of families: _____ Owner occupied: Yes _____ No _____ New Construction: Yes _____ No _____

Is the property Vacant? _____ if so, would the property be occupied within 30 days? _____

Is the home currently being renovated? Yes _____ No _____, if so explain work being done: _____

Construction: Frame _____ Brick _____ Other (Condo, Townhouse, etc),: _____

Property Type: Colonial: _____ Cape cod: _____ Bi-level: _____ Other: _____

Garage: ___ Yes ___ No, if so, garage type: Attached ___ Detached ___ Built in _____ How many cars: _____

of Stories: _____ Does it have a Basement: _____, if so, finished: _____

Year Built: _____ Home Sq. Footage: _____

Please list all the equipment and/or appliances located in the basement:

Boiler _____ Water Heaters _____ Washer/Dryer _____ Freezer/Refrigerator _____

Sent/Referred by: _____ send quote to: _____
Print name and number (Fax # or E-mail)