

GENERAL CHANGE ENDORSEMENT

I. USE OF THE FORM

The National Flood Insurance Program (NFIP) General Change Endorsement form or a similar request can be used to make certain types of coverage and rating changes or corrections to the existing policy.

However, this form cannot be used to 1) renew a policy, 2) extend or change a policy year, or 3) change the effective date of the policy.

An endorsement may be submitted for such reasons as:

- Change of a mortgagee
- Increasing, adding or reducing coverage limits
- Change of the mailing address
- Change of the building description
- Change of insured information
- Rating Adjustments
- Map revisions
- Correcting a misrated policy
- Assignment of the policy

II. ENDORSEMENT RULES

A. Coverage Endorsements

1. Addition of Coverage or Increase in Amount of Insurance

Added coverage, or an increase in the amount of insurance, is permitted at any time during a policy year. The additional premium is calculated pro rata for the balance of the policy year, at either the rate in effect on the endorsement effective date or the rate in effect on the policy effective date, in accordance with each Write Your Own (WYO) Company's standard business practice. (See Examples 1 through 3 at the end of this section.) Refer to the General Rules section for the applicable waiting period.

2. Reduction in Amount of Insurance

A reduction in the amount of *building* insurance *cannot* be made unless part of the building has been removed, which reduces the building's value to less than the amount of the building insurance, or a current appraisal or cost estimate is provided which shows that the building's current coverage amount is higher than the estimated replacement cost of the building. (See Example 4 at the end of this section.)

A reduction in the amount of *contents* insurance *cannot* be made unless some of the contents

have been sold or removed, which reduces the contents' value to less than the amount of the contents insurance.

If the insured has a non-NFIP policy, the coverage can be reduced to the amount of the non-NFIP policy deductible.

3. Removal of Coverage

There is no return premium for the removal of building or contents coverage unless the property is no longer at the described location or the property of the policyholder.

B. Rating Endorsements

1. Rate Reduction

It is not permissible to revise a policy's rating during a policy year, due to a rate decrease, unless the effective date of the rate change is prior to the policy's effective date.

2. Rating Adjustment

NFIP rules require that the policy must be in effect in order to process refunds.

Rating adjustments will be allowed for only the current year for the following situations:

- Use of the grandfather rules. The endorsement effective date is the effective date of the current policy year.
- Use of the V-Zone Risk Factor Rating Form. The endorsement effective date is either the date the V-Zone Risk Factor Rating Form was certified or the effective date of the current policy year, whichever is later.
- Use of the Federal Emergency Management Agency (FEMA) Special Rates (see the Rating section). The endorsement effective date is the date that FEMA provided the rates.
- Revision of alternative rates (rates used for Pre-FIRM rated risks where the zone is unknown). The endorsement effective date is the effective date of the current policy year.
- Use of Post-FIRM/full-risk rating for a Pre-FIRM building receiving subsidized rates. The refund will be processed if the insured provides an Elevation Certificate (EC). The endorsement effective date is the effective date of the current policy year.
- Use of an EC on Post-FIRM buildings rated using "Without Certification of Compliance or Elevation

Certificate” for zones AO and AH, or “No Elevation Certificate or No BFE” for Unnumbered A Zone. The endorsement effective date is the effective date of the current policy year.

- Use of an updated EC. The endorsement effective date is the effective date of the current policy year.

3. Revision of an Alternative Rating

Alternative rating is used to determine the premium on a Renewal Notice following conversion of a community from the Emergency Program to the Regular Program. Alternative rates are also used by agents/producers for the rating of Pre-FIRM construction. Alternative rating allows the agent/producer and the policyholder 1 year to revise the rating, so a premium refund can be obtained from the renewal or inception date if it is determined that the insured property is located in a lower-rated zone. During subsequent policy years, such revisions may also be made effective with the start of the policy year.

4. Map Revision

A policy may be endorsed to revise the flood zone or change the Base Flood Elevation (BFE) in which a building is located to provide a more favorable rating due to a physical revision of the FIRM, a Letter of Map Amendment (LOMA), or a Letter of Map Revision (LOMR). The effective date of the endorsement to rate a policy with the current zone must be the effective date of the map revision.

The following endorsement rules must be used:

- If a map revision or amendment became effective during the current policy year, the refund for the premium difference after revising the zone or BFE is prorated, using the date of the map revision or amendment as the endorsement effective date.
- If a map revision or amendment became effective in the previous policy year, a refund of the premium difference is granted for the current policy year and the pro-rata portion of the previous policy year. The endorsement effective date is the map revision or amendment date.
- If a map revision or amendment became effective prior to the previous policy year, a refund of the premium difference is granted for the current policy year only.
- If the policy has expired, the endorsement request must be received within 6 months of the expiration date; otherwise, no refund is available. Before refunding a premium for an expired term, the insurer must check with the policyholder for

the existence of a current policy with another WYO Company. Under no circumstances will an insured be allowed a refund for more than 2 policy years, regardless of whether the same or different WYO Company or Companies issued the policy or policies.

Before processing the endorsement, the agent/producer should check the Flood Map Status Information Service to make sure that the LOMA or LOMR is still valid (or has been recertified) based on the most recent map revision. Also, if the revised map changes the BFE, verify that the same elevation datum is used to determine the building elevations on the EC.

When a community has been converted from the Emergency Program to the Regular Program, the policy rating may be revised to reflect the correct flood zone. However, no premium refund is allowed on premium previously paid.

C. Misrated Policy

A flood policy can be endorsed to correct misratings. Misratings that may generate refunds include only the following errors made at the time of application:

- Building description;
- Flood zone;
- BFE;
- Community number; or
- Lowest floor used for rating.

A premium refund for a misrated policy going back a maximum of 6 calendar years from the current policy year will be allowed with proper documentation (see III.B.2.a.). Any lapse in coverage is included in determining the number of years for which a premium refund is allowed.

NOTE: The presentment of additional rating information (e.g., use of Post-FIRM/full-risk rating for a Pre-FIRM building receiving subsidized rates) or a change in the rating information (e.g., a new EC, a LOMA, or a map revision) is not considered a misrating.

D. Conversion of Standard-Rated Policy to PRP Due to Misrating

A policy written as a standard-rated B, C, or X Zone policy and later found to be eligible for a Preferred Risk Policy (PRP) may be endorsed or rewritten as a PRP for only the current policy year.

When the risk has been misrated since the time of application with a zone other than B, C, or X but is later found to be in a B, C, or X Zone and eligible for a PRP, the insurer will be allowed to endorse or cancel/rewrite up to 6 years.

The policy may be canceled/rewritten using Cancellation Reason Code 22 if both of the following conditions are met:

- The request to endorse or cancel/rewrite the policy is received during the current policy year; *and*
- The policy has no open claim or closed paid claim.

The new PRP building coverage will be equal to either the building limit issued under the standard-rated B, C, or X Zone policy or the next-higher limit available under the PRP if there is no PRP option equal to the standard-rated B, C, or X Zone building limit. For a standard-rated contents-only policy, the contents coverage will be equal to the limit issued under the standard-rated policy or the next-higher limit. If building coverage is desired, or the building and/or contents coverage requested exceeds the limits described above, the coverage should be endorsed with a 30-day waiting period.

E. Changing Deductibles

Increasing deductibles is permitted during the current policy year. Deductibles cannot be reduced mid-term, unless required by the mortgagee and written authorization is provided by the mortgagee. A 30-day waiting period will apply unless the request to reduce the deductible is in connection with making, increasing, extending, or renewing a loan.

The Increased Cost of Compliance (ICC) Premium is not eligible for the deductible discount or surcharge. First calculate the deductible discount or surcharge, then add in the ICC Premium.

F. Property Address Corrections

A flood policy may not be endorsed to change the insured property location. This includes relocation from 1 unit to another unit within the same building, and relocation of a mobile home/travel trailer to a new location. An endorsement may not be submitted when it will result in a change to the actual building to be insured, regardless of whether a loss has or has not occurred. A new Application and a new premium must be submitted, and any applicable waiting period for the SFIP to become effective will apply. The following exceptions allow for a property address correction:

1. An endorsement may be submitted to correct an erroneous property address (e.g., one made through typographical error or an Emergency 911 property address change) when it does not result in a change of the building to be insured. In the case where there are no paid or pending claims, a correction can be made without a waiver from the Federal Insurance Administrator of the requirement to submit accurate information in Section I of the SFIP. The address may be corrected in the following situations:

- The property address submitted on the Application was typed incorrectly, and the building description, coverage, and rating elements belong to the building at the address indicated on the correction endorsement; *or*
- The address used to describe the insured building indicated on the Application has changed with the United States Post Office; *or*
- A postal address is being supplied for a descriptive or legal address originally provided on the Application.

2. In a situation where there is a pending claim, and the agent/producer indicates that the address on the policy is not the correct address for the building intended to be insured, a waiver may be sought from the Federal Insurance Administrator of the requirement to submit accurate information in Section I of the SFIP in the following instances:

- The property address submitted on the Application was typed incorrectly, and the building description, coverage, and rating elements belong to the building at the address indicated on the correction endorsement, and the insured has no insurable interest in the building at the address incorrectly indicated on the application; *or*
- The address used to describe the insured building indicated on the Application has changed with the United States Post Office. The agent/producer must demonstrate that the building description, coverage, and rating elements belong to the building at the address indicated on the correction endorsement; *or*
- A postal address is being supplied for a descriptive or legal address originally provided on the Application. The agent/producer must demonstrate that the building description, coverage, and rating elements belong to the building at the address indicated on the waiver request.

No pending claim on a policy requiring an address change can be paid without FEMA approval.

G. ASSIGNMENT OF POLICY

A building owner's flood insurance building policy may be assigned to a purchaser of the insured building with the written consent of the seller. The seller must sign the assignment endorsement on or before the closing date. Policies on buildings in the course of construction and policies insuring only contents may not be assigned.

The assignment section on the General Change Endorsement form must be completed. Select "Other" on the General Change Endorsement form if the

assignment is due to inheritances, gifts, transfers of ownership without purchase, or assignments to an estate or trust.

NOTE: In the case of a policy assignment in connection with the purchase of a property located in Zone A, AE, A1–A30, AO, AH, V, VE, V1–V30, or D and rated using Pre-FIRM subsidized rates, the NFIP grandfather rule for “continuous coverage” cannot be used. If the property is located in an SFHA, and was previously rated without elevation information, an EC and photographs must be obtained. The current FIRM information on the EC must be used for the endorsement, and the policy must be endorsed pro-rata effective upon assignment.

Policies rated in D zones or unnumbered V zones do not require an EC, but must provide at least two photographs before the policy can be assigned. In all cases, the policy will be re-rated on the assignment effective date.

III. ENDORSEMENT PROCESSING PRIOR TO POLICY RENEWAL (NFIP DIRECT BUSINESS ONLY)

A. During the Last 90 Days of Policy Year

1. If the premium payment for renewal of the policy has not already been processed by the NFIP, a processed General Change Endorsement will produce a revised Renewal Notice for the upcoming policy year.
2. If the original Renewal Notice has not been paid, the payor may use the revised Renewal Notice or subsequent Final Notice.

B. During the Last 75 Days of Policy Year

1. If the original Renewal Notice *has not been paid*, the agent/producer must submit the General Change Endorsement for the current policy year only and submit a renewal Application for the upcoming policy year. *A separate premium payment must be submitted for each transaction.* (The insured and/or mortgagee, if payor, should be advised not to pay the Renewal Notice or Final Notice when a renewal Application and premium have been submitted.)
2. If the original Renewal Notice *has been paid*, the agent/producer must submit the General Change Endorsement together with any required additional premium for the renewal policy year and, if applicable, a separate General Change Endorsement and additional premium for the remainder of the current policy year. The effective date of the endorsement to increase coverage (up to the inflation factor) will be the “renewal date”

only if the endorsement and additional premium are received within the 30-day grace period.

C. Refunds Generated from Endorsement Processing

The return premium is based on rates in effect on the effective date of the change or the policy effective date, in accordance with the WYO Company’s standard business practice. It is calculated by revising the rate, effective from the inception date of the current policy year, provided the inception date is on or after the community conversion date.

The Federal Policy Fee and Probation Surcharge (if applicable) are not subject to calculation of return premiums.

IV. COMPLETING THE FLOOD INSURANCE GENERAL CHANGE ENDORSEMENT FORM

A. General Change Endorsement Instructions

Instructions for completing the General Change Endorsement form are self-explanatory. The policy number, reason for change, and the endorsement effective date are required items for completing the form. The following items are of special note:

• Policy Period

In this section, enter the policy expiration date (month/day/year) and endorsement effective date. The policy period cannot be changed. All calculations must reflect the policy period shown on the current declarations page.

• Property Location

A flood policy may not be endorsed to change the insured property location, unless correcting an erroneous property address. If the property address is rural, enter the legal description or geographic location of the property (do not use P.O. Box). *For additional guidance, refer to the Property Address Corrections subsection in this section.*

For example, the insured’s mailing address may be shown as:

Route 4
Box 179
Danville, OH 43014

The property location should be completed as: Farmhouse on the north side of U.S. 70, 6 miles west of Danville, OH 43014.

• Grandfathering Information

Verify whether the building was built in compliance or has had continuous coverage. *For additional guidance, refer to the NFIP Grandfathering Rules subsection in the Rating section of this manual.*

If the building was built in compliance, enter the community identification number, map panel number, suffix, FIRM zone, and, if applicable, the BFE. If grandfathering for continuous coverage, enter the prior policy number.

- **Building**

Complete this section to correct a property's building description. If applicable, submit any supporting documentation.

- **Contents**

The contents location section should be completed if contents coverage is being added/deleted or if the location of the contents being insured within the described building has changed. Provide an explanation of the change of location in the description area of the section.

- **Coverage and Rating**

Complete this section for such reasons as:

- Increasing, adding or reducing coverage limits
- Updating building's replacement cost information
- Changing deductibles

For additional guidance, refer to the Endorsement Rating examples in this section.

- All endorsements, whether paper or electronic form, must be signed. Electronic transactions are permitted if the business process includes authentication of signatures and dates of receipt of premium. WYO Companies are responsible for determining the business practices and transaction authentication methods they will use to ensure the security and integrity of such transactions.
- The insured must sign and date the General Change Endorsement form whenever there is a request to reduce policy limits, assign the policy, or change the agent/producer of record.

B. Refund Processing Procedures

1. The current insurer will be responsible for returning the premium for the current and the prior policy year, provided that it was the insurer for that period. If another NFIP insurer was the insurer for the prior policy year, it will be responsible for returning the premium for that policy year. Agents/producers submit refund requests to their insurer.

2. Requests for refunds for more than 2 policy years must be processed by the NFIP Bureau and Statistical Agent (NFIP Bureau).

- a. For requests processed by the NFIP Bureau, the current insurer must submit all of the documentation necessary to make a refund for any period exceeding 2 policy years. At a minimum, this documentation will consist of the following:

- The company's statistical records or declarations pages for each policy year and evidence of premium payments obtained from the insured if these documents are not available from the company's records.
- An endorsement request for each policy year and the premium refund calculation for each policy year that the company had the policy.
- A LOMA; a LOMR; a LODR; a copy of the most recent flood map marked to show the exact location and flood zone of the building; a letter indicating the exact location and flood zone of the building, and signed and dated by a local community official; an EC indicating the exact location and flood zone of the building, and signed and dated by a surveyor, an engineer, an architect, or a local community official; or a flood zone determination certification that guarantees the accuracy of the information.

- b. In order for the NFIP Bureau to process a refund request, the appropriate documentation must be mailed directly to:

NFIP Bureau and Statistical Agent
Underwriting Department
8400 Corporate Dr., Suite 350
Landover, MD 20785

3. WYO Companies will be notified of the premium refunded and the Expense Allowance due to the NFIP. The companies must maintain this documentation as part of their underwriting files.
4. Any lapse in coverage does not extend the number of policy years the premium refund is allowed.

The NFIP Bureau will return to the sender any unauthorized refund requests for more than 2 policy years.

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IV. ENDORSEMENT RATING EXAMPLES

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EXAMPLE 1
INCREASING COVERAGE ON A PREFERRED RISK POLICY

- Policy term is October 15, 2012–2013.
- Single Family with basement.
- Property Currently Mapped in X-Zone
- Present coverage: Building \$75,000/ Contents \$30,000.
- Premium at policy effective date was \$285.
- Endorsement effective date is May 2, 2013.
- Coverages added are \$125,000 on the building and \$50,000 on the contents for a total of \$200,000 on the building and \$80,000 on the contents.
- Rates in effect on the effective date of the policy are to be used in calculating the premiums.
- The Difference between these 2 premiums is \$81.
- Prorate the Difference.

Time period is May 2, 2013,
to October 15, 2013;
Number of days is 166;
Pro-rata factor is .455

INSURANCE COVERAGE	SECTION A - CURRENT LIMITS			SECTION B - NEW LIMITS			A + B PREMIUM			
	AMOUNT	RATE	PREMIUM	AMOUNT	RATE	PREMIUM				
BUILDING BASIC LIMIT	—	—	—	—	—	—	—			
BUILDING ADDITIONAL LIMIT	—	—	—	—	—	—	—			
CONTENTS BASIC LIMIT	—	—	—	—	—	—	—			
CONTENTS ADDITIONAL LIMIT	—	—	—	—	—	—	—			
FOR PRP ONLY, ENTER LIMITS FROM THE NFIP FLOOD INSURANCE MANUAL	BUILDING \$75,000	CONTENTS \$30,000	PREMIUM \$285	BUILDING \$125,000	CONTENTS \$50,000	PREMIUM \$366	\$366			
IF CHANGING AMOUNT OF INSURANCE, ENTER NEW TOTAL AMOUNT BELOW				PAYMENT METHOD: <input type="checkbox"/> CHECK <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____		SUBTOTAL		\$366		
BUILDING COVERAGE			CONTENTS COVERAGE			DEDUCTIBLE DISCOUNT/SURCHARGE		—		
BASIC	ADDITIONAL	TOTAL	BASIC			ADDITIONAL	TOTAL	SUBTOTAL		\$366
—	—	\$200,000	—			—	\$80,000	ICC PREMIUM		—
IF RETURN PREMIUM, MAIL REFUND TO: <input type="checkbox"/> INSURED <input type="checkbox"/> AGENT/PRODUCER <input type="checkbox"/> PAYOR						SUBTOTAL		\$366		
NOTICE: BUILDING COVERAGE BENEFITS – EXCEPT FOR A RESIDENTIAL CONDOMINIUM BUILDING – ARE NOT AVAILABLE IF OTHER NFIP BUILDING COVERAGE HAS BEEN PURCHASED BY THE APPLICANT OR ANY OTHER PARTY FOR THE SAME BUILDING. THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SEE REVERSE SIDE OF COPIES 2, 3, AND 4.								CRS PREMIUM DISCOUNT ____ %	—	
								SUBTOTAL	\$366	
								RESERVE FUND ____ %	—	
								SUBTOTAL	\$366	
								PREMIUM PREVIOUSLY PAID (Excludes Probation Surcharge/Federal Policy Fee)	\$285	
								DIFFERENCE _____ (+/-)	\$81	
								PRO-RATA FACTOR	.455	
TOTAL AMOUNT DUE (+/-)								\$37		

SIGNATURE OF INSURANCE AGENT/PRODUCER _____	_____/_____/_____ DATE (MM/DD/YYYY)
SIGNATURE OF INSURED (IF APPLICABLE) _____	_____/_____/_____ DATE (MM/DD/YYYY)
SIGNATURE OF ASSIGNEE (FOR ASSIGNMENT ONLY) _____	_____/_____/_____ DATE (MM/DD/YYYY)

EXAMPLE 2 INCREASING COVERAGE

- Policy term is December 12, 2013–2014.
- Single-family dwelling, no basement.
- Pre-FIRM Building.
- Building located in Zone C.
- Present coverage: Building \$35,000/ Contents \$10,000.
- Endorsement is effective on March 12, 2014, to add additional coverage of \$65,000 on the building and \$15,000 on the contents for a total of \$100,000 building coverage and \$25,000 contents coverage.
- Premium rates are: Building .99/.26, Contents 1.51/.47.
- To increase coverage, complete Sections A and B. Section A is for current coverage. Section B should show the amount of the coverage increase only.
- \$25,000 of the \$60,000 coverage to be added on the building must be calculated in the “Amount” column under Section B, “Increased/Decreased Coverage Only” (using the applicable rate) to amend the present coverage to the threshold for the Regular Program basic limits.
- \$10,000 of the \$15,000 coverage to be added on the contents must be calculated under the

“Amount” column under Section B, “Increased/Decreased Coverage Only” (using the applicable rate) to amend the present coverage to the threshold for the Regular Program basic limits.

- Add Section A and B premiums to obtain the New Premium Totals.
- Add the New Premium Totals to calculate the Premium Subtotal.
- Add the ICC Premium and calculate the New Premium Subtotal.
- Add the Reserve Fund Amount and calculate the New Premium Subtotal.
- The Premium Previously Paid is \$528 (excluding Probation Surcharge/Federal Policy Fee), which is the total current annual premium including ICC Premium and Reserve Fund Assessment.
- Subtract the Premium Previously Paid from the Premium Total to obtain the Difference (should be additional/return premium).
- Prorate the Difference.

Time period is March 12, 2014,
to December 12, 2014;
Number of days is 275;
Pro-rata factor is .753

INSURANCE COVERAGE	SECTION A - CURRENT LIMITS			SECTION B - NEW LIMITS			A + B PREMIUM
	AMOUNT	RATE	PREMIUM	AMOUNT	RATE	PREMIUM	
BUILDING BASIC LIMIT	\$35,000	.99	\$347	\$25,000	.99	\$248	\$595
BUILDING ADDITIONAL LIMIT	—	—	—	\$40,000	.26	\$104	\$104
CONTENTS BASIC LIMIT	\$10,000	1.51	\$151	\$15,000	1.51	\$227	\$378
CONTENTS ADDITIONAL LIMIT	—	—	—	—	—	—	—
FOR PRP ONLY, ENTER LIMITS FROM THE NFIP FLOOD INSURANCE MANUAL	BUILDING	CONTENTS	PREMIUM	BUILDING	CONTENTS	PREMIUM	
	—	—	—	—	—	—	—
IF CHANGING AMOUNT OF INSURANCE, ENTER NEW TOTAL AMOUNT BELOW							PAYMENT METHOD: <input type="checkbox"/> CHECK <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> OTHER: _____
BUILDING COVERAGE			CONTENTS COVERAGE				
BASIC	ADDITIONAL	TOTAL	BASIC	ADDITIONAL	TOTAL		
\$60,000	\$40,000	\$100,000	\$25,000	—	\$25,000		
IF RETURN PREMIUM, MAIL REFUND TO: <input type="checkbox"/> INSURED <input type="checkbox"/> AGENT/PRODUCER <input type="checkbox"/> PAYOR							
SUBTOTAL							\$1,077
DEDUCTIBLE DISCOUNT/SURCHARGE							—
SUBTOTAL							\$1,077
ICC PREMIUM							\$5
SUBTOTAL							\$1,082
CRS PREMIUM DISCOUNT ____ %							—
SUBTOTAL							\$1,082
RESERVE FUND ____ %							\$54
SUBTOTAL							\$1,136
PREMIUM PREVIOUSLY PAID (Excludes Probation Surcharge/Federal Policy Fee)							\$528
DIFFERENCE _____ (+/-)							\$608
PRO-RATA FACTOR							.753
TOTAL AMOUNT DUE (+/-)							\$458

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THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SEE REVERSE SIDE OF COPIES 2, 3, AND 4.

SIGNATURE OF INSURANCE AGENT/PRODUCER

SIGNATURE OF INSURED (IF APPLICABLE)

SIGNATURE OF ASSIGNEE (FOR ASSIGNMENT ONLY)

_____/_____/_____
DATE (MM/DD/YYYY)

_____/_____/_____
DATE (MM/DD/YYYY)

_____/_____/_____
DATE (MM/DD/YYYY)

EXAMPLE 3 INCREASING COVERAGE AFTER A RATE CHANGE

- Policy term is August 15, 2013–2014.
- Single-family dwelling, Regular Program.
- 1 floor, no basement.
- Current policy limits: Building \$30,000/ Contents \$8,000.
- Building located in an AE Zone, Post-FIRM.
- Premium rates are: Building 1.78, Contents 1.10.
- Post-FIRM construction with a 0 elevation difference.
- Endorsement effective date is October 22, 2013.
- The coverages being added are \$15,000 on the building and \$7,000 on contents for a total of \$45,000 building coverage and \$15,000 contents coverage.
- A rate increase takes effect on October 1, 2013.
- Rates in effect on the effective date of the policy are to be used.
- In Section A, enter the basic limits and rates for building and contents in effect at the beginning of the policy term.
- In Section B, enter the \$15,000 basic building amount, and the applicable rate (1.78). (See page END 1, "Addition of Coverage or Increase in Amount

of Insurance." Companies are allowed to use either rates in effect at policy inception or rates in effect at endorsement effective date.)

- In Section B, enter the \$7,000 basic contents amount and the applicable rate (1.10).
- Add Sections A and B premiums to obtain the New Premium Totals.
- Add the New Premium Totals to calculate the Premium Subtotal.
- Add in the ICC Premium and calculate the New Premium Subtotal.
- The Premium Previously Paid is \$627 (excluding Probation Surcharge/Federal Policy Fee), which is the total current annual premium including ICC Premium.
- Subtract the Premium Previously Paid from the Premium Total to obtain the Difference (should be additional/return premium).
- Prorate the Difference.

Time period is October 22, 2013,
to August 15, 2014;
Number of days is 297;
Pro-rata factor is .814

INSURANCE COVERAGE	SECTION A – CURRENT LIMITS			SECTION B – NEW LIMITS			A + B PREMIUM	
	AMOUNT	RATE	PREMIUM	AMOUNT	RATE	PREMIUM		
BUILDING BASIC LIMIT	\$30,000	1.78	\$534	\$15,000	1.78	\$267	\$801	
BUILDING ADDITIONAL LIMIT	—	—	—	—	—	—	—	
CONTENTS BASIC LIMIT	\$8,000	1.10	\$88	\$7,000	1.10	\$77	\$165	
CONTENTS ADDITIONAL LIMIT	—	—	—	—	—	—	—	
FOR PRP ONLY, ENTER LIMITS FROM THE NFIP FLOOD INSURANCE MANUAL	BUILDING	CONTENTS	PREMIUM	BUILDING	CONTENTS	PREMIUM		
	—	—	—	—	—	—	—	
IF CHANGING AMOUNT OF INSURANCE, ENTER NEW TOTAL AMOUNT BELOW								
BUILDING COVERAGE			CONTENTS COVERAGE					
BASIC	ADDITIONAL	TOTAL	BASIC	ADDITIONAL	TOTAL			
\$45,000	—	\$45,000	\$15,000	—	\$15,000			
IF RETURN PREMIUM, MAIL REFUND TO: <input type="checkbox"/> INSURED <input type="checkbox"/> AGENT/PRODUCER <input type="checkbox"/> PAYOR								
NOTICE: BUILDING COVERAGE BENEFITS — EXCEPT FOR A RESIDENTIAL CONDOMINIUM BUILDING — ARE NOT AVAILABLE IF OTHER NFIP BUILDING COVERAGE HAS BEEN PURCHASED BY THE APPLICANT OR ANY OTHER PARTY FOR THE SAME BUILDING. THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SEE REVERSE SIDE OF COPIES 2, 3, AND 4.							PAYMENT METHOD:	
							<input type="checkbox"/> CHECK	
							<input type="checkbox"/> CREDIT CARD	
							<input type="checkbox"/> OTHER: _____	
							SUBTOTAL	\$966
							DEDUCTIBLE DISCOUNT/SURCHARGE	—
							SUBTOTAL	\$966
							ICC PREMIUM	\$5
							SUBTOTAL	\$971
							CRS PREMIUM DISCOUNT ____ %	—
SUBTOTAL	\$971							
RESERVE FUND ____ %	—							
SUBTOTAL	\$971							
PREMIUM PREVIOUSLY PAID (Excludes Probation Surcharge/Federal Policy Fee)	\$627							
DIFFERENCE _____ (+/-)	\$344							
PRO-RATA FACTOR	.814							
TOTAL AMOUNT DUE (+/-)	\$280							

SIGNATURE OF INSURANCE AGENT/PRODUCER _____
 SIGNATURE OF INSURED (IF APPLICABLE) _____
 SIGNATURE OF ASSIGNEE (FOR ASSIGNMENT ONLY) _____

DATE (MM/DD/YYYY) _____
 DATE (MM/DD/YYYY) _____
 DATE (MM/DD/YYYY) _____

- Policy term is December 1, 2012–2013.
- Single-family dwelling, with basement.
- Regular Program, Zone B, Post-FIRM.
- Policy limits: Building \$150,000/Contents \$0.
- A wing of the building was destroyed by fire on July 1, 2013, and the building was repaired without the wing, reducing the value of the dwelling to \$100,000. (This explanation should be recorded in the Reason for Change section of the General Change Endorsement form.)
- Present rates are: Building 1.08/.37.
- Endorsement effective date is July 1, 2013.
- In Section A, enter the basic building amount (\$60,000) and the applicable rate (1.03).
- In Section B, enter the new additional building amount at the same rate of .35.
- Add Sections A and B to obtain the New Premium Totals.

- Add the New Premium Totals to obtain the Premium Subtotal.
- Add in the ICC Premium and calculate the New Premium Subtotal.
- The Premium Previously Paid is \$986 (excluding the Probation Surcharge/Federal Policy Fee), which is the total current annual premium including ICC Premium.
- Subtract the Premium Previously Paid from the Premium Total to obtain the Difference (should be additional/return premium).
- Prorate the Difference.
Time period is July 1, 2013,
to December 1, 2013;
Number of days is 153;
Pro-rata factor is .419

OCTOBER 1, 2013

THIS LAYOUT OF THE REVISED GENERAL CHANGE ENDORSEMENT, PART 1 OF 2, IS PROVIDED FOR YOUR REFERENCE.
THE FINAL FORM WILL BE RELEASED UPON O.M.B. APPROVAL.

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program

FLOOD INSURANCE GENERAL CHANGE ENDORSEMENT, PART 1 (OF 2)

IMPORTANT—PLEASE PRINT OR TYPE; ENTER DATES AS MM/DD/YYYY.

POLICY #: _____

CHANGE	REASON FOR CHANGE (CHECK ALL THAT APPLY)	ASSIGNMENT	REASON FOR ASSIGNMENT:	BILLING	FOR RENEWAL, BILL:		
	<input type="checkbox"/> MORTGAGEE <input type="checkbox"/> INCREASE COVERAGE <input type="checkbox"/> BUILDING INFORMATION <input type="checkbox"/> INSURED INFORMATION <input type="checkbox"/> OTHER (SPECIFY): _____	<input type="checkbox"/> MAILING ADDRESS <input type="checkbox"/> BILLING <input type="checkbox"/> AGENT/PRODUCER <input type="checkbox"/> OTHER (SPECIFY): _____	<input type="checkbox"/> NEW PURCHASE DATE OF PURCHASE: ____/____/____ <input type="checkbox"/> OTHER (SPECIFY): _____	<input type="checkbox"/> INSURED <input type="checkbox"/> FIRST MORTGAGEE <input type="checkbox"/> SECOND MORTGAGEE	<input type="checkbox"/> LOSS PAYEE <input type="checkbox"/> OTHER (AS SPECIFIED IN THE "2ND MORTGAGEE/OTHER" BOX BELOW)		
POLICY PERIOD	POLICY PERIOD IS FROM ____/____/____ TO ____/____/____ 12:01 A.M. LOCAL TIME AT THE INSURED PROPERTY LOCATION. ENDORSEMENT EFFECTIVE DATE: ____/____/____ FOR ADDED COVERAGE, INDICATE THE APPLICABLE WAITING PERIOD: <input type="checkbox"/> STANDARD 30 DAY <input type="checkbox"/> REQUIRED FOR LOAN TRANSACTION - NO WAITING <input type="checkbox"/> MAP REVISION (ZONE CHANGE FROM NON-SFHA TO SFHA) - 1 DAY			NAME AND MAILING ADDRESS OF INSURED: PHONE NO.: _____			
AGENT/PRODUCER INFORMATION	NAME AND MAILING ADDRESS OF AGENT/PRODUCER: AGENCY NO.: _____ AGENT'S TAX ID: _____ PHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____			PROPERTY LOCATION NOTE: ONE BUILDING PER POLICY - BLANKET COVERAGE NOT PERMITTED. IS INSURED PROPERTY LOCATION SAME AS INSURED MAILING ADDRESS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ENTER PROPERTY ADDRESS, IF RURAL, ENTER LEGAL DESCRIPTION, OR GEOGRAPHIC LOCATION OF PROPERTY (DO NOT USE P.O. BOX). FOR AN ADDRESS WITH MULTIPLE BUILDINGS AND/OR FOR A BUILDING WITH ADDITIONS OR EXTENSIONS, DESCRIBE THE INSURED BUILDING: _____			
1ST MORTGAGEE	NAME AND MAILING ADDRESS OF FIRST MORTGAGEE: LOAN NO.: _____			2ND MORTGAGEE/OTHER NAME AND MAILING ADDRESS OF: <input type="checkbox"/> 2ND MORTGAGEE <input type="checkbox"/> LOSS PAYEE <input type="checkbox"/> OTHER (SPECIFY): _____ LOAN NO.: _____			
COMMUNITY	RATING MAP INFORMATION NAME OF COUNTY/PARISH: _____ COMMUNITY NO./PANEL NO. AND SUFFIX: _____ FIRM ZONE: _____ COMMUNITY PROGRAM TYPE IS: <input type="checkbox"/> REGULAR <input type="checkbox"/> EMERGENCY			GRANDFATHERING INFORMATION GRANDFATHERED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, <input type="checkbox"/> BUILT IN COMPLIANCE OR <input type="checkbox"/> CONTINUOUS COVERAGE PRIOR POLICY NO.: _____ CURRENT COMMUNITY NO./PANEL NO. AND SUFFIX: _____ CURRENT FIRM ZONE: _____ CURRENT BFE: _____			
BUILDING	BUILDING OCCUPANCY <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> 2-4 FAMILY <input type="checkbox"/> OTHER RESIDENTIAL <input type="checkbox"/> NON-RESIDENTIAL (INCLUDING HOTEL/MOTEL) BUILDING PURPOSE <input type="checkbox"/> 100% RESIDENTIAL <input type="checkbox"/> 100% NON-RESIDENTIAL <input type="checkbox"/> MIXED-USE - SPECIFY PERCENTAGE OF RESIDENTIAL USE: ____ % IS BUILDING A BUSINESS PROPERTY? <input type="checkbox"/> YES <input type="checkbox"/> NO BASEMENT, ENCLOSURE, CRAWLSPACE <input type="checkbox"/> NONE <input type="checkbox"/> FINISHED BASEMENT/ENCLOSURE <input type="checkbox"/> CRAWLSPACE <input type="checkbox"/> UNFINISHED BASEMENT/ENCLOSURE <input type="checkbox"/> SUBGRADE CRAWLSPACE NUMBER OF FLOORS IN BUILDING (INCLUDING BASEMENT/ENCLOSED AREA, IF ANY) OR BUILDING TYPE <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 OR MORE <input type="checkbox"/> SPLIT LEVEL <input type="checkbox"/> TOWNHOUSE/ROWHOUSE (RCBAP LOW-RISE ONLY) <input type="checkbox"/> MANUFACTURED (MOBILE) HOME/TRAVEL TRAILER ON FOUNDATION IS COVERAGE FOR A CONDO UNIT? <input type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING IN A CONDOMINIUM FORM OF OWNERSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO TOTAL NUMBER OF UNITS: _____ <input type="checkbox"/> HIGH-RISE <input type="checkbox"/> LOW-RISE			IS BUILDING WALLED AND ROOFED? <input type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING IN THE COURSE OF CONSTRUCTION? <input type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING OVER WATER? <input type="checkbox"/> NO <input type="checkbox"/> PARTIALLY <input type="checkbox"/> ENTIRELY IS BUILDING INSURED'S PRINCIPAL/PRIMARY RESIDENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING A RENTAL PROPERTY? <input type="checkbox"/> YES <input type="checkbox"/> NO IS THE INSURED A TENANT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, IS THE TENANT REQUESTING BUILDING COVERAGE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, SEE NOTICE BELOW. DOES THE BUILDING HAVE ANY ADDITIONS OR EXTENSIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO (ADDITIONS AND EXTENSIONS MAY BE SEPARATELY INSURED.) IS BUILDING ELEVATED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, AREA BELOW IS: <input type="checkbox"/> FREE OF OBSTRUCTION <input type="checkbox"/> WITH OBSTRUCTION CONSTRUCTION DATE: ____/____/____ CHECK ONE OF THE FOLLOWING: <input type="checkbox"/> BUILDING PERMIT <input type="checkbox"/> SUBSTANTIAL IMPROVEMENT <input type="checkbox"/> CONSTRUCTION <input type="checkbox"/> FOR MANUFACTURED (MOBILE) HOMES/TRAVEL TRAILERS LOCATED IN A MOBILE HOME PARK OR SUBDIVISION: CONSTRUCTION DATE OF MOBILE HOME PARK OR SUBDIVISION FACILITIES <input type="checkbox"/> FOR MANUFACTURED (MOBILE) HOMES/TRAVEL TRAILERS LOCATED OUTSIDE A MOBILE HOME PARK OR SUBDIVISION: DATE OF PERMANENT PLACEMENT			
CONTENTS	CONTENTS LOCATED IN*: <input type="checkbox"/> BASEMENT/ENCLOSURE <input type="checkbox"/> BASEMENT/ENCLOSURE AND ABOVE <input type="checkbox"/> LOWEST FLOOR ONLY ABOVE GROUND LEVEL <input type="checkbox"/> LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER <input type="checkbox"/> ABOVE GROUND LEVEL MORE THAN 1 FULL FLOOR IS PERSONAL PROPERTY HOUSEHOLD CONTENTS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, DESCRIBE: _____ *IF SINGLE FAMILY, CONTENTS ARE RATED THROUGHOUT THE BUILDING.			IS BUILDING POST-FIRM CONSTRUCTION? <input type="checkbox"/> YES <input type="checkbox"/> NO BUILDING DIAGRAM NO.: _____ LOWEST ADJACENT GRADE (LAG): _____ ELEVATION CERTIFICATION DATE: ____/____/____ LOWEST FLOOR ELEVATION: _____ (-) BASE FLOOD ELEVATION: _____ (-) DIFFERENCE TO NEAREST FOOT: _____ (+ OR -) (IF POST-FIRM CONSTRUCTION IN ZONES A, A1-A30, AE, AO, AH, V, V1-V30, VE, OR IF PRE-FIRM CONSTRUCTION IS ELEVATION RATED, ATTACH ELEVATION CERTIFICATE.) IN ZONES V AND V1-V30 ONLY, DOES BASE FLOOD ELEVATION INCLUDE EFFECTS OF WAVE ACTION? <input type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING FLOODPROOFED? <input type="checkbox"/> YES <input type="checkbox"/> NO (SEE THE NFIP FLOOD INSURANCE MANUAL FOR CERTIFICATION FORM.)			
ELEVATION DATA	ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): \$ _____ DEDUCTIBLE*: BUILDING \$ _____ CONTENTS \$ _____ DEDUCTIBLE BUYBACK? <input type="checkbox"/> YES <input type="checkbox"/> NO * THE PRP PROVIDES THE STANDARD DEDUCTIBLES ONLY.						
COVERAGE AND RATING	TO INCREASE/DECREASE COVERAGE, COMPLETE SECTIONS A & B. FOR RATE CHANGE, COMPLETE SECTION A ONLY.						
	SECTION A - CURRENT LIMITS			SECTION B - NEW LIMITS			A + B PREMIUM
	INSURANCE COVERAGE	AMOUNT	RATE	PREMIUM	AMOUNT	RATE	PREMIUM
	BUILDING BASIC LIMIT						
	BUILDING ADDITIONAL LIMIT						
	CONTENTS BASIC LIMIT						
	CONTENTS ADDITIONAL LIMIT						
	FOR PRP ONLY, ENTER LIMITS FROM THE NFIP FLOOD INSURANCE MANUAL	BUILDING	CONTENTS	PREMIUM	BUILDING	CONTENTS	PREMIUM
	IF CHANGING AMOUNT OF INSURANCE, ENTER NEW TOTAL AMOUNT BELOW				PAYMENT METHOD: SUBTOTAL		
	BUILDING COVERAGE		CONTENTS COVERAGE		<input type="checkbox"/> CHECK DEDUCTIBLE DISCOUNT/SURCHARGE		
	BASIC	ADDITIONAL	TOTAL	BASIC	ADDITIONAL	TOTAL	SUBTOTAL
							ICC PREMIUM
	IF RETURN PREMIUM, MAIL REFUND TO: <input type="checkbox"/> INSURED <input type="checkbox"/> AGENT/PRODUCER <input type="checkbox"/> PAYOR				SUBTOTAL		
	NOTICE: BUILDING COVERAGE BENEFITS - EXCEPT FOR A RESIDENTIAL CONDOMINIUM BUILDING - ARE NOT AVAILABLE IF OTHER NFIP BUILDING COVERAGE HAS BEEN PURCHASED BY THE APPLICANT OR ANY OTHER PARTY FOR THE SAME BUILDING.				CRS PREMIUM DISCOUNT ____ %		
	THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SEE REVERSE SIDE OF COPIES 2, 3, AND 4.				SUBTOTAL		
	SIGNATURE OF INSURANCE AGENT/PRODUCER _____ DATE (MM/DD/YYYY) ____/____/____				RESERVE FUND ____ %		
	SIGNATURE OF INSURED (IF APPLICABLE) _____ DATE (MM/DD/YYYY) ____/____/____				SUBTOTAL		
	SIGNATURE OF ASSIGNEE (FOR ASSIGNMENT ONLY) _____ DATE (MM/DD/YYYY) ____/____/____				PREMIUM PREVIOUSLY PAID (Excludes Probation Surcharge/Federal Policy Fee)		
					DIFFERENCE ____ (+/-)		
					PRO-RATA FACTOR		
					TOTAL AMOUNT DUE ____ (+/-)		

PLEASE SUBMIT TOTAL AMOUNT DUE WITH THE NFIP COPY OF THIS ENDORSEMENT, IF PAYING BY CHECK OR MONEY ORDER. MAKE PAYABLE TO THE NATIONAL FLOOD INSURANCE PROGRAM. ATTACH CHECK OR MONEY ORDER TO ORIGINAL AND SEND TO NFIP. KEEP SECOND COPY FOR YOUR RECORDS, GIVE THIRD COPY TO INSURED, AND FOURTH COPY TO MORTGAGEE.

N F I P
C O P Y

OCTOBER 1, 2013

FLOOD INSURANCE GENERAL CHANGE ENDORSEMENT

FEMA Form 086-0-3

NONDISCRIMINATION

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

PRIVACY ACT

The information requested is necessary to process your Flood Insurance Application for a flood insurance policy. The authority to collect the information is Title 42, U.S. Code, Sections 4001 to 4028. Disclosures of this information may be made: to federal, state, tribal, and local government agencies, fiscal agents, your agent, mortgage servicing companies, insurance or other companies, lending institutions, and contractors working for us, for the purpose of carrying out the National Flood Insurance Program; to current Severe Repetitive Loss property owners and Preferred Risk Policy owners for the purpose of property loss history evaluation; to the American Red Cross for verification of nonduplication of benefits following a flooding event or disaster; to law enforcement agencies or professional organizations when there may be a violation or potential violation of law; to a federal, state, or local agency when we request information relevant to an agency decision concerning issuance of a grant or other benefit, or in certain circumstances when a federal agency requests such information for a similar purpose from us; to a Congressional office in response to an inquiry made at the request of an individual; to the Office of Management and Budget (OMB) in relation to private relief legislation under OMB Circular A-19; and to the National Archives and Records Administration in records management inspections. Providing the information is voluntary, but failure to do so may delay or prevent issuance of the flood insurance policy.

GENERAL

This information is provided pursuant to Public Law 96-511 (Paperwork Reduction Act of 1980, as amended), dated December 11, 1980, to allow the public to participate more fully and meaningfully in the Federal paperwork review process.

AUTHORITY

Public Law 96-511, amended, 44 U.S.C. 3507; and 5 CFR 1320.

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 9 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington VA 20598-3005, Paperwork Reduction Project (1660-0033). **NOTE: Do not send your completed form to this address.**