

**National Flood Insurance Program  
Rating Information and Elevated Building Determination Form**

Policy Number: \_\_\_\_\_

Insured Name: \_\_\_\_\_

Property Address: \_\_\_\_\_  
\_\_\_\_\_

Based on the guidelines of the National Flood Insurance Program, the above referenced property requires in-depth underwriting analysis to determine the premium. Before a policy can be issued for such a risk this form must be completed - please answer all questions - and submitted to the Underwriting department.

**The statement below must be signed by the insured.**

My building, located at the above property address, in FIRM Zone \_\_\_\_\_, and constructed to have the lowest living floor elevated off the ground is:

- 1) Constructed on:  Piles, posts, or piers     Columns     Parallel shear walls  
 Solid perimeter walls
- 2) Size of enclosure/crawl space below the lowest elevated floor: \_\_\_\_\_ square feet
- 3) The enclosure/crawl space has \_\_\_\_\_ permanent openings (excluding doors/garage doors & windows) within 1 foot of the ground totaling \_\_\_\_\_ square inches. Date vents installed: \_\_\_\_\_
- 4) The enclosure/crawl space is enclosed using:  Insect screening/lattice     Certified breakaway walls  
 Solid wood frame walls     Concrete block/brick/masonry walls  
 Other, describe: \_\_\_\_\_
- 5) The enclosure is used for: \_\_\_\_\_ Year built: \_\_\_\_\_
- 6) The following machinery and equipment servicing the building (e.g.: Elevator car and/or equipment, Hot water heater/Washer & dryer) is located:  In the enclosure     Outside the enclosure

<b>Items:</b>	<b>Approximate Value:</b>
_____	_____
_____	_____
_____	_____

- 7) Number of elevators: \_\_\_\_\_
- 8) Dimensions/Size of attached garage: \_\_\_\_\_ ft. wide by \_\_\_\_\_ ft. deep **or** \_\_\_\_\_ square feet  
Number of permanent openings within 1 ft. of ground: \_\_\_\_\_  
Square inches of vents: \_\_\_\_\_ Date vents installed: \_\_\_\_\_

I understand that my Standard Flood Insurance Policy (SFIP) is being issued based on your reliance upon the accuracy of information and statements that I have furnished to you herein, as part of my application for the SFIP. I understand that my building is being classified as an elevated building subject to the restriction and limitations of coverage and under the terms and conditions of the SFIP, found in *Section III, Property Covered, A.8 and B.3* based upon these representations by me. I also understand that in consideration of the reduced premium rate that will apply to my policy based upon it being an elevated building, coverage limitations in the SFIP (referenced above) will apply to the enclosed area below the lowest elevated floor of my building and to the contents and personal property located in this enclosed area. I understand and agree that this Elevated Building Determination is a part of my flood insurance application, and that the statements herein are subject to the provisions of Section VII(B) and VII(G)(3) of the SFIP, which could result in certain consequences, including, but not limited to, the SFIP being void and any claim that I may make as a result of a flood loss being denied, if the statements by me are false or materially misrepresent any fact.

\_\_\_\_\_  
Signature of Insured - Cannot be signed by Agent

\_\_\_\_\_  
Date