



### COBRA FLOOD APPLICATION

|  |  |                                       |  |                              |  |
|--|--|---------------------------------------|--|------------------------------|--|
| Expiring Carrier: _____  |  | Expiring Premium: _____               |  | Effective Date: _____        |  |
| Producer's Name: _____<br>Address: _____<br>City: _____ State: _____ Zip: _____<br>Phone: _____ Fax: _____<br>Email: _____   |  |                                       |  |                              |  |
| Insured Names: _____ Phone: _____<br>Mailing Address: _____<br>City: _____ State: _____ Zip: _____   |  |                                       |  |                              |  |
| Risk Location Address: _____<br>City: _____ State: _____ Zip: _____  |  |                                       |  |                              |  |
| Mortgagee Name: _____<br>Address: _____<br>City: _____ State: _____ Zip: _____<br>Loan Number: _____   |  |                                       |  |                              |  |
| Year Constructed: _____<br>Number of Stories: _____<br>Square Feet: _____  |  |                                       | Construction Type:      Frame _____<br>Masonry _____<br>Brick Veneer _____ |                              |  |
| Flood Zone: _____ Building Diagram: _____  |  | Base Flood Elevation: _____           |  |                              |  |
| Enclosures:      Yes _____ No _____  |  | SqFt of Enclosure: _____              |  |                              |  |
| RCV of Enclosure: \$ _____   |  | Use of Enclosure: _____               |  |                              |  |
| Elev. Lowest Exposed Floor: _____  |  | Frontal Dune:      Yes _____ No _____ |  | Nearest Body of Water: _____ |  |
| Distance to Water: _____   |  |                                       |  |                              |  |
| RCV Dwelling Only: \$ _____  |  | Any Losses in Last 5 Years:           |  | Yes _____<br>No _____        |  |
| Coverage Amount: \$ _____  |  | If Yes, Please Explain: _____         |  |                              |  |
| Deductible: \$ _____   |  |                                       |  |                              |  |
| Applicant's Statement: I have read the above application and declare that to the best of my knowledge and belief all of the foregoing statements are true and that these statements are offered as an inducement to the company to issue the policy for which I am applying. I understand that as a part of routine underwriting, an investigative consumer report or credit report may be obtained as well as inspection of the property for which coverage is being requested. I understand that there is no coverage for property located below base flood elevation. I also understand this policy may be fully earned at inception. |  |                                       |  |                              |  |
| Applicant's Signature: _____   |  |                                       |  | Date: _____                  |  |
| Producer's Signature: _____  |  |                                       |  | Date: _____                  |  |
| cbm 2.10   |  |                                       |  |                              |  |