## QUAKER SPECIAL RISK

## EXCESS FLOOD SUPPLEMENTAL APPLICATION

Please include with this signed application: Copy of NFIP Dec/App & Flood Elevation Certificate

PRODUCER'S Name & Address:

Phone #(		)			<u>.</u>			
INSURED'S N	ame & A	Address:				EFECT	IVE DATE	Ē
Name							<u>.</u>	
Street Address							<u>.</u>	
City		State	)		Zip		C	County
۵								
		Total Value		NFIP	Limit		XS flood	
Building	\$		\$			_\$		
Contents		\$		\$			_\$	
Property or Co	ontents	Location: (Cir	rcle one:	Residen	tial/Com	mercial)		
Street								
City		State	)	Zip			County	
=								
Flood Zone		_BFE	LFB_		<u>-</u>			
Nearest body o	of water			Dista	nce to wa	ater		_Feet
Construction T	ype :	Frame	∏Ma	sonry	□АА	A/Concret	e	
Date construct	ed:		Numb	er of St	ories		<u>.</u>	
UNDERWRITII 1. Any losses i				_	ons:  No			
Dates & Am	ounts o	f Loss						
<u>.</u> 2. Does buildin	g conta	in a basement?	? □Ye	s [	□No			
3. Is home on_	_founda	ation/crawl		piling	s, or		slab?	

## QUAKER SPECIAL RISK

If eleva			sures:none w/breakaway							
		iiving are ragec	ea w/o breakaway walls	garage						
4. If applicable,	4. If applicable, depth of in-ground pilings									
MORTGAGEE'	S Name & Address									
Name				<u> </u>						
<u>Street</u>										
<u>.</u> City	State	Zip	Loan#							
the foregoing s company to iss underwriting, a inspection of th	above application ar tatements are true ar ue to issue the policy n investigative consu e property for which	nd that these so for which I are mer report or coverage is be	at to the best of my knowled statements are offered as a m applying. I understand the credit report may be obtain eing requested. I understand Elevation. I also understand	n inducement to the at as a part of routine ed as well as an that there is no						
APPLICANT'S_	_									
-	Signature		Date							
PRODUCER'S										
±	signature		Date							
	(To order bi	nder, BOTH S	Signatures must be on appl	ication)						