Quaker Special Risk

Primary Flood Application

Please include with this signed application:

Flood Elevation Certificate

Producer's N	ame & Address:				
			State	Zip	
Phone: ()	_			
Insured's Name & Address:		E	ffective Date:		
Name:					
	s:				
	Total Value	Limit	Requested	Deduc	ctible
Building	\$	\$		\$	
Contents	\$	\$		\$	
Property or C	contents Location: (se				
Street Addres	s:				
City		State	Zip	County	
Flood Zone	BFE _		LFB		
Nearest Body of water		Distance to Water			Feet
Construction 7	Гуре: 🛛 Frame	🗆 Mas	sonry		/Concrete
Date Constructed:		Number of Stories			
UNDERWRIT	ING: Please answer the	e following q	uestions:		
1. Any losses	s in the last 5 years?		□ Yes	🗆 No	
Date	es & Amounts of Loss: ₋				
2. Does the E	Building contain a baser	nent?	🗆 Yes	🗆 No	
3. Is Home of	n foundation/crawl	pilings, or		or	slab?

If elevated, please check the	following enclo	osures: 🗆	none w/breakaway w	alls			
\square none w/solid walls \square living area w/o breakaway walls \square garage							
🗆 utility 🗆 storage 🗆 other	·:						
4. If applicable, depth of in-ground pilings:							
MORTGAGEE'S Name & Address:							
Name:							
Street Address:							
City	State	Zip	Loan #				

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 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 an 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 that this is a fully earned policy.

APPLICANT'S		
	Signature	Date
PRODUCER'S		
_	Signature	Date

(To order binder, BOTH Signatures must be on application)