3. How To Write

I. Rating

A. General Information

1. Writing a Flood Insurance Policy

Writing a flood insurance policy properly involves gathering a lot of information and following prescribed steps for different types of coverage. **Table 1** outlines the requirements, which this section discusses in detail.

Table 1. Rating a Flood Insurance Policy

STEP	DECISION	OPTION
Initial Determinations	Community Information	• Emergency versus Regular Program • Flood Zone
	Building	• Meets the definition of an eligible building
	Amount and Type of Coverage	• Building coverage, contents coverage, or both
	Application Form to Use	• Flood Insurance Application • Preferred Risk Policy and Newly Mapped Application
Gather Preliminary Rating Information	Property Location	• Street address • Legal description • Geographic location
	Date of Construction	• Pre-FIRM • Post-FIRM
	Rating Considerations	• Preferred Risk Policy or Newly Mapped Procedure • Post-FIRM (Full Risk) • Optional Post-FIRM Rating • Grandfathering • Pre-FIRM • Pre-FIRM subsidized • RCBAP
	Building Occupancy	• Single family • 2–4 family • Other residential • Non-residential business • Other non-residential
	Primary Residence	• Yes • No
	Number of Floors	• 1 Floor • 2 Floors • 3 or More Floors • Split Level • Townhouse/Rowhouse (RCBAP low-rise only) • Manufactured (mobile) home/travel trailer on foundation

Table 1. Rating a Flood Insurance Policy *continued*

STEP	DECISION	OPTION
Determine Non-elevated or Elevated Building	Make determination based on foundation type	• Non-elevated building • Elevated building
Determine Type of Rating	Rating without an Elevation Certificate (EC)	• Non-elevated building • Elevated building
	Rating with an EC	• Non-elevated building • Elevated building • Any flood zone beginning with A • Any flood zone beginning with V
Determine Elevation Difference if Rating with an EC	Calculate difference between lowest floor elevation and Base Flood Elevation (BFE) or grade elevation	• Building lowest floor elevation • BFE or grade elevation
Determine Premium	Calculate premium and add fees, surcharges, etc.	• Standard-rated policy • PRP and Newly Mapped procedure • RCBAP • **Note:** Premium calculations will appear after each of the sections listed above.

2. Amount of Insurance Available

Table 2 shows the maximum coverage amounts available under the Emergency and the Regular Programs.

- The amount of insurance may not exceed the maximum coverage limits in Table 2.
- Emergency and Regular Program limits are not combinable to provide a higher limit.
- The limits apply to all single condominium units and all other buildings not in a condominium form of ownership, including cooperatives and timeshares.
- Refer to the Condominium section of this manual for basic insurance limits and maximum amount of insurance available under the Residential Building Condominium Association Policy (RCBAP).

NOTE

If the value of the structure is below the minimum deductible available, a loss payment will not be paid by the insurer.

Table 2. Maximum Amount of Insurance Available for the Emergency and Regular Programs[1,2]

Building Occupancy	Emergency Program	Regular Program Basic Insurance Limits	Regular Program Additional Insurance Limits	Regular Program Total Insurance Limits
Single-Family Dwelling	$35,000[3]	$60,000	$190,000	$250,000
2–4 Family Building	$35,000[3]	$60,000	$190,000	$250,000
Other Residential Building	$100,000[5]	$175,000	$325,000	$500,000
Non-Residential Building (including Business Buildings and Other Non-Residential Buildings)[4]	$100,000[5]	$175,000	$325,000	$500,000
Contents Coverage				
Residential Property[6]	$10,000	$25,000	$75,000	$100,000
Non-Residential Business, Other Non-Residential Property[4]	$100,000	$150,000	$350,000	$500,000

1. Table 2 provides the maximum coverage amounts available under the Emergency Program and the Regular Program, and the columns cannot be aggregated to exceed the limits in the Regular Program, which are established by statute. The aggregate limits for building coverage are the maximum coverage amounts allowed by statute for each building included in the relevant Occupancy Category.
2. These limits apply to all single condominium units and all other buildings not in a condominium form of ownership, including cooperatives and timeshares. Refer to the Condominiums section of this manual for basic insurance limits and maximum amount of insurance available under the RCBAP.
3. In Alaska, Guam, Hawaii, and U.S. Virgin Islands, the amount available is $50,000.
4. For further guidance on Non-Residential Business and Other Non-Residential occupancies, refer to Table 7. Building Occupancy Types in this section of the manual.
5. In Alaska, Guam, Hawaii, and U.S. Virgin Islands, the amount available is $150,000.
6. The Residential Occupancy Category includes the Single Family, 2–4 Family, Other Residential, and Residential Condominium Occupancies.

3. Application Forms

There are two different application forms used to write a policy.

- Flood Insurance Application:
  - Use this application to write most policies, including RCBAPs.
- Preferred Risk Policy and Newly Mapped Application:
  - Use this application for buildings located outside of the Special Flood Hazard Area (SFHA) (zones B, C, X, D), or in an AR or A99 zone on the current effective flood map. These buildings may be eligible for Preferred Risk Policies (PRPs).
  - Use this application for buildings newly mapped from a non-SFHA into an SFHA that are eligible for the Newly Mapped rating procedure.
  - See the PRP and Newly Mapped sections for eligibility requirements.

B. Preliminary Rating Information

1. Property Location

There are three ways to determine property location, listed in the subsections below. Note that a P.O. Box address is not a valid identification of the insured property's location.

NOTE

For property locations that contain multiple buildings, or if applying for insurance separately for a building with additions and extensions, provide a description of the building to be insured.

Example: Maintenance Building #1

a. Street Address

A street address is the preferred method and it includes:

- Street number;
- Street name;
- Unit or apartment number;
- City or county name;
- State; *and*
- ZIP code.

Example: 4200 Parkview Drive, Unit 6B, Carnegie, PA 15106

b. Legal Description

A legal description is the description of the property on the deed or other legal document and includes the community name, subdivision name, and lot number. The insurer may use a legal description only when a building or a subdivision is in the course of construction, or prior to it having an established street address. The insurer must endorse the policy to indicate the street address as soon as it is available.

Example: Westmoreland Square, subdivision 3, lot 142

c. Geographic Location

A geographic location is a written description of the property's location using location or other identifying markers. If a property is rural and a standard street address is not available, the insurer can enter a detailed description of the property's location.

Example: The grain silo behind the barn at the intersection of route 50 and highway 68

2. Determine the Flood Zone

a. General Information

To begin the rating process, obtain the flood zone from one of the following sources:

- Flood Insurance Rate Map (FIRM);
- Standard Flood Hazard Determination Form (SFHDF);
- Elevation Certificate (EC);
- Letter of Map Amendment (LOMA);
- Letter of Map Revision (LOMR); *or*
- FEMA Flood Map Service Center at https://msc.fema.gov.

The rating process defines flood zones as either Special Flood Hazard Areas (SFHAs) or non-SFHAs.

- SFHA zones are: A, AE, A1–A30, AH, AO, AR, A99, V, VE, V1–V30.
- Non–SFHA zones are: B, C, X, D.

b. Special Considerations

Below are items to consider when writing a policy:

- Choose the rating method that provides the most favorable premium (lower rate) or flood coverage to the insured.
- When presented with documentation that includes conflicting flood zones or BFEs, and the conflict cannot be resolved, use the more hazardous flood zone or BFE where the building foundation is located. For example, if presented with an EC and Flood Zone Determination (FZD) with conflicting flood zones or BFEs, use the more hazardous information.
- When an attached deck or a portion of the building overhangs a more hazardous flood zone/BFE, but the building foundation system does not extend into the more hazardous flood zone/BFE, rate the building using the flood zone/BFE where the building foundation is located.

3. Determine Pre- or Post-FIRM Construction

a. Post-FIRM Construction

For insurance rating purposes, buildings are Post-FIRM construction when the start of construction or substantial improvement was **after December 31, 1974**, or on or after the effective date of the initial FIRM for the community, whichever is later.

b. Pre-FIRM Construction

For insurance rating purposes, buildings are Pre-FIRM construction when the start of construction or substantial improvement was **on or before December 31, 1974**, or before the effective date of the initial FIRM for the community.

c. Date of Construction for Manufactured Homes/Travel Trailers

Determining the date of construction differs for manufactured homes/travel trailers located in a manufactured home park or subdivision versus those on individually owned lots or tracts of land. See **Table 3** for more detailed guidance.

Table 3. Date of Construction — Manufactured Home/Travel Trailer

Manufactured (Mobile) Home/ Travel Trailer Location	Determine Construction Date
Manufactured Home Park or Subdivision	• The date facilities were constructed for servicing the manufactured home site; *or* • The date of the permit, provided that construction began within 180 days of the permit date.
Individually Owned Lots or Tracts of Land	• The date the manufactured home was permanently affixed to the site; *or* • The permit date if affixed to the site within 180 days of the permit date.

4. Substantial Improvement

The agent must confirm if a local community official has declared the building substantially improved.

a. Post-FIRM

The substantial improvement date becomes the date of construction for rating purposes. Rate the policy using the FIRM in effect at the time that the substantial improvement occurred or the current map, whichever is later.

b. Pre-FIRM

If the building is substantially improved on or after April 1, 2015, the date of construction will be the date the building was originally constructed for rating purposes. It is eligible for Pre-FIRM subsidized rates as long as there has been no lapse in coverage (see Pre-FIRM Eligibility Table). Always use full-risk rates for Pre-FIRM buildings when the full-risk rate is lower than the appropriate Pre-FIRM subsidized rates.

If the building is substantially improved before April 1, 2015, the substantial improvement date becomes the date of construction for rating purposes. Rate the policy using the full-risk rates based on the FIRM in effect at the time of the substantial improvement or the current map, whichever is later.

NOTE

All historic buildings are Pre-FIRM if they meet the definition of "historic building" provided in the Definitions appendix.

5. Determine the Most Beneficial Premium/Coverage

Insurers may rate the same building different ways, resulting in different premiums/coverage. Insurers must determine the most beneficial premium/coverage for the insured. Coverage limitations may apply based on the method used to rate a building. Consider the following options from **Table 4** to determine the most beneficial premium.

Table 4. Types of Rating

RATING TYPE	REQUIREMENTS
PRP or Newly Mapped Rating	**PRP** • Buildings in a B, C, X, AR, or A99 Zone. **Newly Mapped** • Buildings recently mapped into an SFHA other than Zone AR or A99. **Both PRP and Newly Mapped** • Must meet eligibility requirements; • Not available for condominium associations; *and* • See the PRP and Newly Mapped sections.
Pre-FIRM Subsidized Rating	• Pre-FIRM buildings. • Insurers should use full-risk rates for Pre-FIRM buildings ineligible for Pre-FIRM subsidized rates because of a lapse in coverage. • Refer to Table 6, Pre-FIRM Subsidized Rates Ineligibility Determination in this section, to determine eligibility for Pre-FIRM subsidized rates.
Optional Post-FIRM Rating	• Full-risk rates may be lower than Pre-FIRM rates for Pre-FIRM buildings located in SFHAs. • Insured must obtain an EC and request full-risk rating for: – Pre-FIRM buildings located in an SFHA; – AR and AR Dual Zones; *and* • See the Elevation and Floodproofing Certificates section of Appendix B: Forms.

Table 4. Types of Rating *continued*

RATING TYPE	REQUIREMENTS
Post-FIRM Rating	• The NFIP requires an EC to determine the rate for Post-FIRM buildings located in zones A (with or without BFEs), AE, A1–A30, AH, AO, V (with BFEs), VE, and V1–V30. • The NFIP does not require an EC to determine premium rates for Post-FIRM buildings located in zones AR and AR Dual, A99, B, C, D, and X. • Use for Pre-FIRM buildings located in SFHAs not eligible for the Pre-FIRM subsidized rates because of a lapse in coverage.
Grandfathered Rating	• Built in compliance; • Continuous coverage; *and* • See **Table 5** for more details.
Submit for Rate	For risks requiring submission to the insurer for rating purposes refer to the *NFIP Specific Rating Guidelines* at https://www.fema.gov/media-library/assets/documents/34620.

a. Eligibility for Grandfathered Rating

Buildings built in compliance with the FIRM in effect at the time of construction or buildings with continuous flood insurance coverage are eligible for grandfathering. **Table 5** provides information about grandfathering eligibility, and Table 5A provides examples of acceptable documentation to verify grandfathering eligibility.

Table 5. Buildings Eligible for Grandfathered Rating

TYPE	ELIGIBILITY	SPECIAL REQUIREMENTS
Built-in-Compliance	Buildings built in compliance with the FIRM in effect at the time of construction	In an elevated building, an enclosure below the elevated floor must be compliant. Enclosures are not compliant if any of the following conditions exist: • The enclosure is finished (see Enclosures section). • The enclosure is used for other than parking, storage, or building access. • For A zones, the enclosure does not have proper openings (see Proper Openings requirement). • For V zones, the enclosure does not have breakaway walls. • For V zones, there is machinery and equipment below the elevated floor. • The lowest floor is below the BFE at the time of construction. For example, the lowest floor is .1 to .5 ft. (foot) below the BFE at the time of construction. Do not apply the rounding rule first to determine grandfathering eligibility.

Table 5. Buildings Eligible for Grandfathered Rating *continued*

TYPE	ELIGIBILITY	SPECIAL REQUIREMENTS
Continuous Coverage	Continuous coverage under the NFIP maintained on the building	• Continuous NFIP coverage maintained since purchasing the initial policy on the building. • When changing insurers, the receiving insurer must obtain the prior insurer's declaration page for the expiring term to document continuous coverage. • Policy Assignment does not affect eligibility. **Note:** A policy lapse may impact eligibility for continuous coverage grandfathering rating, eligibility for Pre-FIRM Subsidized rates, or Newly Mapped Rating.

Table 5A. Documentation to Verify Grandfathering Eligibility

EXAMPLES OF DOCUMENTATION
• A copy of the map panel showing the location of the building. – Must show the date and zone in which the building is located. – The BFE, if any, for that zone. • The rating elements that are to be grandfathered. • A letter from a community official verifying this information, an elevation certificate, or a certified Flood Hazard Zone Determination. • An RCBAP declaration page may be used as supporting documentation for a unit owner policy within that building.

b. Disqualification for Pre-FIRM Subsidized or Newly Mapped Rating

If a policy on a Pre-FIRM building eligible for Pre-FIRM subsidized rates lapses, the building is no longer eligible for this subsidy or the Newly Mapped rating procedure under the following conditions:

- The insured wants to reinstate expired or canceled coverage on a previously covered building.
- One or more of the named insureds on the new policy was either a named insured on the expired or canceled policy or had an ownership interest in the building at the time of cancellation or expiration.
- The insured reinstated coverage with premium received on or after April 1, 2016:
  - The second time the insurer receives the renewal payment more than 30 days after expiration but within 90 days from the date of the policy expiration date, the coverage will be reinstated with a 30-day waiting period upon receipt of the renewal payment. **Note:** The policy remains eligible to renew using Pre-FIRM subsidized rates or the Newly Mapped rating procedure for only the first occurrence.
  - The insurer receives the renewal payment more than 90 days following the expiration date. The insurer must require a new application with the full annual premium and apply the 30-day waiting period.

- The insured is no longer eligible if the policy expires or if the cancellation was for a reason other than:
  - The insured's lender no longer required the insured to obtain and maintain flood insurance.
  - The property was in a community suspended from the NFIP and the insured reinstated the policy within 180 days of community's reinstatement as a participating NFIP community.

Refer to the guidance in **Table 6** to determine when to use Pre-FIRM Subsidized Rates.

Table 6. Pre-FIRM Subsidized Rates Ineligibility Determination[1,2]

Was there a Prior NFIP Policy for this Property in the Insured's Name?	Did a Lender require the Prior NFIP Policy?	Did the Prior NFIP Policy Lapse While Required by a Lender?	Was the Lapse the result of a Community Suspension?	Was the Community Reinstated within the Last 180 days?	Eligible for Pre-FIRM Subsidized Rates?
Yes	Yes	Yes	Yes	No	No
Yes	Yes	Yes	No	Yes	No
Yes	Yes	Yes	No	No	No

1. Use this table for all applications for Pre-FIRM buildings.
2. Also use this table for policy reinstatements by means of renewal, where coverage has lapsed more than 30 days after the prior policy expiration or cancellation date, and where the named insured has **not** maintained continuous coverage on the property from April 1, 2016 to the prior policy expiration or cancellation date.

6. Determine Building Occupancy

There are five different building occupancies. The maximum available coverage limits depend on the building occupancy. Refer to **Table 7** for occupancy types. For information regarding manufactured homes and travel trailers refer to the note below Table 7.

Table 7. Building Occupancy Types

OCCUPANCY	DEFINITION
Single Family	1. A residential single-family building in which the total floor area devoted to non-residential uses is less than 50 percent of the building's total floor area; *or* 2. A residential unit within a 2–4 family building, other-residential building, or non-residential building, in which commercial uses within the unit are limited to less than 50 percent of the unit's total floor area. Examples of commercial uses within the unit include offices, private schools, studios, or small service operations within a residential building. Single Family includes a residential townhouse/rowhouse, which is a multi-floor unit, divided from similar units by solid, vertical, load-bearing walls, dividing the building from its lowest level to its highest ceiling and having no openings in the walls between units and with no horizontal divisions between any of the units.

Table 7. Building Occupancy Types *continued*

OCCUPANCY	DEFINITION
2–4 Family	A residential building containing 2–4 residential units, with commercial uses limited to less than 25 percent of the building's total floor area. This category includes apartment buildings and condominium buildings. It excludes hotels and motels with normal room rentals for less than 6 months.
Other Residential	A residential building designed for use as a residential space for 5 or more units, or a mixed-use building in which the total floor area devoted to non-residential uses is less than 25% of the total floor area within the building. This category includes the following buildings where the normal occupancy of a guest is 6 months or more: • Dormitories; • Assisted-living facilities; • Condominium buildings; • Apartment buildings; • Hotels and motels; • Tourist homes; *and* • Rooming houses. **Note:** Condominium associations may be eligible for the Residential Condominium Building Association Policy (RCBAP). Refer to the Condominium section for more information.
Non-Residential Business	A building in which the named insured is a commercial enterprise primarily carried out to generate income and the coverage is for: 1. A building not designed for habitation or residential uses; 2. A mixed-use building in which the total floor area devoted to residential uses is: – 50 percent or less of the total floor area within the building if the residential building is a single-family property; *or* – 75 percent or less of the total floor area within the building for all other residential properties. 3. A building designed for use as office, retail space, wholesale space, hospitality space, or for similar uses; *or* 4. The following buildings where the normal occupancy of a guest is less than 6 months: – Condominium buildings; – Apartment buildings; – Hotels and motels; – Tourist homes; *or* – Rooming houses.
Other Non-Residential	A building not designed for habitation that does not qualify as a business building, or a mixed-use building that does not qualify as a residential building. This category includes, but is not limited to: houses of worship, schools, farm buildings (including grain bins and silos), garages, pool houses, clubhouses, and recreational buildings. A small business cannot use this category.

NOTE

The occupancy for manufactured homes and travel trailers may be residential or non-residential depending on their use. Manufactured homes and travel trailers must meet the following requirements:

- Be affixed to a permanent foundation that may be a poured masonry slab, foundation walls, piers, or blocks so that the wheels and axles of the mobile home do not support its weight.
- Anchored to a permanent foundation to resist flotation, collapse, or lateral movement by providing over-the-top or frame ties to ground anchors; or in accordance with manufacturer's specifications; or in compliance with the community's floodplain management requirements.
- Manufactured (Mobile) Homes continuously insured since September 30, 1982, can renew under the previously existing requirements if they meet the following conditions:
  - Are affixed to a permanent foundation in compliance with the foundation and anchoring requirements at the time of placement.
  - To be adequately anchored, the foundation support system must secure the manufactured or mobile home into the ground sufficiently to resist flotation, collapse, and lateral movement caused by flood forces, including wind forces in coastal areas.

7. Determine Single Building Eligibility

To qualify as a single-building structure, subject to the single-building limits of coverage, a building must be:

- Separated from other buildings by intervening clear space; *or*
- Separated into divisions by solid vertical load-bearing walls.
  - These walls must divide the building from its lowest level to its highest ceiling and have no openings.
  - If there is access through the division wall by a doorway or other opening, the structure must be insured as one building unless it meets all of the following criteria:
    - It is a separately titled building contiguous to the ground;
    - It has a separate legal description; *and*
    - It is regarded as a separate property for other real estate purposes, meaning that it has most of its own utilities and may be deeded, conveyed, and taxed separately.

8. Primary Residence

a. General Information

A primary residence is a single-family building, 2–4 family building, condominium unit, apartment unit, or unit within a cooperative building in which the insured or the insured's spouse lives. An insured or the insured's spouse may have no more than one primary residence per person. Where the insured or the insured's spouse identify different primary residences, the insured must submit the appropriate documentation for each person's primary residence.

For a single-family building, 2–4 family building, or unit to qualify as a primary residence, the insured or the insured's spouse must live in the residence:

- More than 50 percent of the 365 calendar days following the current policy effective date or
- 50 percent or less of the 365 calendar days following the current policy effective date if the insured has only one residence and does not lease that residence to another party, or use it as rental or income property at any time during the policy term.
  - Examples include, but are not limited to:
    - Active-duty military personnel deployed for 50 percent or more of the policy year in compliance with military orders;
    - Persons displaced from a primary residence and living in a temporary residence due to a federally declared disaster or a loss event on the primary residence claimed on any line of insurance for 50 percent or more of the policy year; *or*
    - Persons absent from a primary residence for reasons such as routine business travel, hospitalizations, and/or vacation for 50 percent or more of the policy year.

NOTE

NFIP uses the term **primary residence** for **rating** purposes only.

NFIP uses the term principal residence to determine loss settlement as defined in the Standard Flood Insurance Policy (SFIP). A principal residence is a single-family dwelling in which, at the time of loss, the named insured or the named insured's spouse has lived for either 80 percent of the 365 days immediately preceding the loss, or 80 percent of the period of ownership, if the dwelling was owned less than 365 days. If the dwelling does not meet the definition of principal residence in the SFIP, the NFIP will settle the building losses using actual cash value.

b. Documentation of Primary Residence

Insureds must present acceptable documentation that clearly shows the insured address is the primary residence.

NFIP accepts the following documentation of primary residence:

- Homestead Tax Credit form for Primary Residence;
- Driver's license;
- Automobile registration;
- Proof of insurance for a vehicle;
- Voter's registration;
- Documents showing where children attend school; or
- A signed and dated primary residence verification statement with the text below:

  <Insured Property Address>

  The above address is my primary residence, and I and/or my spouse will live at this location for more than 50 percent of the 365 days following the policy effective date.

  PURSUANT TO 28 U.S.C. § 1746 I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT

THE FOREGOING IS TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY CAUSE MY POLICY TO BE VOID, AND MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.

c. Primary Residence and Trusts

If the policy names a Trust, and a beneficiary of the Trust is using the building as a primary residence, the beneficiary of the Trust must provide documentation of primary residence outlined above. In addition, the insurer must obtain documentation that the person using the home as a primary residence is a beneficiary of the Trust named as the insured.

The grantor of a Trust may also be eligible for the primary residence status if the Trust documents support that the grantor is a beneficiary of the Trust with the right to live in the home. The grantor must submit both the Trust documents and documentation of primary residence outlined above. The insurer must obtain documentation that the grantor is a beneficiary of the Trust named as the insured with the right to live in the home as a benefit.

C. Determine if Elevated or Non-Elevated Building

1. General Information

For more information regarding Elevation Certificates (ECs), please refer to the Elevation and Floodproofing Certifications section.

2. Non-Elevated versus Elevated Buildings

a. Non-Elevated Building

A non-elevated building is a building with a:

- Slab-on-grade foundation with wood frame walls on the lowest level; *or*
- Basement or below grade (subgrade) crawlspace foundation.

NOTE

A non-elevated building has a basement if any area of the building, including any sunken room or sunken portion of a room, has its floor below ground level (subgrade) on all sides.

A non-elevated building has a subgrade crawlspace if the subgrade under-floor area is no more than 5 feet below the top of the next higher floor (living floor) and no more than 2 feet below the lowest adjacent grade (ground) level on all sides.

b. Elevated Building

An elevated building is a building that:

- Has no basement; *and*
- Has its lowest elevated floor raised above ground level by foundation walls, shear walls, posts, piers, pilings, or columns.

Table 8 describes the types of walls associated with elevated buildings.

Table 8. Elevated Buildings – Elevating Foundation Types

TYPE OF WALL	DESCRIPTION
Foundation walls are masonry walls, poured concrete walls, or precast concrete walls, regardless of height, that extend above grade and support the weight of a building.	Buildings with knee foundation walls below the elevated floor (e.g., foundation walls not constructed the full height of the area between the lowest elevated floor and the grade, with wood-frame or studs attached above the foundation wall) are elevated buildings for rating purposes. The building is non-elevated if a slab foundation supports the foundation walls.
	Solid (perimeter) foundation walls may be used to elevate the building in A Zones. Solid (perimeter) foundation walls are not an acceptable way to elevate buildings in V/VE Zones.
	An elevated building has an enclosure if rigid walls partially or fully enclose the portion below the lowest elevated floor. Examples of an enclosure are: • A garage, storage, or utility room below the elevated floor of an elevated building; • A garage, storage, or utility room attached to the side or back of an elevated building with the enclosure floor lower than the elevated floor; *or* • An enclosed crawlspace below the lowest elevated floor.
Shear walls are for structural support and not structurally joined or enclosed at the ends, except by breakaway walls.	Reinforced concrete or wood shear walls used as the method of elevating a building are normally parallel (or nearly parallel) to the expected flow of floodwaters.
Piers, posts, piles, and columns	This includes reinforced masonry piers, concrete piers or columns.

3. Enclosures

An enclosure is the portion of an elevated building below the lowest elevated floor partially or fully enclosed by rigid walls.

- A garage, storage or utility room below or attached to an elevated building is an enclosure.
- An enclosed crawlspace below the lowest elevated floor is an enclosure.

Note: A building with a subgrade crawlspace is non-elevated.

a. Enclosure Wall Types

- Insect screening with no additional support.
- Plastic lattice.
- Wooden or plastic slats or shutters.
- Solid wood frame walls.
- Masonry walls.
- Breakaway walls:

- Breakaway walls by design should cause no damage to the elevated portions of the elevated building and/or its supporting foundation system.
- For an enclosure's wall to qualify as breakaway, it must meet all of the following criteria:
  - Above ground level;
  - Below the elevated floor of an elevated structure;
  - Non-structurally supporting (non-load-bearing walls); *and*
  - Designed to fail under certain wave force conditions and cause no damage to the elevated portions of the elevated building and its supporting foundation system as a result of failure.

b. Finished Enclosure

An enclosure is a finished enclosure if any of the following apply:

- It is habitable.
- It has more than 20 linear feet of interior finished wall or paneling. A finished wall is:
  - Drywall taped, mudded, and painted; *or*
  - Painted plywood or similar material.
- It has uses other than building access (stairwells, elevators, etc.), parking, or storage purposes.

c. Proper Flood Openings Requirement

Proper flood openings (flood vents) allow the hydrostatic flood forces on the walls to equalize and minimize foundation damage to the building.

For elevated buildings in any flood zone beginning with an A, the NFIP minimum floodplain management ordinances require enclosures (including crawlspaces, attached garages, and elevator shafts) below the lowest elevated floor be designed with proper openings.

To satisfy the proper openings requirement for rating purposes:

- There must be a minimum of two openings positioned on at least two exterior walls. For partially subgrade floors, a minimum of two openings positioned on a single exterior wall adjacent to the lowest grade next to the building.
- The bottom of all openings must be no higher than one foot above the higher of the exterior or interior adjacent grade or floor immediately below the openings.
- The openings must have a total net area of not less than one square inch for every one square foot of enclosed area.

d. Alternative to Proper Openings Requirement

An alternative to the proper openings requirement is engineered openings. If used, the insured must provide to the insurer a copy of the certification validating that the openings meet NFIP requirements.

The certification statement must identify the building with the installed engineered openings and include:

- The design professional's name, title address, type of license, license number, the state issuing the license, and the signature and applied seal of the certifying registered design professional;
- A statement certifying that the design of the openings will automatically equalize hydrostatic flood loads on exterior walls by allowing for the automatic entry and exit of floodwaters; *and*
- A description of the range of flood characteristics tested or computed for which the certification is valid, such as rates of rise and fall of floodwaters.

e. Engineered Openings

Engineered openings identified by the International Code Council Evaluation Service, Inc., can be used to satisfy the proper opening requirements. The International Code Council Evaluation Service publishes an Evaluation Report for the specific engineered opening product (make and model) that is certified and the square footage of the area for which it is certified. If these openings are used, documentation to confirm the installation and model number of the opening is required. The Evaluation Report information can be referenced to confirm if the Engineered openings satisfy the proper openings requirement. Examples of documentation that can be used are:

- Documentation to confirm installation: this documentation should specify the number of openings installed, the square footage of the area for which they are certified, and the model number of the engineered opening; *or*
- Elevation certificate: the EC may have information that confirms the use of engineered openings.

For design requirements and specifications for certification statements, see FEMA Technical Bulletin 1-08, "Openings in Foundation Walls and Walls of Enclosures below Elevated Buildings in S pecial Flood Hazard Areas."

f. Buildings Entirely Over Water

Buildings entirely over water that were constructed or substantially improved before October 1, 1982, are eligible for coverage. Follow Submit-for-Rate procedures in this section if the building is located entirely in, on, or over water or seaward of mean high tide. If the building is Pre-FIRM, the Submit-for-Rate procedure may be used to determine optional full-risk rates; otherwise, Pre-FIRM buildings remain eligible for Pre-FIRM subsidized rates. If the building was constructed or substantially improved on or after October 1, 1982, the building is ineligible for coverage.

Exception: If a building was originally constructed on land or partially over water, and later becomes entirely over water because of erosion, it is eligible for coverage only if the building has had continuous coverage:

- from the period beginning at least 1 year prior to the building being located entirely over water, regardless of any changes in the ownership of the building; *or*
- from the date of construction if less than 1 year.

And documentation including the following information is presented:

- A letter from the community official stating that the building originally was constructed on land or only partially over water;
- Photographs of the building over land, if available;
- The approximate date when the building became located entirely over water; *and*
- Proof of continuous flood insurance coverage from the period beginning 1 year prior to the building being located entirely over water, or from the date of construction if less than 1 year.

g. Buildings Partially Over Water

Follow Submit-for-Rate procedures in this section if the building is partially over water. If the building is Pre-FIRM, the Submit-for-Rate procedure may be used to determine optional full-risk rates; otherwise, Pre-FIRM buildings remain eligible for Pre-FIRM subsidized rates.

h. Boathouses Located Partially Over Water

The non-boathouse parts of a building into which boats are floated are eligible for coverage if the building is partly over land and also used for residential, commercial, or municipal purposes and is eligible for flood coverage. The area above the boathouse used for purposes unrelated to the boathouse use (e.g., residential occupancy) is insurable from the floor joists to the roof, including walls. A common wall between the boathouse area and the other part of the building is insurable.

The following items are not covered:

- The ceiling and roof over the boathouse portions of the building into which boats are floated;
- Floors, walkways, decking, etc., within the boathouse area, or outside the area, but pertaining to boathouse use;
- Exterior walls and doors of the boathouse area not common to the rest of the building;
- Interior walls and coverings within the boathouse area; *and*
- Contents located within the boathouse area, including furnishings and equipment, relating to the operation and storage of boats and other boathouse uses.

Submit the Flood Insurance Application form with photographs, but no premium, to the NFIP for premium determination. No coverage becomes effective until the NFIP approves the insurance application, determines the rate, and receives the premium. However, buildings constructed prior to October 1, 1982, may continue to be rated using the published rate.

D. Determine Type of Rating

1. Rating without an Elevation Certificate

NFIP does not require an Elevation Certificate (EC) for:

- Pre- and Post-FIRM buildings in B, C, X, A99, AR/AR Dual, and D zones;
- Pre-FIRM buildings in A, AE, A1–A30, AO, AH, V, VE, and V1–V30 zones; *or*
- PRP and Newly-Mapped-rated policies.

a. Non-Elevated Building without an Elevation Certificate

The rating classes for non-elevated buildings are: No Basement, With Basement, and Non-Elevated with Subgrade Crawlspace. These classes are described in **Table 9** below.

Table 9. Rating Classes for Non-Elevated Buildings

RATING CLASS	DESCRIPTION
No Basement	Non-elevated building without a basement or subgrade crawlspace with slab-on-grade foundation.
With Basement	Non-elevated buildings have a basement if any area of the building, including any sunken room or sunken portion of a room, has a floor below ground level (subgrade) on all sides.
Non-elevated with Subgrade Crawlspace	A non-elevated building has a subgrade crawlspace if the subgrade under-floor area is no more than 5 feet below the top of the next higher floor (living floor) and no more than 2 feet below the lowest adjacent grade (ground) level on all sides.

b. Elevated Building without an Elevation Certificate

For elevated buildings rated without an EC, the rating classes are No Enclosure, With Enclosure, and Elevated on Crawlspace. These classes are described in **Table 10** below.

Table 10. Rating Classes for Elevated Buildings without an EC

RATING CLASS	DESCRIPTION
No Enclosure	An elevated building with no enclosure below the lowest elevated floor. Use the No Enclosure rates if: • There is no enclosure below the lowest elevated floor; • The area below the lowest elevated floor is enclosed by lattice or screening; *or* • The enclosure has proper flood openings.
Elevated with Enclosure	An elevated building with an enclosure (including garage, elevator shaft) below the lowest elevated floor. Use the With Enclosure rates if any of the following conditions exists: • There is a finished enclosure (See the Enclosures section.); • The enclosure is used for other than building access, parking, or storage; • The unfinished enclosure does not have proper openings. (See proper openings requirements.); *or* • There is an elevator below the lowest elevated floor.

Table 10. Rating Classes for Elevated Buildings without an EC *continued*

RATING CLASS	DESCRIPTION
Elevated on Crawlspace	An elevated building with a crawlspace below the elevated floor has an enclosure where the difference between the crawlspace floor and the top of the next highest floor (living floor) is no more than 5 feet and the crawlspace floor is not below grade on all sides. Use Elevated on Crawlspace rates if the crawlspace does not have proper openings. Use the No Enclosure rates if the crawlspace has proper openings.
Elevated on Crawlspace with Attached Garage	For an elevated building in any zone beginning with an "A," a crawlspace and garage are separate enclosures for an elevated building. Each enclosure must meet the proper flood opening requirements to exclude the enclosure floor for rating purposes. If the crawlspace and garage share two exterior walls not separated by a foundation wall, the crawlspace and garage are a single enclosure. Use the following guidelines to determine the rating class: • Use Elevated on Crawlspace if either the crawlspace or garage does not have proper openings; *or* • Use No Enclosure if both the crawlspace and garage have proper openings.

2. Elevation Certificate Rating

The NFIP requires an EC for all Post-FIRM buildings in A, AE, A1–A30, AO, AH, V, VE, V1–V30 zones. ECs are also used in optional rating of buildings in zones AR and AR Dual, and Pre-FIRM buildings using optional Post-FIRM rating.

For a building rated with an EC, the NFIP determines the rate by comparing the lowest floor elevation of the building to the Base Flood Elevation or grade elevation to establish an elevation difference. Additional information about ECs and determining the elevation difference information is included in this section of the manual.

a. Non-Elevated Building Rated with EC

The lowest floor elevation used for rating a non-elevated building is the elevation of the building's lowest floor, including basement or subgrade crawlspace. Refer to **Table 11**.

In V zones, the lowest floor elevation used for rating is elevation of the lowest horizontal member (bottom of the slab). For all non-elevated buildings in V zones constructed on or after October 1, 1981, follow the procedures outlined in the *NFIP Specific Rating Guidelines* manual at https://www.fema.gov/media-library/assets/documents/34620.

Table 11. Considerations when Rating Non-Elevated Buildings with an EC

CHARACTERISTIC	DESCRIPTION
Attached garage	In any zone beginning with the letter "A" where the attached garage is below the top of the bottom floor: **Single Family (including a condominium unit within a multi-unit residential building that qualifies as a single building)** • The garage floor can be excluded from rating in the following situations: – The garage floor is at or above the Base Flood Elevation (BFE); – The garage has proper openings; – The garage is below the BFE and there is no machinery or equipment; *or* – The garage has machinery or equipment below the BFE, and the garage has proper openings. **All Other Occupancies** • Use the garage floor as the lowest floor for rating when the garage floor is below the level of the building.
Basement	Use the elevation of the basement floor, including any sunken room or sunken portion of a room, having its floor below ground level (subgrade) on all sides.
Subgrade crawlspace	Use the elevation of the subgrade crawlspace floor where the subgrade under-floor area is no more than 5 feet below the top of the next higher floor and no more than 2 feet below the lowest adjacent grade on all sides.

b. Elevated Buildings Rated with EC

For an elevated building, the lowest floor elevation used for rating depends on the flood zone and the presence of an enclosure below the lowest elevated floor.

Any Flood Zone Beginning with A

For buildings located in any flood zone beginning with A, the lowest floor elevation used for rating can be the lowest elevated floor or the enclosure floor depending on the characteristic of the enclosure area. See **Table 12** for how the characteristic determines what elevation to use.

Table 12. Elevated Buildings in A Zones Rated with an EC

CHARACTERISTIC	DESCRIPTION
Elevated No Enclosure	Use the elevation of the lowest elevated floor if: • There is no enclosure below the lowest elevated floor; • The area below the lowest elevated floor is enclosed by lattice or screening; *or* • The enclosure has proper flood openings.
Elevated with Enclosure	For an elevated building with an enclosure (including crawlspace, attached garage, elevator shaft) below the elevated floor, use the enclosure floor for rating if any of the following conditions exists: • The enclosure is finished (see Enclosures section); • The unfinished enclosure does not have proper openings; • The enclosure is used for other than parking, storage, or building access; *or* • There is an elevator below the BFE. Use the No Enclosure rates if none of the above conditions exists.

Table 12. Elevated Buildings in A zones Rated with an EC *continued*

CHARACTERISTIC	DESCRIPTION
Elevated on Crawlspace with Attached Garage	For an elevated building on a crawlspace with an attached garage, and foundation walls that separate the main building and garage, the crawlspace and garage are separate enclosures. Each enclosure must be unfinished; used for parking, storage or access; have no elevator below the BFE; and have proper openings to exclude the enclosure floor for rating purposes. The crawlspace and garage are a single enclosure if the crawlspace and garage share two exterior walls not separated by a foundation wall. Use the following guidelines to determine the lowest floor for rating: • Use the top of the crawlspace or the garage floor, whichever is lower, if neither the crawlspace nor garage has proper openings; • Use the top of the crawlspace floor if the garage is the only area with proper openings; • Use the top of the garage floor if the crawlspace is the only area with proper openings; *or* • Use the top of the finished floor (lowest elevated floor), if both the crawlspace and garage have proper openings.
Elevated with an Enclosure and Garage under the Elevated Floor	If a building is elevated with an enclosure, and the garage is within the enclosure beneath the elevated floor, the garage area is part of the enclosure area. It is not necessary for the garage area to have its own flood openings, as long as the openings in the enclosure meet the NFIP proper openings requirements. • The garage area is part of the enclosed area when a garage shares exterior walls with other enclosed areas, and there is no foundation wall between them. • When a foundation wall separates the garage from other enclosed areas, the garage must meet the proper openings requirement to exclude it in rating.

Any Flood Zone Beginning with V

In any flood zone beginning with V, the lowest floor elevation used for rating can be the lowest elevated floor when there is no enclosure, or the enclosure floor, depending on the characteristic of the enclosure area.

See **Table 13** for how the characteristic determines what elevation to use. The lowest floor elevation is measured from the bottom of the lowest horizontal structural member as identified on C.2.c on the Elevation Certificate.

Table 13. Elevated Buildings in V Zones Rated with an EC

CHARACTERISTIC	DESCRIPTION	
Elevated with Enclosure	Use the bottom of the enclosure floor as the lowest floor for rating if any of the following conditions exists for an elevated building with an enclosure (including attached garage, elevator shaft) below the elevated floor: • The enclosure is used for other than parking, storage, and building access. • The enclosure is a finished enclosure (see Elevated Building section). • There is machinery and equipment below the BFE that provides utility services to the building. • There is an elevator below the BFE. • The enclosure is constructed with non-breakaway walls (see Walls section). • The enclosure is more than 300 square feet and has breakaway walls (see Walls section). • The enclosure has load-bearing, supporting walls that provide more than 25% of the building's structural support.	
1975 – 1981 Post-FIRM elevated buildings	A 1975-1981 Post-FIRM V Zone Construction refers to any elevated building constructed on or after January 1, 1975, and before October 1, 1981	
	No Enclosure Use the No Enclosure rates in Rate Table 3D in Appendix J if there is no enclosure or an unfinished enclosure under 300 square feet: • With breakaway walls; *and* • Without machinery or equipment.	**With Enclosure** Use the With Enclosure rates in Rate Table 3D in Appendix J if there is an enclosure: • With non-breakaway walls; • With breakaway walls 300 square feet or larger; *or* • That is finished (Refer to Enclosure section).
1981 Post-FIRM elevated buildings	A 1981 Post-FIRM V-Zone Construction refers to any V-Zone Post-FIRM building for which the: • Permit application date for the construction or substantial improvement is on or after October 1, 1981, *or* • Permit issue date was before October 1, 1981, and the actual start date of construction did not begin within 180 days of the permit date. There are two different rate tables for 1981 Post-FIRM Elevated Buildings built on or after October 1, 1981. Use of these tables depends on whether the building is Free of Obstruction or With Obstruction. The bottom of the lowest horizontal structural member is the lowest floor for rating purposes. Buildings built prior to October 1, 1981 can use these rate tables if the building complies with Post-1981 standards and it benefits the insured.	
	Free of Obstruction Use the Free of Obstruction rate table (Rate Table 3E in Appendix J) if there is no enclosure, no elevator, and no machinery and equipment below the BFE. Use the bottom of the elevated floor's lowest horizontal structural member as the lowest floor for rating.	**With Obstruction** Use the With Obstruction rate table (Rate Table 3F in Appendix J) with the bottom of the elevated floor's lowest horizontal structural member as the lowest floor for rating, if all of the following conditions exist:

Table 13. Elevated Buildings in V Zones Rated with an EC *continued*

CHARACTERISTIC	DESCRIPTION	
1981 Post-FIRM elevated buildings *continued*	If there is an enclosure, it must meet all the following conditions to use the Free of Obstruction rate table (no elevator or machinery or equipment below the BFE): • Enclosure has insect screening with no additional support. • Enclosure has wooden or plastic lattice with at least 40% of its area open and made with material no more than ½ inch thick. • Enclosure has wooden or plastic slats or shutters with at least 40% of their area open made with material no more than 1 inch thick. • Enclosure has one solid breakaway wall or a garage door with the remaining walls of the enclosure constructed with screening, lattice, slats, or shutters. Use the With Obstruction rate if none of the above conditions exists.	• The enclosure is not finished. • There is no machinery and equipment that provides utility services to the building below the BFE. • There is no elevator below the BFE. • The enclosure has breakaway walls (see Walls above). • The enclosure is less than 300 square feet. If the building does not meet any of the conditions above, then the bottom of the enclosure slab is the lowest floor elevation and most likely will require following the Submit-for-Rate procedure.
Post-'81 V-Zone Optional Rating	This optional rating is available for new and renewal policies and endorsements with effective dates on or after October 1, 1997. All policies for Pre-FIRM buildings and 1975 through 1981 Post-FIRM buildings in Zones VE and V1–V30 are allowed to be rated using the Post-'81 V-Zone rate tables (Table 3E or 3F in Appendix J) if the rates are more favorable to the insured. To qualify, the following criteria must be met: • The policy must be rated using the BFE printed on the FIRM panel that includes wave height. • The building rates are determined based on the ratio of the estimated building replacement cost and the amount of insurance purchased. • The building must be elevated free of obstruction or with obstruction (a breakaway wall enclosure of less than 300 square feet). All machinery and equipment located below the BFE are considered obstructions, resulting in a Submit-for-Rate risk.	

c. Hanging Floors and Mid-level Entries (A Zones and V Zones)

Hanging floors and mid-level entries are walled-in floor areas beneath an elevated building that do not extend to the ground. For rating purposes:

- In A zones, the top of the hanging floor or mid-level entry is the lowest floor for rating.
- For V zones, the bottom of the hanging floor or mid-level entry's lowest horizontal structural member is the lowest floor for rating.

Refer to the *NFIP Specific Rating Guidelines* for more information at https://www.fema.gov/media-library/assets/documents/34620.

NOTE

Floodplain management guidance may refer to hanging floors and mid-level entries as "above-grade enclosures."

E. Determine Elevation Difference

Refer to the Lowest Floor Guide in Appendix C of this manual to determine the lowest floor of the building for rating purposes. The elevation difference is the difference between the building's lowest floor used for rating and the Base Flood Elevation (BFE), Base Flood Depth, or grade elevation, depending on the flood zone. The Elevation Difference, always measured in feet, indicates the use of a full-risk premium rate for buildings in SFHAs. For policies rated with Pre-FIRM subsidized rates or outside the SFHA, the NFIP does not require the elevation difference to identify a rate.

The calculation of the elevation difference varies by zone.

1. Guidelines for Elevation Datum Conversion

When determining the elevation difference, verify that all elevation data use the datum reflected on the most current map. The insurer must use elevations in the same datum to calculate the elevation difference.

Elevations are typically provided using either National Geodetic Vertical Datum (NGVD) of 1929 or North American Vertical Datum (NAVD) of 1988.

Unless specifically noted on the EC, assume that line items C2.a-h are in the same datum as the BFE in box B9.

If the datum requires conversion, you may use the tool developed by the National Geodetic Survey (NGS) to convert the LFE and BFE to the current datum. The tool is located on the NGS website at http://www.ngs.noaa.gov/cgi-bin/VERTCON/vert_con.prl.

- Enter the north latitude and west longitude of the structure;
- Enter "ft." in the orthometric height field.
- The tool will then provide the conversion factor for calculations.

Conversion Examples:

- A property with a latitude of 35° 15' and a longitude of 121° 22' 30" from NGVD 29 to NAVD 88
- Enter the latitude and longitude in the "degrees, minutes, seconds" format, replacing the symbols with a space.
- Enter the elevation requiring conversion to NAVD 88. If the elevation is in feet (most places other than Puerto Rico), make sure to enter the "ft." after the elevation.
  - Enter a building elevation (for this example, 54.2 ft.).
  - Select Vertical Datum NGVD 29.
- Click on Submit
  - The VERTCON result will display a conversion factor of 2.726 feet and a building elevation of 56.926 feet NAVD 88. Shown in tenths of a foot, the building elevation is 56.9 feet NAVD 88.

NOTE

NGVD: National standard reference datum for elevations, formerly referred to as Mean Sea Level (MSL) of 1929.

NAVD: The vertical control datum established for vertical control surveying in the United States of America based upon the General Adjustment of the North American Datum of 1988. It replaces the National Geodetic Vertical Datum (NGVD) of 1929.

2. Truncation for Elevation

If any elevations (Base Flood Elevation, Lowest Floor Elevation, etc.) are shown in hundredths or greater (ex. 10.572), apply the truncating rule to the elevation (i.e., drop all measurements beyond tenths of a foot).

- If the Lowest Floor Elevation is 10.572
  Truncate the elevation to 10.5
- If the Base Flood Elevation is 8.45
  Truncate the elevation to 8.4

3. Elevation Difference Rounding Rule

If the BFE or the Lowest Floor Elevation is shown in tenths (ex. 10.5), apply the rounding rule to the Elevation Difference.

- If the difference is negative, round up from .5
  9.5 – 12 = –2.5 (round to –2)
- If the difference is positive, round up from .5
  12.4 – 8.8 = 3.6 (round up to 4)

a. Zones A1–A30, AE, AH, AR, AR Dual Zones, A (with BFE), V1–V30, VE, and V

For A zones, the lowest floor elevation for rating purposes is the top of the lowest floor. For V zones, the lowest floor elevation for rating purposes is the lowest horizontal structural member.

Lowest Floor Elevation – BFE = Elevation Difference

Examples:

- 10 – 6 = 4
- 8.3 – 6 = 2.3 (round to 2)

Note: For zone AH, if the Elevation Difference is greater than or equal to 0, use With Certification of Compliance rates.

b. Zones AO

For AO zones, the difference between the building's lowest floor elevation and the highest adjacent grade is the lowest floor elevation used for rating.

If the lowest floor elevation is equal to or greater than the Base Flood Depth (BFD), use With Certification of Compliance rate. Otherwise, use Without Certification of Compliance rate.

If the BFD does not appear on the FIRM, use a BFD of 2 for rating purposes.

(Lowest Floor Elevation – Highest Adjacent Grade) – BFD = Elevation Difference

Example:

- Lowest Floor Elevation is 10.9
- Highest Adjacent Grade is 8.0
- Base Flood Depth is 3.0
  - 10.9 – 8.0 = 2.9 = Elevation Difference
  - 2.9 – 3.0 = 0 (Use With Certification of Compliance rates)

c. Zone A (No estimated BFE)

In Zone A where there is no established BFE, the difference between the top of the bottom floor and the highest adjacent grade is the lowest floor elevation used for rating.

Lowest Floor Elevation – Highest Adjacent Grade (HAG) = Elevation Difference

Examples:

- 10 – 6 = 4
- 8.3 – 6 = 2.3 (rounded to 2)
- 12.4 – 8.8 = 3.6 (rounded to 4)
- 9.5 – 12 = –2.5 (rounded to –2)

d. Zone A (Estimated BFE)

In Zone A with an estimated BFE, the difference between the top of the bottom floor and the estimated BFE is the elevation difference.

Lowest Floor Elevation – Estimated BFE = Elevation Difference

Examples:

- 10 – 6 = 4
- 8.3 – 6 = 2.3 (round to 2)

4. FIRMs with Wave Heights

When calculating elevation differences, agents must determine if the BFEs on the FIRM include wave heights. Wave height applies to buildings located in Zones V1–V30 and VE. To determine the rate using an Elevation Certificate (EC), the BFE must include the wave height. Refer to **Table 14** for the conversion requirement.

Table 14. FIRMS with Wave Height Conversion

FIRM DATE	WAVE HEIGHT CONVERSION
Before January 1, 1981	Convert the BFE to reflect wave height.
January 1, 1981 and after	FIRMs may include the wave height. When the wave height is included in the BFE, the following statement appears on the map legend: "Coastal base flood elevations shown on this map include the effects of wave action."

a. Wave Height Adjustment Procedure

A registered professional engineer, architect, or surveyor must complete and sign the EC used to calculate the wave height adjustment. The procedure requires the following information:

- A completed Elevation Certificate.
- BFE from the Elevation Certificate (Item B9) or from the FIRM.
- Lowest Adjacent Grade from Item C2.f of the Elevation Certificate completed by a registered professional engineer, architect, or surveyor.
- Depth of Still Water Flooding (subtract the Lowest Adjacent Grade from the BFE).

  The additional elevation due to wave crest in V-Zone areas will normally vary from a minimum of 2.1 feet to 0.55 times the still water depth at the site. (BFE including wave height adjustment = still water BFE + 0.55 × [still water BFE – lowest adjacent grade elevation].)

b. Wave Height Adjustment Examples

A building's site is located in Zone V8 with a BFE of 14' NGVD on the appropriate FIRM. Using the information from the EC, calculate the BFE as noted in **Table 15**.

Table 15. Examples of Wave Height Adjustments Calculations

	EXAMPLE 1	EXAMPLE 2
Base Flood Elevation	14	14
Subtract Lowest Adjacent Grade	–6	–1
Still Water BFE	8	3
Factor	x 0.55	x 0.55
Wave Height Adjustment	4.4	1.65 (2.1)*
Add Base Flood Elevation	14	14
Base Flood Elevation adjusted	18.4	16.1

5. Buildings Eligible for Floodproofing Credit

Not all buildings are eligible for the floodproofing credit. The Floodproofing section provides a detailed description of floodproofing and the completion of the Floodproofing Certificate.

- Section I on the Floodproofing Certificate provides the Base Flood Elevation or Base Flood Depth.
- Section II on the Floodproofing Certificate provides the building floodproofed elevation information.
- Calculate the Elevation Difference by subtracting the Base Flood Elevation from the Building Floodproofed Elevation and then subtract one foot.
- To be eligible for floodproofing credit, a registered professional engineer or architect must certify that the building is floodproofed to at least one foot above the BFE.

Table 16. Examples of Calculating Floodproofing Credit Eligibility

	EXAMPLE 1	EXAMPLE 2	EXAMPLE 3
Building Floodproofed Elevation	14	13	12
Subtract Base Flood Elevation	12	12	12
Difference	2	1	0
Subtract 1 foot	1	1	1
Elevation Difference	1	0	–1
Eligible for Floodproofing Credit	Yes	Yes	No

F. Contents Location

1. Single-Family Dwellings

For rating purposes, contents in a single-family dwelling are considered to be located throughout the entire building regardless of the building type, with limited coverage in a basement and an enclosed area beneath the lowest elevated floor. Refer to the SFIP for additional details.

2. Multi-Family and Non-Residential Buildings

The shaded areas in the illustrations in **Tables 17 and 18** identify the location of the contents when completing the application. The rates for contents located in the area indicated will be established based on the zone, construction date, and building description.

Table 17. Contents Location in Non-Elevated Buildings

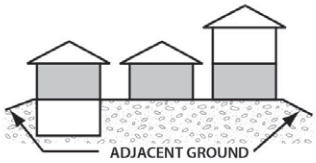
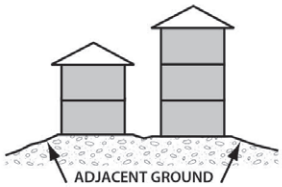
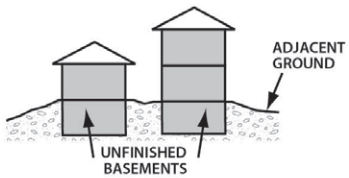
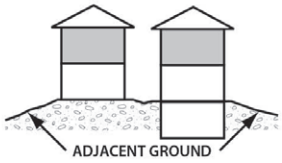
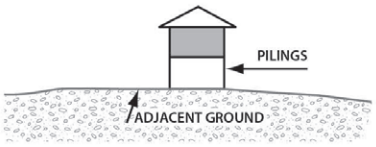
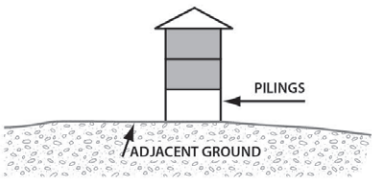
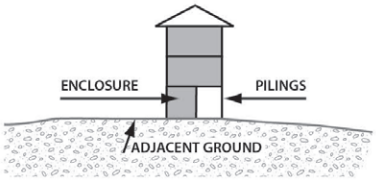
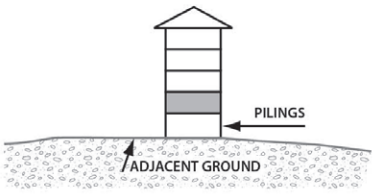
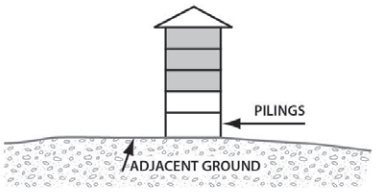
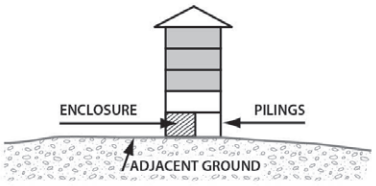
CONTENTS IN SHADED AREAS	ON APPLICATION FORM		
	BUILDING TYPE (INCLUDING BASEMENT, IF ANY)	BASEMENT	CONTENTS LOCATION
	1 Floor or 2 Floors	None or Finished or Unfinished	Lowest Floor Only Above Ground Level
	2 Floors or 3 or More Floors	Finished	Basement Only
		LIMITED COVERAGE IN BASEMENT	
	2 Floors or 3 or More Floors	None	Lowest Floor Above Ground Level and Higher Floors
	2 Floors or 3 or More Floors	Finished	Basement and Above
		LIMITED COVERAGE IN BASEMENT	
	2 Floors or 3 or More Floors	Unfinished	Basement and Above
		LIMITED COVERAGE IN BASEMENT	
	3 or More Floors	Finished or Unfinished	Lowest Floor Above Ground Level and Higher Floors
	2 Floors or 3 or More Floors	None or Finished or Unfinished	Above Ground Level More Than 1 Full Floor

Table 18. Contents Location in Elevated Buildings

CONTENTS IN SHADED AREAS	ON APPLICATION FORM		
	BUILDING TYPE (INCLUDING ENCLOSURE, IF ANY)	ENCLOSURE	CONTENTS LOCATION
 Elevated building free of obstruction	1 floor	None	Lowest Floor Only Above Ground Level
 Elevated building free of obstruction	2 floors	None	Lowest Floor Above Ground Level And Higher Floor
 Elevated building with enclosure below lowest elevated floor	3 or more floors	Unfinished	Basement/ Enclosure and Above
		MAY HAVE LIMITED COVERAGE IN ENCLOSED AREA	
 Elevated building, multiple occupancy, no enclosure	3 or more floors	None	Lowest Floor Only Above Ground Level
 Elevated building, multiple occupancy, no enclosure	3 or more floors	None	Above Ground Level More Than 1 Full Floor
 Elevated building, multiple occupancy, with enclosure	3 or more floors	Unfinished	Above Ground Level More Than 1 Full Floor

G. Calculate the Premium

The NFIP only accepts premium in whole dollars. If the discount for an optional deductible does not result in a whole-dollar premium, round up if 50 cents or more; round down if less. Always submit the total amount due.

1. Replacement Cost Ratio for V-zone Rating

The replacement cost ratio is needed to select the proper rate for insurance on buildings in V, V1–V30, and VE zones. The estimated building replacement cost is used in conjunction with the amount of the building insurance desired to determine the insurance-to-replacement-cost ratio.

Replacement cost is defined as the amount of money required to replace or repair the insured building in the event of loss or damage, without a deduction for depreciation. The replacement cost ratio is determined by dividing the amount of building coverage purchased by the replacement cost of the building.

If the replacement cost of the building exceeds the maximum statutory building limit, use the replacement cost, not the maximum statutory building limit, in calculating the ratio. For example, if the residential building replacement cost is $1,000,000 and the amount of building coverage requested is the maximum statutory building limit of $250,000, the ratio is .25; use the rate listed for "Replacement Cost Ratio Under .50."

2. Standard-Rated Policy

For standard-rated policies excluding RCBAPs, calculate the premium by applying a rate per hundred to the amount of coverage requested. Most policies have basic and additional coverage limits with separate rates applied. All rate tables, deductible factors, fees, and surcharges are located in Appendix J. Follow the steps in **Table 19** to determine the total amount due. **Note:** See the Condominium section for premium calculation information for an RCBAP.

Table 19. Calculate Premium for a Standard-Rated Policy

STEP	ACTION	REFERENCE/GUIDANCE
1	**Identify the rate**	Rate tables.
2	**Apply the deductible factor**	Deductible Factors table for deductible amounts and factors.
3	**Apply Severe Repetitive Loss (SRL) premium (if appropriate)**	See Rate Table 7D. Severe Repetitive Loss Premium in Appendix J for applicable percentage.
4	**Add Increased Cost of Compliance (ICC) premium**	ICC Premium table for ICC premium amount. Do not apply ICC premium to contents-only policies or to policies for individual condominium units in a multi-unit building.
5	**Apply Community Rating System (CRS) discount**	CRS Eligible Communities table for participating communities and CRS discounts. Buildings built in compliance and Pre-FIRM buildings in these communities receive the CRS discount.

Table 19. Calculate Premium for a Standard-Rated Policy *continued*

STEP	ACTION	REFERENCE/GUIDANCE
6	**Apply Reserve Fund Assessment**	See the Reserve Fund Assessment table for applicable percentage.
7	**Add Probation Surcharge**	Community Master File or insurer to determine if community is on probation Add a $50 Probation Surcharge if community is on NFIP probation.
8	**Add HFIAA Surcharge**	Policies covering single-family primary residences, individual residential condominium units, or contents-only for apartments used as a primary residence by the named insured, have a $25 HFIAA Surcharge. All other policies have a $250 HFIAA Surcharge.
9	**Add Federal Policy Fee**	Federal Policy Fee Table. The Federal Policy Fee for tenant's contents-only policy is $25; for all other policies the Federal Policy Fee is $50.

H. Tenant's Coverage

Information is provided below regarding coverage for tenants.

1. Contents Coverage

Tenants may purchase contents coverage that includes coverage for building improvements and betterments. Coverage for contents solely owned by the tenant must be on a separate policy in the name of the tenant only.

The maximum amount payable for improvements and betterments in a building occupied by the insured tenant is 10 percent of the contents coverage amount shown on the declarations page. Improvements and betterments:

- Include fixtures, alterations, installations, and additions that become part of the tenant- occupied building acquired or made solely at the tenant's expense; *and*
- Are not an additional amount of insurance over the amount of contents coverage shown on the declarations page.

2. Building Coverage

Tenants may purchase building coverage if required by the lease agreement, and the policy must include the building owner as a named insured. However, tenants may not purchase building coverage if the owner or another party has purchased NFIP coverage on the same building. Residential condominium buildings are an exception to this condition.

I. Special Rating Situations

1. Alternative Rates

Alternative rating is a rating method available only in communities without V Zones on their FIRM. The NFIP will assume the building is located in a Special Flood Hazard Area.

Insurers may only use the alternative rating procedure in the following two instances:

- A building is Pre-FIRM and the FIRM zone is unknown. The FIRM zone should be shown as Zone AA representing the rating method.
- Renewal of policies in communities that convert from the Emergency Program to the Regular Program during a policy's term. The NFIP assigns an AS Zone designation.

Use Pre-FIRM A Zone rates to determine the premium.

Once the FIRM zone is known, the agent or insured must submit a change endorsement correcting the zone and any additional premium necessary. Alternative rates are available for one policy term. Insurers cannot issue a Renewal Premium Notice with alternative rates.

2. Special Rates

Certain risks may be eligible for FEMA Special Rates consideration. Special Rates consideration requires the agent or insurer to submit additional information to FEMA that may result in a reduction to the rate based on specific characteristics that are not common to similarly classified buildings. Until FEMA reviews the Special Rate application and provides rates, the rates published in this manual or the *NFIP Specific Rating Guidelines* (SRG) manual apply.

Risks eligible for consideration include the following:

- Subgrade crawlspace when the distance between the subgrade crawlspace floor and the top of the next higher floor is greater than 5 feet or the top of the bottom floor elevation is more than 2 feet below the lowest adjacent grade;
- High-rise residential condominium buildings with basements, eligible under the Residential Condominium Building Association Policy, where the lowest floor elevation is below the BFE, unfinished, and used for building access, parking, or storage only;
- Pre-FIRM buildings with partial enclosures below the BFE (where a partial enclosure does not enclose the entire area under the elevated floor, is unfinished and used solely for parking, storage, and building access); *or*
- Non-elevated 2–4 family dwellings with an attached garage, where the floor level of the garage is below the level of the building.

To request FEMA Special Rates, the insurer must submit all appropriate documentation listed in the SRG manual to the NFIP Bureau through the Submit-for-Rate link in UCORT at www.nfip.fema.gov/Default/Login.

3. Tentative Rates

Insurers can issue policies using tentative rates (Appendix J: Rate Tables) when agents fail to provide the required full-risk rating information. Tentative rates are generally higher than other published rates. The insurer should issue the policy, based on tentative rates, with the coverage limits that the premium received can purchase, if the premium payment received is not sufficient to purchase the coverage limits requested.

The insurer will forward a declarations page and a Tentative Rate Letter to the insured and agent requesting the information necessary to determine the proper rate. Insurers may not endorse tentatively-rated policies to increase coverage limits, or renew for another policy term, until the insurer receives the required actuarial rating information and full premium payment.

A tentatively-rated policy loss payment cannot exceed the lower coverage amount that the initially submitted premium purchased (using the correct full-risk rating information), or the amount requested by application.

II. Preferred Risk Policy

A. General Information

The Preferred Risk Policy (PRP) offers fixed policy combination limits for building/contents or contents-only coverage. The PRP is available for properties located in Zones B, C, X, AR, or A99 in a Regular Program NFIP community that meet certain loss history requirements.

1. Maximum Coverage Limits

Table 20. Maximum Coverage Limits by Occupancy Type

COVERAGE TYPE	1–4 FAMILY	OTHER RESIDENTIAL	NON-RESIDENTIAL BUSINESS, OTHER NON-RESIDENTIAL
Combined Building/ Contents	$250,000/$100,000	$500,000/$100,000	$500,000/$500,000
Contents Only	$100,000	$100,000	$500,000

2. Deductibles

The deductible for a PRP is $1,000 each for both building and contents coverage if the building coverage is less than or equal to $100,000; if the building coverage is over $100,000, the deductible is $1,250, regardless of the insured building's construction date compared to the initial Flood Insurance Rate Map (FIRM) date. A contents-only policy will have a $1,000 deductible.

3. Incomplete Preferred Risk Policy Applications

The insurer must not issue a PRP when:

- The PRP application is incomplete;
- The information submitted is incomplete or inconsistent; *or*
- There is no premium submitted with the application.

The insurer must issue the policy for coverage equal to the premium payment received even where there is a different (higher) requested amount of coverage.

B. Determining Eligibility

These factors determine PRP purchase eligibility.

- Flood Zone;
- Loss History; *and*
- Community Status.

1. Flood Zone

Buildings must be located within a B, C, X, A99, or AR flood zone on the current effective FIRM to be eligible for a PRP.

New business applications must include one of the following to document the flood zone:

- A Standard Flood Zone Determination that guarantees the accuracy of community and zone information.
- Copy of current effective flood map at time of application marked to show the building's exact location and flood zone. The insurer may require additional documentation if the building is close to the flood zone boundary line.
- Letter signed by a local community official specifying the property address and building's flood zone.
- Elevation Certificate signed and dated by a surveyor, an engineer, an architect, or a local community official specifying the exact location and flood zone of the building.
- A Letter of Map Amendment (LOMA).
- A Letter of Map Revision (LOMR).
- A Letter of Determination Review (LODR).

2. Loss History

A building may be ineligible for the PRP based on the building's flood loss history. Refer to **Table 21** for conditions.

Table 21. Conditions for Ineligibility for the Preferred Risk Policy

BUILDING S FLOOD LOSS HISTORY	CONDITIONS
Buildings for which: • **Flood-related federal disaster benefits have been provided; *and/or*** • **Flood insurance claim payments have been made within any 10-year period, without regard to ownership of the building;** **are *ineligible* for the Preferred Risk Policy if any of the conditions to the right exist.**	• Multiple flood insurance claim payments: – Two separate payments exceeding $1,000 for separate losses. – Three (or more) payments for separate losses, regardless of amount. • Multiple Federal flood disaster relief payments (including loans and grants): – Two separate payments exceeding $1,000 for separate occurrences. – Three separate payments for separate occurrences, regardless of amount, • One flood insurance claim payment and one Federal flood disaster relief payment (including loans and grants), each for separate losses and each more than $1,000.

Notes:

- Count multiple losses at the same location within ten days of each other as one loss and add the payment amounts together.
- Only count Federal flood disaster relief payments (including loans and grants) if the building sustained flood damage.

C. Types of Buildings Ineligible for the PRP

The following buildings are not eligible for a PRP:

- Buildings or contents located in Emergency Program communities;
- Buildings or contents located in SFHAs except Zones AR and A99;
- Multi-unit residential condominium buildings eligible under the Residential Condominium Building Association Policy; *or*
- Any building located on leased Federal property where the Administrator determines the building's location to be on the river-facing side of any dike, levee, or other riverine flood-control structure, or seaward of any seawall or other coastal flood-control structure.

D. Renewal

The insured property coverage renewing under the PRP must meet all of the PRP eligibility requirements.

The insurer may not renew a PRP during a policy term when the property no longer meets the loss history requirement. The insurer must rewrite the policy as a standard-rated policy. Refer to the How to Cancel section for information regarding the cancellation or rewriting of a PRP to a standard-rated policy.

A PRP may not renew during a policy term where the property becomes ineligible due to a map revision. The policy may renew using the Newly Mapped rating procedure if the property meets all eligibility criteria.

Note: The policy may be endorsed to increase coverage midterm or to correct misratings, such as an incorrect building description or community number.

E. Policy Conversions

1. Standard-Rated Policy to PRP Due To Misrating

To convert a standard-rated policy to a PRP when a building is located in a B, C, X, AR, or A99 zone on the current FIRM and qualifies for a PRP:

- The request to endorse, cancel, or rewrite must be for a policy that is in effect.
- The amount of coverage issued under the PRP is the combination of coverage limits equal to the standard-rated policy limits for building or contents, or the next higher limit where there is no PRP combination of equivalent coverage limit.
- There can be no pending or paid claim during the standard-rated policy's term when endorsing, canceling, or rewriting a policy as a PRP.
- The insurer may refund the difference in premium from the standard-rated to PRP for up to 5 years. **Note:** Zones AR and A99 became eligible for the PRP effective October 1, 2016.
- Refer to the How to Cancel section of this manual for the appropriate Cancellation/Rewrite reason code.

NOTE

If the standard-rated policy is a contents-only policy and the insured requests building coverage under the PRP, add building coverage by endorsement.
The 30-day waiting period applies to the endorsement.

2. Standard-Rated Policy to PRP due to a Map Revision, LOMA, or LOMR

To convert a standard-rated policy to a PRP as a result of a map revision, LOMA, or LOMR:

- The insurer must receive a request to endorse, cancel, or rewrite the standard-rated policy to a PRP during the active policy term.
- The insurer may endorse, cancel, or rewrite a standard-rated policy as a PRP for up to five policy years.
- There is no paid or pending claim on canceled policy term(s).
- The property meets all other PRP requirements.

The effective date of the request to endorse, cancel or rewrite is the beginning of the policy term in which the map revision, LOMA, or LOMR occurred.

Refer to the How to Cancel section of this manual for the appropriate Cancellation/Rewrite reason code.

3. PRP to Standard-Rated Policy

A PRP must convert to a standard-rated policy on the effective date of the renewal if the property no longer qualifies for PRP rating.

a. Underwriting Information

- The insurer must obtain all of the necessary underwriting information from the agent to issue a standard-rated policy.
- The insured/agent will submit additional information needed to rate the policy within 60 days of the insurer's notification.
- The insurer must send a bill to the payor for the standard-rated policy premium due once the insurer has the information necessary to compute the premium.
- Any addition or increase in coverage from the canceled PRP to the rewritten standard-rated policy requires a 30-day waiting period.

b. Premium Due

- The payor has 30 days from the date the insurer sends the bill to pay the additional premium due.
- The premium due is calculated using the same coverage amounts as shown on the PRP from the beginning of the policy term.
- The insured has the option to reduce or delete coverage to reduce the additional premium due amount.

F. Coverage Limitations

The following limitations apply to policies issued under a PRP:

- Basement coverage limitations as described in Appendix A: Policy.
- Individual condominium units located in non-residential condominium buildings are not eligible for building coverage.
- Condominium units insured under the Dwelling or General Property form are ineligible for Increased Cost of Compliance (ICC) coverage.

NOTE

Elevated building coverage limitations do not apply to a policy issued under the PRP.

G. Condominium PRP Eligibility

1. Residential Single-Unit Building or Townhouse/Rowhouse Type Building With a Separate Entrance for Each Unit

Table 22. Single Family Residential Building

Purchaser of Policy	Building Occupancy[1]	Condo Unit Indicator[1]	PRP Eligibility	Rate Table	Policy/Form
Unit Owner	Single family	Yes	Yes	1–4 Family residential	Dwelling
Association (Association Owned Single Unit)	Single family	Yes	Yes	1–4 Family residential	Dwelling
Association (Entire Building)	N/A	N/A	No	N/A	N/A

Table 23. Multi-Unit Residential Building — 2 to 4 Units per Building

Purchaser of Policy	Building Occupancy[1]	Condo Unit Indicator[1]	PRP Eligibility	Rate Table	Policy/Form
Unit Owner	2–4	Yes	Yes	1–4 Family residential	Dwelling
Association (Association Owned Single Unit)	2–4	Yes	Yes	1–4 Family residential	Dwelling
Association (Entire Building)	N/A	N/A	No	N/A	N/A
Owner of Non-Residential Contents	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non-residential contents-only	General Property

Table 24. Multi-Unit Residential Building — 5 or More Units Per Building

Purchaser of Policy	Building Occupancy[1]	Condo Unit Indicator[1]	PRP Eligibility	Rate Table	Policy Form
Unit Owner	Other residential	Yes	Yes	Other residential	Dwelling
Association (Association Owned Single Unit)	Other residential	Yes	Yes	Other residential	Dwelling
Association (Entire Building)	N/A	N/A	No	N/A	N/A
Owner of Non-Residential Contents	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non-residential contents-only	General Property

1. When there is a mix of residential and non-residential usage within a single building, refer to the Before You Start section of this manual

Table 25. Non-Residential Business, Other Non-Residential Building

Purchaser of Policy	Building Occupancy[1]	Condo Unit Indicator[1]	PRP Eligibility	Rate Table	Policy Form
Owner of Non-Residential Contents	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non-residential contents-only	General Property
Owner of Residential Contents	Single family	Yes (Building coverage not available)	Yes	Residential contents-only	Dwelling
Association (Entire Building)	Non-residential business, Other Non-residential	N/A	Yes	Non-residential business, Other Non-residential building and contents	General Property

1. When there is a mix of residential and non-residential usage within a single building, refer to the Before You Start section of this manual

2. Preferred Risk Policy (PRP) Premium Calculation

Follow the steps outlined in **Table 26** to calculate the premium for PRPs. The total amount due equals the total premium plus applicable fees and surcharges.

Table 26. Calculate Premium for a PRP

STEP	ACTION	REFERENCE
1	Identify the base premium	PRP premium table corresponding to the building occupancy type and description.
2	Apply multiplier	Apply a multiplier of 1.00 for PRPs.

Table 26. Calculate Premium for a PRP *continued*

STEP	ACTION	REFERENCE
3	Add Increased Cost of Compliance (ICC) premium	Residential Building Coverage: • $1 to $230,000: $8.00 • $230,001 to $500,000: $6.00 Non-Residential Business and Other Non-Residential Building Coverage: • $1 to $480,000: $8.00 • $480,001 to $500,000: $6.00 Do not apply ICC premium to contents-only policies or to policies for individual condominium units in a multi-unit building.
4	Apply Reserve Fund Assessment	See the Reserve Fund Assessment table for applicable percentage.
5	Add Probation Surcharge	Community Master File or insurer to determine if community is on probation. Add a $50 Probation Surcharge if community is on NFIP probation.
6	Add HFIAA Surcharge	Policies covering single-family primary residences, individual residential condominium units, or contents-only for apartments used as a primary residence by the named insured, have a $25 HFIAA Surcharge. All other policies have a $250 HFIAA Surcharge.
7	Add Federal Policy Fee	For PRP and contents-only: Add the $25 Federal Policy Fee to the Total Premium.

III. Newly Mapped

A. General Information

The Newly Mapped procedure offers fixed combinations of building and contents coverage limits for properties previously located in Zones B, C, or X that have been newly mapped into a Special Flood Hazard Area (SFHA) and meet certain loss history requirements. This procedure also applies to properties in Zones D, AR or A99 that have been newly mapped into a different SFHA zone and meet certain loss history requirements. The Newly Mapped procedure does not apply to properties mapped into the SFHA on the initial Flood Insurance Rate Map (FIRM).

1. Maximum Coverage Limits

Table 27. Maximum Coverage Limits by Occupancy Type

Coverage Type	1–4 Family	Other Residential	Non-Residential Business, Other Non-Residential
Combined Building/ Contents	$250,000/$100,000	$500,000/$100,000	$500,000/$500,000
Contents Only	$100,000	$100,000	$500,000

2. Deductibles

Separate but equivalent deductibles apply to both the building and contents coverage. If the building coverage amount exceeds $100,000, the deductible is $1,250. Otherwise, the deductible is $1,000.

3. Incomplete Newly Mapped Rated Policy Applications

The insurer may not issue a Newly Mapped rated policy when:

- The Newly Mapped rated policy application is incomplete.
- The information submitted is incomplete or inconsistent.
- There is no premium submitted with the application.

The insurer must issue the policy for coverage equal to the premium payment received even where there is a different (higher) requested amount of coverage.

B. Determining Eligibility

These factors determine eligibility to follow the Newly Mapped procedure.

- Flood Zone;
- Loss History; *and*
- FIRM Revision Date versus Policy Effective Date.

1. Flood Zone

Buildings must be located in a B, C, or X flood zone on the previous flood map and newly mapped into the SFHA, or in Zones D, A99 or AR newly mapped into a different SFHA zone to be eligible for the Newly Mapped procedure. A building located in a D, AR, or A99 zone insured under the PRP and then later remapped to an SFHA (excluding D, AR and A99) is eligible to use the Newly Mapped procedure. New business applications must include documentation validating the current and previous flood zone. To determine the current flood zone, use the FIRM in effect at the time of application and presentment of premium.

New business applications must include one or more of the following to document the previous and current flood zones:

- A standard flood zone determination certification that guarantees the accuracy of the community and zone information.
- Copy of the most recent effective flood map marked to show the exact location and flood zone of the building. The NFIP may require additional documentation if the building is close to the zone boundary.
- Letter signed by a local community official indicating the property address and flood zone of the building.
- Elevation Certificate signed and dated by a surveyor, an engineer, an architect, or a local community official indicating the exact location and flood zone of the building.
- Letter of Map Amendment (LOMA).
- Letter of Map Revision (LOMR).
- Letter of Determination Review (LODR).

2. Loss History

If any of the conditions in the following table exist, the property is ineligible for the Newly Mapped rating procedure.

Table 28. Loss History Ineligibility for the Newly Mapped Procedure

BUILDING'S FLOOD LOSS HISTORY	CONDITIONS
Buildings for which: • **Flood-related federal disaster benefits have been provided; *and/or*** • **Flood insurance claim payments have been made within any 10-year period, without regard to ownership of the building** **are *ineligible* for the Newly Mapped procedure if any of the conditions to the right exist.**	• Multiple flood insurance claim payments: – Two separate payments exceeding $1,000 for separate losses – Three (or more) payments for separate losses, regardless of amount • Multiple Federal flood disaster relief payments (including loans and grants): – Two separate payments exceeding $1,000 for separate occurrences – Three separate payments for separate occurrences, regardless of amount • One flood insurance claim payment and one Federal flood disaster relief payment (including loans and grants), each for separate losses and each more than $1,000.

Notes:

- Count multiple losses at the same location within ten days of each other as one loss and add the payment amounts together.
- Only count Federal flood disaster relief payments (including loans and grants) if the building sustained flood damage.

3. FIRM Revision Date versus Policy Effective Date

Properties newly mapped into the SFHA after April 1, 2015, are eligible for the Newly Mapped rating procedure if:

- The policy effective date is within 12 months of the effective FIRM revision date; *or*
- The insured applied for the policy within 45 days of initial lender notification if the notification occurred within 24 months of the effective FIRM revision date. **Note:** The insurer must retain a copy of the lender notification in the underwriting file.

In these cases, use the Newly Mapped multiplier located in Appendix J: Rate Tables based on the map effective date and the policy effective date for the new business transaction.

C. Ineligibility

The following are ineligible for the Newly Mapped rating procedure:

- Properties mapped into the SFHA by the initial FIRM for a community entering the Regular Program.
- Properties whose first policy effective date is more than 12 months after the effective date of the FIRM that revised or changed the zone from a B, C, or X zone to an SFHA zone, or in the case of a D, A99,

or AR zone, to a different SFHA zone unless following the lender notification guidance provided above.

- Buildings and/or contents in Emergency Program communities.
- Multi-unit residential condominium buildings eligible under the RCBAP.
- Any building on leased federal property determined by the Administrator to be located on the river facing side of any dike, levee, or other riverine flood-control structure, or seaward of any seawall or other coastal flood-control structure.
- Lapsed policies, which may not reinstate by means of a new Preferred Risk Policy and Newly Mapped Application under the following conditions:
  - The insured reinstates coverage on a building for an expired or canceled SFIP.
  - One or more of the named insureds on the new policy was either a named insured on the expired or canceled policy or had an ownership interest in the building at the time the policy expired or the insured canceled the policy.
  - The insurer reinstates a policy issued using the Newly Mapped procedure with premium received:
    - More than 90 days after prior policy expiration or cancellation where the named insured has maintained continuous coverage on the property from April 1, 2016, to the prior policy expiration or cancellation date; *or*
    - More than 30 days after the prior policy expiration or cancellation date, where the named insured has not maintained continuous coverage on the property from April 1, 2016, to the prior policy expiration or cancellation date; *and*
- The policy expiration or cancellation was for a reason other than:
  - The insured was no longer legally required to obtain and maintain flood insurance; *or*
  - The insured property was in a community suspended from the NFIP and the insurer issued the policy within 180 days of the community's reinstatement in the NFIP.

D. Renewal

The property must continue to meet the eligibility requirements at each renewal to maintain a policy rated under the Newly Mapped procedure.

A policy issued using the Newly Mapped procedure may not renew under the Newly Mapped procedure if during a policy term the property no longer meets the loss history requirement. The policy must renew as a standard-rated policy.

The insurer should not renew the policy issued using the Newly Mapped procedure and should rewrite the policy to a PRP if during a policy term the property is mapped from an SFHA to a B, C, X, D, A99, or AR flood zone.

1. Renewal Payment

See **Table 29** for renewal payment requirements.

Table 29. Renewal Payments

Premium Receipt Date	Eligible for Newly Mapped Procedure	Apply Waiting Period
Within 30 days of the expiration date	Yes	No
Greater than 30 days but less than 90 days following the expiration date	• Yes, for the first occurrence. • No, for a subsequent occurrence.	Yes, the standard 30-day waiting period applies.
90 or more days following the expiration date	No	N/A

2. Transition to Full-Risk Rates

The rates for a policy using the Newly Mapped procedure will incrementally increase and may eventually be higher than a standard-rated policy (full-risk) at the point of each renewal. To evaluate which rate is more favorable (i.e., policy using the Newly Mapped procedure versus standard-rated policy), insureds can provide the insurer with an EC. The insurer uses the EC to determine when it is beneficial to convert a Newly Mapped rated policy to a standard-rated policy. The insurer may use the current map or a grandfathered zone and/or Base Flood Elevation to determine the full-risk rate for a standard-rated policy.

E. Policy Conversions

There are two types of policy conversions involving a Newly Mapped rated policy:

- Conversion of a standard-rated policy to a Newly Mapped rated policy due to misrating.
- Conversion of a Newly Mapped rated policy to a standard-rated policy.

1. Standard-Rated Policy To Newly Mapped Due To Misrating

To convert a standard-rated policy to a Newly Mapped rated policy:

- The insurer must receive the request to endorse or cancel/rewrite the policy during the current policy term.
- The building meets all other Newly Mapped rated requirements.
- To cancel/rewrite, there can be no pending or paid claim on the policy term canceled.
- The insurer may refund premium for up to 5 years from the date of the map revision for a standard-rated policy in a B, C, X, D, AR or A99 zone later determined to be eligible for the Newly Mapped rating procedure. Use the multiplier from the map revision date to determine the amount due.

The coverage limits on the converted Newly Mapped rated policy are:

- Equal to either the building and/or contents limits issued under the standard-rated policy; *or*
- The next higher limit if there is no option equal to the standard-rated policy building and/or contents limit.

Refer to the How to Cancel section of the manual for the appropriate cancellation/rewrite reason code.

NOTE

If the standard-rated policy is a contents-only policy and the insured requests building coverage under the Newly Mapped rating procedure, add building coverage by endorsement.

The 30-day waiting period applies to the endorsement.

2. Newly Mapped Rated Policy to a Standard-rated Policy

A Newly Mapped rated policy must convert to a standard-rated policy if the property no longer meets the eligibility requirements on the effective date of the policy.

a. Underwriting Information

- The insurer must obtain all of the necessary underwriting information from the agent to issue a standard-rated policy.
- The insurer will notify the insured/agent they have 60 days to obtain any missing information and provide it to the insurer.
- The insurer must send a bill to the payor for the standard-rated policy premium due once the insurer has the information necessary to compute the premium.

b. Premium Due

- The payor has 30 days from the date the insurer sends the bill to pay the additional premium due.
- The premium due is calculated using the same coverage amounts as shown on the Newly Mapped rated policy from the beginning of the policy term.
- The insured has the option to reduce or delete coverage to reduce the additional premium due amount.
- Any addition or increase in coverage from the canceled Newly Mapped rated policy to the rewritten standard-rated policy requires a 30-day waiting period.

F. Coverage Limitations

The following limitations apply to policies written using the Newly Mapped rating procedure:

- Basement coverage limitations as described in Appendix A: Policy.
- Individual condominium units located in non-residential condominium buildings are not eligible for building coverage.
- Condominium units insured under the Dwelling or General Property form are ineligible for Increased Cost of Compliance (ICC) coverage.

NOTE

Elevated building coverage limitations do not apply to a policy issued under the Newly Mapped procedure.

G. Condominium Newly Mapped Rating Eligibility

The insurer should use these tables for properties newly mapped into SFHA flood zones, excluding AR and A99 on or after October 1, 2016.

1. Residential Single Unit Building or Townhouse/Rowhouse Type Building – Separate Entrance for Each Unit

Table 30. Single-Family Unit Residential Building

Purchaser of Policy	Building Occupancy	Condo Unit Indicator	Newly Mapped	Rate Table	Policy/Form
Unit Owner	Single family	Yes	Yes	1–4 Family residential	Dwelling
Association (Association Owned Single Unit)	Single family	Yes	Yes	1–4 Family residential	Dwelling
Association (Entire Building)	N/A	N/A	No	N/A	N/A

2. Multi-Unit Residential Building – 2 To 4 Units per Building

Table 31. Multi-Unit Residential Building – 2 to 4 Units per Building

Purchaser of Policy	Building Occupancy	Condo Unit Indicator	Newly Mapped	Rate Table	Policy/Form
Unit Owner	2–4	Yes	Yes	1–4 Family residential	Dwelling
Association (Association Owned Single Unit)	2–4	Yes	Yes	1–4 Family residential	Dwelling
Association (Entire Building)	N/A	N/A	No	N/A	N/A
Owner of Non- Residential Contents	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non-residential contents-only	General Property

3. Multi-Unit Residential Building – 5 or More Units per Building

Table 32. Multi-Unit Residential Building – 5 or More Units per Building

Purchaser of Policy	Building Occupancy	Condo Unit Indicator	Newly Mapped	Rate Table	Policy Form
Unit Owner	Other residential	Yes	Yes	Other residential	Dwelling
Association (Association Owned Single Unit)	Other residential	Yes	Yes	Other residential	Dwelling
Association (Entire Building)	N/A	N/A	No	N/A	N/A
Owner of Non- Residential Contents	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non-residential contents-only	General Property

4. Non-Residential Business, Other Non-Residential Building

Table 33. Non-Residential Business, Other Non-Residential Building

Purchaser of Policy	Building Occupancy	Condo Unit Indicator	Newly Mapped	Rate Table	Policy Form
Owner of Non-Residential Contents	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non-residential contents-only	General Property
Owner of Residential Contents	Single family	Yes (Building coverage not available)	Yes	Residential contents-only	Dwelling
Association (Entire Building)	Non-residential business, Other Non-residential	N/A	Yes	Non-residential business, Other Non-residential building and contents	General Property

1. When there is a mix of residential and non-residential usage within a single building, refer to the Before You Start section of this manual

5. Newly Mapped Rated Premium Calculation

Follow the steps outlined in **Table 34** to calculate the premium for Newly Mapped rated policies. The total amount due equals the total premium plus applicable fees and surcharges.

Table 34. Calculate Premium for a Newly Mapped Rated Policy

STEP	ACTION	REFERENCE
1	Identify the base premium	Newly Mapped premium table corresponding to the building occupancy type and description.
2	Apply multiplier	Refer to the Multiplier tables in Appendix J: Rate Tables. Apply a Multiplier based on the map revision and policy effective date for Newly Mapped rated policies.
3	Add Increased Cost of Compliance (ICC) premium	Residential Building Coverage $1 to $230,000: $8.00 $230,001 to $500,000: $6.00 Non-Residential Business and Other Non-Residential Building Coverage $1 to $480,000: $8.00 $480,001 to $500,000: $6.00 Do not apply ICC premium to contents-only policies or to policies for individual condominium units in a multi-unit building.
4	Apply Reserve Fund Assessment	Refer to the Reserve Fund Assessment table.
5	Add Probation Surcharge	Community Master File or insurer to determine if community is on probation. Add a $50 Probation Surcharge if community is on NFIP probation.

Table 34. Calculate Premium for a Newly Mapped Rated Policy *continued*

STEP	ACTION	REFERENCE
6	Add HFIAA Surcharge	Policies covering single-family primary residences, individual residential condominium units, or contents-only for apartments used as a primary residence by the named insured, have a $25 HFIAA Surcharge. All other policies have a $250 HFIAA Surcharge.
7	Add Federal Policy Fee	Add the $50 Federal Policy Fee to the Total Premium.

IV. Condominiums

A. Insuring Condominiums

There are four ways to insure condominiums, and each method has its own eligibility requirement. The methods below illustrate the differing insurance scenarios:

- Residential Condominium Association Coverage on Building and Contents
  - Use the Residential Condominium Building Association Policy (RCBAP) to insure a residential condominium building and the contents owned by a condominium association.
- Residential Condominium Unit Owners Coverage on Building and Contents
  - Use the Dwelling Form to insure an individual condominium unit and contents. The owner must be the named insured.
- Non-Residential Condominium Coverage on Building and Contents
  - Use the General Property Form to insure a non-residential condominium building and commonly owned contents.
- Non-Residential Condominium Unit Owner Coverage on Contents only
  - Use the Dwelling Form to insure residential condominium unit owner's contents in non-residential condominium buildings.
  - Use the General Property Form to insure non-residential condominium unit owner's contents in non-residential buildings.

B. Residential Condominium – Association Coverage

Use the RCBAP to insure a residential condominium building and contents when owned by a condominium association.

The NFIP defines a condominium association as an entity where membership is a required condition of unit ownership and unit owners are responsible for the maintenance and operation of:

- Common elements owned in undivided shares by unit owners.
- Other real property in which the unit owners have use rights.

Table 35. Residential Condominium Association Coverage Under the RCBAP

POLICY FORM	RESIDENTIAL CONDOMINIUM BUILDING ASSOCIATION POLICY
Maximum Coverage Limits	**Building:** The lesser of the following: • Building's replacement cost; *or* • Total number of units × $250,000. **Contents:** Actual cash value (ACV) of commonly owned contents to a maximum of $100,000 per building.
Eligible Insureds	• Insured must be a residential condominium association. • If the named insured is other than a condominium association, the insurer must have legal documentation confirming the entity is a condominium association. Acceptable examples of condominium association documentation include: – A copy of the condominium association by-laws; *or* – A statement signed by an officer or representative of the condominium association confirming the building is in a condominium form of ownership. • Insured may be a building owner in a Homeowners Association (HOA) having a condominium form of ownership. The HOA by-laws require purchase of flood insurance building coverage for its members.
Ineligible Insureds	• Cooperative ownership buildings. • Non-condominium homeowners associations.
Building Eligibility	• Community must be in Regular Program. • Building must have one or more residential units. • At least 75% of floor area must be residential. • Residential condominium buildings used as a hotel or motel, or rented either short or long-term. • Homeowners Association having a condominium form of ownership. • Timeshare buildings having a condominium form of ownership. **Note:** Residential condominium association buildings in an Emergency Program community are only eligible for coverage under the General Property Form. Maximum limits of $500,000 building and $100,000 contents apply to each building.
Property Insured	• Condominium building. • Individually owned units within the building. • Improvements within unit. • Additions and extensions attached or connected to the insured building. • Fixtures, machinery, and equipment within building. • Contents owned by the association. **Note:** The NFIP requires a separate policy for each building owned by a condominium association. Coverage applies to the single building described in the property location of the Flood Insurance Application and Declarations.
Special Underwriting Requirements	• The insured or agent must provide the Replacement Cost Value (RCV) of the building in the Application, including the cost of the building's foundation. • The insured or agent must provide evidence of the RCV of the building. Insurers may use a recent property valuation report stating the value of the building and its foundation on a RCV basis to meet this requirement. • The insurer must update the RCV information at least every 3 years. See sample letter at the end of this section.

Table 35. Residential Condominium Association Coverage Under the RCBAP *continued*

POLICY FORM	RESIDENTIAL CONDOMINIUM BUILDING ASSOCIATION POLICY	
Other Considerations	• The unit owner may purchase a Dwelling Form policy with building coverage in a condominium building insured under the RCBAP. However, the NFIP will not pay more than $250,000 for combined coverage for a single unit under the Dwelling Form policy and the RCBAP. Insureds may not claim the same damaged items on more than one NFIP policy.	
Replacement Cost Coverage	• Yes, for the building only, subject to policy provisions. • Replacement Cost Value (RCV) is the cost to replace property with the same type of material and construction without deduction for depreciation.	
Deductibles	Condo Table 7 in the Condominium section of Appendix J: Rate Tables shows the available optional deductibles and deductible factors.	
Coinsurance Penalty	• The RCBAP coinsurance penalty applies to building coverage only. To receive full replacement cost, the insured must have purchased insurance in an amount equal to 80% of the full replacement cost of the building at the time of loss or the maximum amount of insurance available for that building under the NFIP, whichever is less. • The coinsurance penalty calculation is: $\frac{\textbf{Insurance Carried}}{\textbf{Insurance Required}} \times \textbf{Amount of Loss} = \textbf{Limit of Recovery}$	
ICC Coverage	• Yes	
Building Becomes Ineligible	• If an insurer discovers that a building is not eligible for the RCBAP, the insurer must void the policy and rewrite it using the correct form. • The provisions of the correct Standard Flood Insurance Policy (SFIP) form apply. • The insurer must reform the coverage limits according to the provisions of the correct SFIP form. • Coverage cannot exceed the limits issued on the incorrectly issued RCBAP. • In the event of a loss, if a building is ineligible for a RCBAP, the insurer must rewrite the policy using the correct form for up to the maximum amount of building coverage allowed for the type of building insured. Coverage may not exceed the coverage purchased under the RCBAP.	
Owner Becomes Ineligible	• If, during a policy term, the risk fails to meet the eligibility requirements due to a change in the form of ownership, it becomes ineligible for coverage under the RCBAP. • The insurer must cancel and rewrite the policy using the correct SFIP form. • The effective date of the cancellation is the date that the form of ownership changed.	
Assessment Coverage	• No	
Federal Policy Fee	**Number of Units**	**Federal Policy Fee**
	1	$50 per policy
	2 – 4	$150 per policy
	5 – 10	$400 per policy
	11 – 20	$800 per policy
	21+	$2,000 per policy

C. Residential Condominium – Unit Owners Coverage

Use the Dwelling form to insure an individual condominium unit and its contents. The owner must be the named insured.

Table 36. Residential Condominium Unit Owners Coverage Under the Dwelling Form

POLICY FORM	DWELLING FORM
Maximum Coverage Limits	**Emergency Program** • Building $35,000 • Contents $10,000 **Regular Program** • Building $250,000 • Contents $100,000
Insured	• Unit owner; • Association in the name of the unit owner and the association as their interests may appear; • Association for an individual unit owned by the association; *or* • Non-residential unit owner for contents-only coverage.
Property Insured	• Building elements. • Individually-owned contents.
Eligibility	• Emergency and Regular Programs
Other Considerations	• NFIP considers a residential condominium unit in a high-rise or low-rise building, including a townhouse or rowhouse, as a single-family residence. • Unit may purchase a Dwelling Form policy with building coverage in a condominium building insured under the RCBAP. However, the NFIP will not pay more than $250,000 for combined coverage for a single unit under the Dwelling Form policy and the RCBAP. Insureds may not claim the same damaged items on more than one NFIP policy. • In the event of a loss, owners may apply up to 10% of the stated contents coverage amount for betterments and improvements. The 10% is not an additional limit of insurance. • When the applicant is the condominium association, the lenders for the individual unit owners should not appear on the declarations page.
Replacement Cost	Yes, subject to policy provisions
ICC Coverage	No
Assessment Coverage	Yes
Federal Policy Fee	$50

D. Non-Residential Condominium — Association Coverage

Use the General Property Form to insure a non-residential condominium building and the commonly owned contents.

Table 37. Non-Residential Condominium Association Coverage

POLICY FORM	GENERAL PROPERTY FORM
Maximum Coverage Limits	**Emergency Program** • Non-residential • Building $100,000 • Contents $100,000 **Regular Program** • Building $500,000 • Contents $500,000
Insured Entity	Non-residential condominium association.
Property Insured	The property insured includes: • Condominium building. • Individually owned units within the building. • Improvements within unit. • Additions and extensions attached or connected to the insured building. • Fixtures, machinery, and equipment within building. • Contents owned by the association. • Non-residential common building elements and the contents. **Note:** The NFIP requires a separate policy for each building owned by a condominium association. Coverage applies to the single building described in the property location of the Flood Insurance Application and the Declarations.
Eligible Condominiums Types	Condominium building in a Regular Program community where less than 75% of its floor area is residential use.
Replacement Cost	No
ICC Coverage	Yes
Assessment Coverage	No
Federal Policy Fee	$50

E. Non-Residential Condominium – Unit Owners Coverage

- Use the Dwelling Form to insure residential condominium unit owner's contents in non-residential condominium buildings. Condominium unit owners in a non-residential condominium may not purchase building coverage.
- Use the General Property Form to insure non-residential condominium unit owner's contents in non-residential buildings.

Table 38. Non-Residential Condominium Unit Owners Coverage

POLICY FORM	GENERAL PROPERTY FORM OR DWELLING FORM
Maximum Coverage Limits	**Emergency Program** • Contents $100,000 **Regular Program** • Contents $500,000
Insured Parties	• Unit owner • Tenant
Definition	The NFIP considers a residential condominium unit in a high-rise or low-rise building, including a townhouse or rowhouse, as a single-family residence.
Property Insured	Contents of non-residential condominium units.
Program Eligibility	Emergency and Regular Programs
Other Considerations	In the event of a loss, owners may apply up to 10% of the stated contents coverage amount for betterments and improvements. The 10% is not an additional limit of insurance.
Replacement Cost	No
ICC Coverage	No
Assessment Coverage	No
Federal Policy Fee	$50

1. High-Rise versus Low-Rise Condominiums

Residential condominium buildings are grouped into 2 different types, low-rise and high-rise, because of the difference in the exposures to the risk that typically exists.

- High-rise buildings have five or more units and at least three floors excluding an enclosure even if it is the lowest floor for rating.
- Low-rise buildings have fewer than five units regardless of the number of floors, or five or more units with fewer than three floors, including the basement.
  - A townhouse/rowhouse is a multi-floor unit divided from similar units by solid, vertical, load-bearing walls, having no openings in the walls between units and with no horizontal divisions between any of the units.
  - Townhouse/rowhouse buildings are always low-rise buildings for rating purposes. The number of floors or units does not change the low-rise designation.

2. Basic Limits of Insurance for RCBAP

Maximum amount of insurance allowed under the RCBAP is $250,000 × the number of units. **Table 39** shows basic limits of insurance.

Table 39. Basic Limits of Insurance for RCBAP

BUILDING TYPE	BASIC LIMIT OF INSURANCE
High-Rise	$175,000
Low-Rise	$60,000 x Number of Units

3. Condominium Eligibility for Pre-FIRM Subsidized or Newly Mapped Rating

If a policy on a Pre-FIRM building eligible for Pre-FIRM subsidized rates lapses, the building is no longer eligible for this subsidy under the following conditions:

- The insured wants to reinstate expired or canceled coverage on a previously covered building;
- One or more of the named insureds on the new policy was either a named insured on the expired or canceled policy or had an ownership interest in the building at the time of cancellation or expiration;
- The insured reinstated coverage with premium received on or after April 1, 2016:
  - The insurer receives the renewal payment more than 30 days after expiration but within the 90-day date of the policy expiration. The insurer reinstates coverage with a 30-day waiting period upon receipt of the renewal payment. The policy remains eligible to renew using Pre-FIRM subsidized rates or the Newly Mapped rating procedure for only the first instance.
  - The insurer receives the renewal payment more than 90 days following the expiration date. The insurer must require a new application with the full annual premium and apply the 30-day waiting period; *or*
- The policy expiration or cancellation was for a reason other than:
  - The insured's lender no longer required the insured to obtain and maintain flood insurance.
  - The property was in a community suspended from the NFIP and the insured reinstated the policy within 180 days of community's reinstatement as a participating NFIP community.

Refer to the guidance in **Table 40** to determine if the building is ineligible to use Pre-FIRM Subsidized Rates.

Table 40. Pre-FIRM Subsidized Rates Ineligibility Determination

Was there a Prior NFIP Policy for this Property in the Insured's Name?	Did a Lender require the Prior NIFP Policy?	Did the Prior NFIP Policy Lapse While Required by a Lender?	Was the Lapse the result of a Community Suspension?	Was the Community Reinstated within the Last 180 days?	Eligible for Pre-FIRM Subsidized Rates?
Yes	Yes	Yes	Yes	No	No
Yes	Yes	Yes	No	Yes	No
Yes	Yes	Yes	No	No	No

4. Condominium Pre-FIRM Rate Table Hierarchy

Use **Table 41** to determine which Pre-FIRM rate table to use.

Table 41. Pre-FIRM Rate Table Hierarchy

Pre-FIRM	Pre-FIRM SRL	Pre-FIRM Substantially Improved	High-Rise Table For Rating	Low-Rise Table For Rating
YES	YES	NO	N/A	4B
YES	NO	YES	3B	4C
YES	YES	YES	N/A	4B

5. RCBAP Federal Policy Fee Table

The Federal Policy Fees for the RCBAP are shown in **Table 42**.

Table 42. RCBAP Federal Policy Fee Table

Number of Units	Federal Policy Fee
1 unit	$50 per policy
2–4 units	$150 per policy
5–10 units	$400 per policy
11–20 units	$800 per policy
21 or more units	$2,000 per policy

6. RCBAP Premium Calculation

Follow the steps outlined in **Table 43** to calculate the premium. Refer to **Table 39** for the basic limits. Please note, the number of units impacts the Federal Policy Fee and HFIAA surcharge.

Table 43. Calculate Premium for an RCBAP

STEP	ACTION	REFERENCE
1	Identify the rate	Separate rate tables and different basic coverage limits for Low-rise and High-Rise condominium buildings.
2	Apply the deductible factor	Deductible Factors table for deductible amounts and factors.
3	Apply Severe Repetitive Loss (SRL) premium (if appropriate)	See Rate Table 7D. Severe Repetitive Loss Premium in Appendix J for applicable percentage.
4	Add Increased Cost of Compliance (ICC) premium	ICC Premium table for ICC premium amount.
5	Apply Community Rating System (CRS) discount	CRS Eligible Communities table for participating communities and CRS discounts. Buildings built in compliance and Pre-FIRM buildings in these communities receive the CRS discount.

Table 43. Calculate Premium for an RCBAP *continued*

STEP	ACTION	REFERENCE
6	Apply Reserve Fund Assessment	Reserve Fund Assessment table for applicable percentage.
7	Add Probation Surcharge	Community Master File or insurer to determine if community is on probation. Add a $50 Probation Surcharge if community is on NFIP probation.
8	Add HFIAA Surcharge	The surcharge is $250 for these policies.
9	Add Federal Policy Fee	Federal Policy Fee table for RCBAP.

F. General Concepts

1. Duplicate Policies

Multiple policies with building coverage may not insure a single building with one exception. The insurer may issue a Dwelling Form policy to a unit owner insuring a condominium unit with building coverage in a condominium building also covered by an RCBAP. However, combined coverage between the Dwelling Form policy and the RCBAP may not exceed $250,000. Insureds may not claim damaged items under more than one policy. NFIP will only pay for damaged items under one policy.

2. Tentative Rates and Scheduled Buildings

Tentative Rates may be applied to rate the RCBAP. For additional guidance on tentative rates, refer to the Tentative Rates subsection within this section of the manual.

The Scheduled Building Policy is not available for the RCBAP.

3. Assessments

The RCBAP and General Property Forms do not provide assessment coverage.

Assessment coverage is only available under the Dwelling Form.

- The insured cannot use the assessment coverage under the Dwelling Form to meet the 80% coinsurance provision of the RCBAP.
- The assessment coverage under the Dwelling form does not apply to ICC coverage or to buildings subject to continuous flooding from closed basin lakes.

Application of assessment coverage after a loss is shown in **Table 44**.

Table 44. Assessment Coverage After a Loss

Condition at Time of Loss	Assessment Coverage Under the Dwelling Form
No RCBAP	The unit owner has purchased building coverage. • Responds to a loss assessment against the unit owner for damages to common areas, up to the building limit under the Dwelling Form. • If there is also damage to the building elements of the unit: – Coverage combination cannot exceed the maximum coverage limits available for a single-family dwelling. – Settlement of the unit building damages applies first and then the loss assessment.
RCBAP Insured to at Least 80% of the Building Replacement Cost	The unit owner has purchased building coverage: • The loss assessment coverage under the Dwelling Form will pay that part of a loss that exceeds 80% of the association's building replacement cost. • The loss assessment coverage under the Dwelling Form will not cover the association's policy deductible purchased by the condominium association. • The RCBAP is primary and the Dwelling Form is considered excess after exhausting the RCBAP limits. • Coverage combination cannot exceed the maximum coverage limits available for a single-family dwelling.
RCBAP Insured to Less Than 80% of the Building Replacement Cost	The unit owner has purchased building coverage: • The RCBAP is primary and the Dwelling Form is considered excess after exhausting the RCBAP limits. • The Dwelling Form will respond to a loss assessment resulting from the coinsurance penalty under the RCBAP even if the loss did not meet the RCBAP limits.

4. Condominium Rating Tables

Below are tables that provide information regarding rating a condominium.

a. Low-Rise Residential Condominiums

Table 45. Single-Unit Building or Townhouse/Rowhouse Type – Building with Separate Entrance for Each Unit

Purchaser of Policy	Building Occupancy[1]	Building Indicator[1]	Contents Indicator[2]	Type of Coverage	Rating Classification	Policy Form[3]
Unit owner	Single family	Single unit	Household	RC[4]	Single family	Dwelling
Association (association-owned single unit only)	Single family	Single unit	Household	RC[4]	Single family	Dwelling

Table 45. Single-Unit Building or Townhouse/Rowhouse Type – Building with Separate Entrance for Each Unit *continued*

Purchaser of Policy	Building Occupancy[1]	Building Indicator[1]	Contents Indicator[2]	Type of Coverage	Rating Classification	Policy Form[3]
Association (entire building)	Determined by the number of units, i.e., Single family, 2–4 family, other residential	Low-rise	Household	RC	RCBAP low-rise	RCBAP

1. When there is a mixture of residential and non-residential usage within a single building, refer to the Condominium Association Coverage tables in this section of this manual.
2. In determining the contents location, refer to **Tables 17 and 18** in this section of the manual.
3. RCBAP must be used to insure residential condominium buildings owned by the association that are in a Regular Program community and in which at least 75% of the total floor area within the building is residential. Use the General Property Form if ineligible for the RCBAP.
4. Replacement Cost if the RC eligibility requirements are met (building only).

Table 46. Multi-Unit Building – 2–4 Units Per Building – Regardless of Number of Floors (Non-Townhouse)

Purchaser of Policy	Building Occupancy[1]	Building Indicator[1]	Contents Indicator[2]	Type of Coverage	Rating Classification	Policy Form[3]
Unit Owner	2–4	Single unit	Household	RC[4]	Single family for building; 2–4 family for contents	Dwelling
Association (Association-Owned Single Unit Only)	2–4	Single unit	Household	RC[4]	Single family for building; 2–4 family for contents	Dwelling
Association (Entire Building)	2–4	Low-rise	Household	RC	RCBAP low-rise	RCBAP
Owner of Non-Residential Contents	Non-residential	Single unit (Building coverage not available)	Other than household	ACV	Non-residential	General Property

Table 47. Multi-Unit Building – 5 or More Units Per Building, Fewer Than 3 Floors

Purchaser of Policy	Building Occupancy[1]	Building Indicator[1]	Contents Indicator[2]	Type of Coverage	Rating Classification	Policy Form[3]
Unit Owner	Other residential	Single unit	Household	RC[4]	Single family for building; other residential for contents	Dwelling
Association (Association-Owned Single Unit Only)	Other residential	Single unit	Household	RC[4]	Single family for building; other residential for contents	Dwelling
Association (Entire Building)	Other residential	Low-rise	Household	RC	RCBAP low-rise	RCBAP
Owner of Non-Residential Contents	Non-residential	Single unit (Building coverage not available)	Other than household	ACV	Non-residential	General Property

1. When there is a mixture of residential and non-residential usage within a single building, refer to the Condominium Association Coverage tables in this section of this manual.
2. In determining the contents location, refer to **Tables 17 and 18** in this section of the manual.
3. RCBAP must be used to insure residential condominium buildings owned by the association that are in a Regular Program community and in which at least 75% of the total floor area within the building is residential. Use the General Property Form if ineligible for the RCBAP.
4. Replacement Cost if the RC eligibility requirements are met (building only).

b. High-rise Residential Condominiums

Table 48. Multi-Unit Building – 5 or More Units Per Building, 3 or More Floors[1]

Purchaser of Policy	Building Occupancy[2]	Building Indicator[2]	Contents Indicator[3]	Type of Coverage	Rating Classification	Policy Form[4]
Unit Owner	Other residential	Single unit	Household	RC[5]	Single family for building; other residential for contents	Dwelling
Association (Association-Owned Single Unit Only)	Other residential	Single unit	Household	RC[5]	Single family for building; other residential for contents	Dwelling
Association (Entire Building)	Other residential	High-rise	Household	RC	RCBAP High-rise	RCBAP

Table 49. Non-Residential Condominiums

Purchaser of Policy	Building Occupancy[2]	Building Indicator[2]	Contents Indicator[3]	Type of Coverage	Rating Classification	Policy Form[4]
Owner of Non-Residential Contents	Non-residential	Single unit (Building coverage not available)	Other than household	ACV	Non-residential	General Property
Owner of Residential Contents	Single family (In a 2–4 unit building)	Single unit (Building coverage not available)	Household	ACV	Single family	Dwelling
Owner of Residential Contents	Other residential (In a 5-or-more-unit building)	Single unit (Building coverage not available)	Household	ACV	Single family	Dwelling
Association	Non-residential	Low-rise or high-rise	Other than household	ACV	Non-residential	General property

1. Enclosure/crawlspace, even if it is the lowest floor for rating, cannot be counted as a floor for the purpose of classifying the building as a high-rise.
2. When there is a mixture of residential and non-residential usage within a single building, refer to the Condominium Association Coverage tables in this section.
3. In determining the contents location, refer to **Tables 17 and 18** in this section of the manual.
4. RCBAP must be used to insure residential condominium buildings owned by the association that are in a Regular Program community and in which at least 75% of the total floor area within the building is residential. Use the General Property Form if ineligible under RCBAP.
5. Replacement Cost if the RC eligibility requirements are met (building only).

G. Sample Replacement Cost Value Letter

Every 3 years the insurer must update the replacement cost value (RCV). Below is a sample letter the insurer may use to obtain the RCV for an insured building.

IMPORTANT FLOOD INSURANCE POLICY INFORMATION

Agent's Name:
Agent's Address:
Re: Insured's Name:
Property Address:
Policy Number:

Dear Agent:

This letter is to inform you that the Replacement Cost Value (RCV) on file for the building referenced above, insured under the Residential Condominium Building Association Policy (RCBAP), must now be updated. The National Flood Insurance Program (NFIP) requires that the RCV be evaluated every 3 years; it has been at least 3 years since the RCV for the building has been updated.

The RCV as currently listed on the above-referenced policy is <INSERT CURRENT RCV>. The amount of building coverage on the policy is <INSERT CURRENT BUILDING COVERAGE>.

If the RCV indicated above needs to be revised, you must provide new documentation showing the revised RCV. Acceptable documentation of the building's RCV is a recent property valuation report that states the building's value, including the foundation, on an RCV basis.

If the RCV has not changed, you must provide either new RCV documentation or a statement signed by an officer or a representative of the Condominium Association confirming that the RCV is still valid.

Please be aware that to the extent that the amount of building coverage on the policy is not in an amount equal to the lesser of 80 percent or more of the full replacement cost of the building at the time of a loss or the maximum amount of insurance available under the NFIP, the Condominium Association may not be fully reimbursed for the loss.

If you have any questions about the information in this letter, please contact < INSERT CONTACT NAME AND TELEPHONE NUMBER>.

cc: Insured, Lender

V. Submit-for-Rate

Due to their unique underwriting characteristics and high flood risk, some risks require submission to the insurer for rating purposes. This category includes high-risk properties with no published rates in the Flood Insurance Manual, as well as certain high-risk properties with published rates. Footnotes in the rate tables identify the risks in the Submit-for-Rate category.

A. Documentation

Insurers must receive the following documentation for Submit-for-Rates:

- Submit-for-Rate Worksheet.
- NFIP Flood Insurance Application.
- Elevation Certificate form.
- Non-Residential Floodproofing Certificate, if applicable.
- If the building is Post-FIRM and has its lowest floor elevation below the BFE, a copy of the variance issued by the local community stating that it granted permission to construct the building. If the community did not grant a variance, a statement to that effect signed by the applicant or the applicant's representative is required.
- Recent photographs of the building (front and back), or a blueprint (layout of the building) if the building is in the course of construction.
- The square footage of any enclosures (including elevators) or crawlspaces below the elevated floor, the use of the enclosure/crawlspace, a list of machinery and equipment servicing the building in the enclosure/crawlspace, and the approximate value of each.
- The value of the above-grade enclosure (hanging floor or mid-level entry).
- If the area below the elevated floor is enclosed using masonry walls and these walls are represented on the application as being breakaway walls in V Zones, or if the walls appear to be masonry in photographs, a signed letter from a local building official, an engineer, or an architect verifying that the walls are indeed breakaway walls.
- The number of elevators located below the lowest elevated floor of an elevated building and below the BFE.
  Note: Do not include chair lifts.
- A statement from the applicant or the applicant's representative that the enclosure was built at the time that the building was originally constructed, or at a later date; must provide that date.
- If the building has a basement, a list of machinery and equipment servicing the building located in the basement and the approximate value of each.
- For elevated buildings, an Elevated Building Determination Form signed by the insured.
- For all Post-1981 V-Zone, non-elevated buildings provide the foundation/structural plans. If the foundation/structural plans are not available, the applicant or agent may provide a written statement to that effect.

- For a non-residential building with an interior pit (oil pit), provide a photo of the interior of the pit.
- For a building with an above-grade enclosure (hanging floor, mid-level entry), provide a photo of the interior of the enclosed area.

B. Additional Guidance

For additional guidance, refer to the *NFIP Specific Rating Guidelines* manual. If FEMA has not published rates, please submit all documentation via UCORT to the NFIP Bureau's Underwriting Department to obtain a rate.

If the insurer cannot determine the rate, do not submit premium on these risks until FEMA has determined the appropriate rate.

Submit-for-Rate quotations, excluding the ICC Premium, Federal Policy Fee, Reserve Fund Assessment, HFIAA Surcharge, and Probation Surcharge, if applicable, are valid for 90 days. After 90 days, the agent must resubmit the Flood Insurance Application and supporting documentation to rate the policy. **Please note:** The rates may change based on the policy effective date.

C. Effective Date

- Follow the effective date guidance provided in the Before You Start section of the manual.

VI. Provisional Rating

A. General Information

Provisional rates apply to newly insured risks, enabling coverage placement without the required Elevation Certificate (EC).

- The insurer should receive the EC and apply full-risk rates within 60 days of the policy effective date.
- Provisionally-rated policies are valid for 1 year. However, the insurer must apply full-risk rates prior to any claim payment in the event of a loss.
- Use the effective date rules in the Before You Start section of this manual.
- Provisionally-rated policies cannot be rewritten or renewed.
- The insured may purchase only one provisionally-rated policy per property.

B. Eligibility Requirements

The newly insured risk must meet all of the following criteria:

- Must be Post-FIRM.
- Must be a 1- to 4-family residential building, excluding mobile homes.
- Must be a property located in Zones AE, A1–A30, AO, AH or A where the community provides Base Flood Elevations.

C. Reformation

A provisionally-rated policy has limited reformation rights. The reformation rights depend upon the submission of a valid Elevation Certificate, photographs, and additional premium (if required).

1. Receipt of Required Elements within 60 Days of the Policy Effective Date

If the insurer receives the required elements within 60 days of the policy effective date and additional premium is due, the insurer must send an underpayment letter. If the insurer receives the additional premium within 30 days of the underpayment letter, the insurer must restore the originally requested limits without a 30-day waiting period. The increased coverage will apply to a loss that occurs before the insurer receives the EC and additional premium.

2. Receipt of Required Elements More Than 60 Days from the Policy Effective Date

Before a loss, there are two options if additional premium is due after the policy effective date:

- Submit the additional premium for the full policy term. The coverage limits increase to the originally requested limits as of the beginning of the policy term; *or*
- Submit pro-rata additional premium. The additional premium increases the coverage limits with a 30-day waiting period. The increased limits apply only to losses occurring after the 30-day waiting period. Reduced coverage limits apply to losses occurring within the 30-day waiting period.

3. Reformation after Receipt of Required Elements

- The insurer must determine full-risk rates before issuing payment for a loss.
- The insurer will reduce the coverage to the amount that the received premium purchases, if the cost of the full-risk-rated policy is more than the cost of a provisionally-rated policy.
- A 30-day waiting period applies after the insurer receives the additional premium if the insured wishes to increase coverage.

In all cases, coverage may not exceed the originally requested coverage limits when the full-risk premium is less than the provisional premium.

D. Endorsements

The insurer may not endorse a provisionally-rated policy to increase coverage until it reforms the policy using full-risk rates.

The agent should submit the following to reform a provisionally-rated policy to a full-risk-rated policy:

- A general change request;
- A valid EC;
- Photographs; *and*
- Additional premium due, if applicable.

E. Notification

The insurer must provide a notice to the insured, agent, and lender (if applicable) explaining the nature of the coverage, the limited reformation rights, and the full-risk rating requirements. The sample notification letter at the end of this section provides an example to follow.

F. Provisional Rating Documents

The agent must submit a Provisional Rating Questionnaire (shown in Appendix J: Rate Tables) to the insurer in addition to the application for insurance. One question included in the form asks if the building is located on fill and the four questions below assist in determining if the building is located on fill. If the answer to any of the questions is "yes", the building is elevated on fill.

- Does the building's construction rest on a mound of earth? Examples: The land demonstrates significant slope down and away from the building in the front and rear and/or the driveway exhibits significant slope down and toward the street.
- Is the front door threshold at least 3 feet above the crown of the street?
- Do steps up from the street to the house provide at least a 3-foot rise?
- Is the lower floor of the house at least 2 feet above the floor of the garage?

1. National Flood Insurance Program Provisional Rating Questionnaire

A copy of the Provisional Rating Questionnaire can be found in Appendix J: Rate Tables.

2. Provisional Rating Example

A Provisional Rating example is shown at the beginning of the Rating examples in this section.

3. Sample Notification

A sample notification letter for provisionally-rated policies is shown on the next page.

SAMPLE NOTICE TO ACCOMPANY PROVISIONALLY RATED POLICIES

At the request of you and your agent/producer, the enclosed Standard Flood Insurance Policy has been issued using provisional rates because an Elevation Certificate was not available at the time of application. An Elevation Certificate is necessary to determine a premium that accurately reflects the flood risk (i.e., full-risk rates). By accepting this provisionally rated policy, you agree to submit an Elevation Certificate and the required photographs within 60 days of your policy becoming effective. Failure to comply with this requirement may result in lower coverage limits than those shown on the enclosed declarations page and may affect other aspects of your coverage. This policy is issued for a 1-year term and cannot be renewed using provisional rates.

It is likely that after you submit a valid Elevation Certificate, the resulting full-risk premium will be determined to be lower than the provisional premium. In that case, you will receive a refund of the difference for the policy term.

If the full-risk premium is determined to be higher, the following rules apply:

(1) If we receive from you a valid Elevation Certificate and the required photographs within 60 days of the policy effective date, the coverage limits on the declarations page will be revised as of the policy effective date. If any additional premium is due because the full-risk premium is more than the provisional premium, you will then have 30 days to pay the additional premium for the entire term to restore the originally requested limits without a waiting period. Those coverage limits will apply even to a loss occurring before we receive the Elevation Certificate and additional premium. Full-risk rating will be completed before the loss payment is made.

(2) If we receive from you a valid Elevation Certificate and any additional premium due as a result of using full-risk rates more than 60 days after the policy effective date but before a loss occurs, you have 2 options. You may submit the additional premium for the entire policy term, in which case the coverage limits on the enclosed declarations page will be in force from the effective date. Alternatively, you may submit the additional premium, computed for the remainder of the policy term with a 30-day waiting period. In this latter case, the originally requested coverage limits will only apply to any loss occurring after the waiting period. Reduced coverage limits as described in number (3) below will apply to any loss occurring within the waiting period.

(3) If neither (1) nor (2) above applies, full-risk rates must be determined before any loss payment will be made. If the full-risk premium is more than the provisional premium, the coverage limits will be less than those shown on the enclosed declarations page. In that case, the loss payment will be subject to the reduced coverage limits, which will be the coverage limits that the provisional premium would buy using the full-risk rates. If you want to increase your reduced coverage limits, a 30-day waiting period will apply to the additional coverage.

    In all instances, if the full-risk premium is less than the provisional premium, the amount of coverage may not exceed the amount originally requested.

If you have any questions, please contact your insurance agent/producer for assistance.

VII. Certifications

A. General Information

This section provides information about the NFIP Elevation Certificate (EC) and NFIP Floodproofing Certificate.

B. Elevation Certificate

The EC provides elevation information required:

- To ensure compliance with community floodplain management ordinances;
- To determine the proper insurance premium rate; *and*
- To support a request for a Letter of Map Amendment (LOMA) or a Letter of Map Revision based on Fill (LOMR-F).

A sample Elevation Certificate can be found in Appendix B: Forms.

NOTE

"A Letter of Map Revision based on Fill is FEMA's modification of the Special Flood Hazard Area (SFHA) shown on the Flood Insurance Rate Map based on the placement of fill outside the existing regulatory floodway." https://www.fema.gov/letter-map-revision-based-fill

1. The NFIP Requires Elevation Certificates For SFHAs

For rating purposes, the NFIP requires an EC for buildings in the Special Flood Hazard Area (SFHA):

- Post-FIRM buildings; *and*
- Full-risk elevation-rated Pre-FIRM buildings.

2. Optional Full-Risk Rating

- SFHA full-risk rates may be lower than SFHA Pre-FIRM rates for some buildings. The decision to obtain an EC and request full-risk rating is at the insured's discretion.

The insured may choose to obtain an EC and request full-risk rating for:

- Pre-FIRM Buildings in an SFHA:
  - The insurer may endorse the policy for only the current policy year if the full-risk rating provides a lower premium.
  - The policy continues with the Pre-FIRM subsidized premium rates, if the full-risk rates are not favorable, until the full-risk rating provides a lower premium.
- AR and AR Dual Zones:
  - The EC is optional for both Pre- and Post-FIRM buildings.

C. Completing an Elevation Certificate (EC)

1. Required Certification

The NFIP requires a legally authorized land surveyor, engineer, or architect to certify elevations in all SFHAs except for zones AO and A (without Base Flood Elevations (BFEs)). The surveyor, engineer, or architect must sign and include their identification number and/or seal in Section D.

A building official, a property owner, or an owner's representative may provide the EC for zones AO and A (without BFEs). The property owner or owner's representative must complete Section F when they prepare the EC for a building in Zones AO or A (without BFEs).

2. Photographs

The NFIP will not accept an EC for rating purposes without photographs, except for a building in the course of construction. The photograph requirements apply to all policies rated with an EC.

- Photograph Requirements:
  - A minimum of two clear/legible photographs that show the front and back of the building.
  - Photographs dated within 90 days of submitting the EC to the insurer (not the certification date, if that date is earlier).
  - Photographs must be at least 3"×3" and may be analog (film) or digital. The NFIP prefers color photographs.
- Building in the course of construction:
  - The NFIP waives the photograph requirement when the building is in the course of construction.
  - The NFIP requires a revised EC with photographs when the construction is complete.
  - The NFIP requires as-built building elevations when construction is complete.
- Additional photograph requirements:
  - Buildings with flood openings (flood vents) must have one or more photographs that clearly show the flood vent openings.
  - Split or multi-level buildings must have at least two additional photographs showing both sides of the building.

NOTE

The NFIP requires photographs when an agent moves his or her business from one insurer to another.

3. Other Elevation Information

Existing documentation containing elevation information (e.g., an older Elevation Certification form, or surveyor letterhead) may transfer to Section C of the EC.

- Only a local official authorized by law or ordinance to administer the community's floodplain management ordinance may complete this transaction.
- The official must certify the information and provide a statement documenting the transfer of information in Section G of the EC.
- NFIP requires the lowest adjacent grade and diagram number for all new business if the elevation certification date is on or after October 1, 1997.
- For zones AO and A (without BFEs), a building official, a property owner, or an owner's representative may provide the information in Sections A, B and E on the EC.
- In Community Rating System (CRS) communities, building elevation information may be available through the community.

D. Troubleshooting

- Fields not applicable to the surveyed property should be marked as N/A (not applicable).
- The insured or insured's representative must return the EC to the surveyor, engineer, architect or community official to provide missing information and ensure that they complete the critical Section A of the EC.
- The insurer should contact the surveyor, engineer, or architect completing the form to provide missing data in any part of Section C.
- The building elevation information contained in Section C (Survey Required) appears in feet, except in Puerto Rico, where it appears in meters. Before calculating the elevation difference, convert all metric elevation measurements to feet (1m = 3.28084 ft.).
- Section C2a. of the EC may remain blank if the surveyor, engineer, or architect cannot gain access to the crawlspace to obtain the elevation of the crawlspace floor. Preparers should enter the estimated measurements in the comments area of Section D.
- In Section E – Building Elevation Information (Survey Not Required) for Zone AO and Zone A (without BFE), preparers must compute and enter the elevation differences between the lowest floor and the lowest adjacent grade along with lowest floor and highest adjacent grade.
- The NFIP requires the elevation information of machinery and equipment servicing the building such as water heater, furnace, A/C compressor, heat pump, and water pump, regardless of its location.

E. Floodproofing

Floodproofing may be an alternative to elevating a building to or above the BFE; however, the NFIP requires a Floodproofing Certificate prior to considering floodproofing mitigation measures in rating a structure. Certified floodproofing may result in lower rates because floodproofing ensures:

- A watertight building;
- Waterproof non-collapsing walls; *and*
- The floor at the base of the floodproofed walls will resist flotation during a flood.

NOTE

Allowable methods for floodproofing non-residential buildings differ from those allowed for residential buildings. Contact the local government for the specific requirements.

1. Eligibility for a Rating Credit

- Insureds may receive credit for floodproofing a residential building if all of the following apply:
  - The building has a basement;
  - The building is located in a community where FEMA approved the residential basement floodproofing rating credit; *and*
  - The building is located in zone A1–A30, AE, AR, AR Dual, AO, AH, or A with a BFE.
- Insureds may receive credit for floodproofing a non-residential building if:
  - The building is in any zone other than a V zone; *and*
  - The building is in any participating NFIP community.
- Refer to Appendix K for the list of communities approved for residential basement floodproofing.

2. Requirements for a Rating Credit

A registered professional engineer or architect must certify that the building is floodproofed to at least one foot above the BFE.

3. Residential Building with Basements

- Insurers must submit a completed Residential Basement Floodproofing Certificate and at least two photographs of the building to obtain a rating credit.
- The NFIP grandfathers a residential floodproofing rating credit if the building was constructed:
  - In a community approved for the residential floodproofing credit at the time of construction; *or*
  - Before the date the NFIP removed the community's residential floodproofing credit approval.

4. Non-Residential Buildings

- The insurer must receive the Floodproofing Certificate with the application and at least two photographs of the building. The photographs must show the floodproofing measures in place.
- All non-residential floodproofed buildings must follow submit-for-rate procedures.
- Insurers must submit the following to FEMA through the NFIP Bureau:
  - Completed Flood Insurance Application;
  - Completed Floodproofing Certificate;
  - Photographs of shields, gates, barriers, or components designed to provide floodproofing protection to the structure;
  - Written certification from a licensed professional engineer that all portions of the structure below the BFE are watertight or substantially impermeable to the passage of water and perform in accordance with Title 44 Code of Federal Regulations (44 CFR 60.3 (c)(3)); *and*
  - A comprehensive maintenance plan for the entire structure to include but not limited to:
    - Exterior envelope of structure;
    - All penetrations to the exterior of the structure;
    - All shields, gates, barriers, or components designed to provide floodproofing protection to the structure;
    - All seals or gaskets for shields, gates, barriers, or components;
    - Location of all shields, gates, barriers, and components and all associated hardware; *and*
    - Any materials or specialized tools necessary to seal the structure.

NOTE

Separate documentation is not needed if the *Floodproofing Certificate for Non-Residential Structures* expiring on November 30, 2018, is used and Section III is certified.

VIII. Mortgage Portfolio Protection Program Policy

A. Background

The Mortgage Portfolio Protection Program (MPPP) is a tool to help the mortgage lending and servicing industries bring their mortgage portfolios into compliance with the flood insurance requirements of the Flood Disaster Protection Act of 1973 and the National Flood Insurance Reform Act of 1994. The law requires flood insurance for all buildings located in a Special Flood Hazard Area (SFHA) carrying a mortgage loan issued by a federally regulated lender or servicer. The MPPP does not replace the need for mortgagees to review all mortgage loan applications at the time of loan origination and comply with flood insurance requirements as appropriate.

When property owners receive notice that their building requires flood insurance, they must either show evidence of such a policy to the lender or purchase the necessary coverage. When property owners do not purchase the required flood insurance coverage, lenders can obtain flood insurance policies for these properties under the MPPP. NFIP insurers make this coverage available only as a last resort, and only on mortgages for which property owners did not purchase the required insurance.

B. General Information

Lenders should encourage all property owners required to purchase flood insurance to obtain a flood insurance policy from their agent or insurer. The MPPP is only available when property owners fail to purchase the required insurance.

NFIP Direct cannot offer the MPPP. Only WYO insurers participating in the MPPP have the ability to service policies for lenders/servicers who have force-placement capability.

1. Eligibility

- The property is determined to be located within the SFHA of a community participating in the NFIP;
- The property is not covered by a flood insurance policy even after a required series of notices from the lender regarding the flood insurance requirement for obtaining and maintaining such coverage; *and*
- The borrower has failed to respond.

2. Policy Form

Insurers should use the current Standard Flood Insurance Policy (SFIP) Dwelling Form and General Property Form for MPPP policies, depending upon the type of structure insured. In the absence of building occupancy information, use the Dwelling Form.

3. Underwriting Application

The MPPP requires the following underwriting data for rating and processing:

- Name and mailing address of insured borrower (see Dual Interest under D in this section);
- Insured property address;

- Lender's name and address;
- Mortgage loan number;
- Community name, number, map panel number and suffix, and program type (Emergency or Regular);
- Lender-verified NFIP flood zone where the property is located;
- Occupancy type;
- Whether the building is the insured's primary residence (Yes or No);
- Whether the building is walled and roofed (Yes or No);
- Whether the building is over water (Yes, Partially, or Entirely); *and*
- Coverage amount.

C. Required Notifications

1. Notification to Lenders

An insurer providing flood insurance and participating in the MPPP must provide a detailed implementation package to any lending institution that, on a voluntary basis, chooses to participate in the MPPP as required by NFIP regulations in Title 44 of the Code of Federal Regulations §62.23(l). The insurer must maintain evidence documenting that each lender or servicer received the notification.

2. Notification to Borrowers

The lender must send the borrower three notification letters so the borrower is protected against the lending institution arbitrarily placing flood insurance for which the borrower will be billed.

The lender or its authorized representative providing coverage through the MPPP must send an initial notification letter to notify the borrower of the following:

- The Flood Disaster Protection Act of 1973 requirements;
- The determination that the borrower's property is in an identified SFHA on the appropriate FEMA map, necessitating flood insurance coverage for the duration of the loan;
- Describe the procedure to follow should the borrower wish to challenge the determination;
- Request evidence of a valid flood insurance policy or, if there is none, encourage the borrower to obtain SFIP promptly from a local insurance agent or WYO Company;
- Advise that the premium for an MPPP policy is significantly higher than a conventional SFIP policy and advise as to the option for obtaining less costly flood insurance; *and*
- Advise that the lender will purchase an MPPP policy at the borrower's expense, if the lender does not receive evidence of flood insurance coverage by a certain date.

The second notification letter must remind the borrower of the previous notice and provide the same information.

The final notification letter must:

- Enclose a copy of the flood insurance policy purchased under the MPPP on the borrower's behalf, together with the Declarations page;
- Advise that the lender purchased the policy because of the borrower's failure to respond to previous notices;
- Remind the insured that similar coverage may be available at significantly lower cost; *and*
- Advise that if the insured purchases another policy that is acceptable to satisfy the requirements of the 1973 Act, the policy can be canceled and a pro rata refund provided for the unearned portion of the premium.

This is a sample of the final notification the insurer may send to the insured:

> Your lender notified you of the requirement in Federal law to have flood insurance on your property. We are providing the federally mandated flood insurance policy at your lender's request because your lender has not received proof of flood insurance coverage on your property despite previous notices. The rates charged for this policy can be considerably higher than rates available through a conventionally written flood insurance policy. The amounts of insurance coverage may not be sufficient in the event of a flood loss to protect your full interest in the property. You may contact your insurance agent or company at any time to replace this policy with a conventionally underwritten flood insurance policy, typically at a significant savings in premium. If you purchase another policy that satisfies the requirement in Federal law, a pro rata refund for the unearned portion of the premium will be provided.

The insurer may modify this language to conform to its practices, but the notice must meet the requirements in the NFIP regulations at 44 C.F.R. 62.23(l)(6).

D. Policy Term and Coverage

1. Waiting Period

The NFIP waiting period and effective dates rules apply to the MPPP.

2. Policy Term

MPPP policies are for a one-year term only and subject to the renewal notification process. The insurer must notify the lender and borrower of all coverage limitations at the inception of coverage. The insurer must also impose any applicable coverage limitations at the time of the loss adjustment.

3. Coverage

Both building and contents coverages are available under the MPPP.

- The available coverage limits for residential occupancies under the Regular Program are $250,000 for building coverage and $100,000 for contents.
- The coverage limits available for residential occupancies in Emergency Program communities are $35,000 for building coverage and $10,000 for contents.

- The insurer may sell higher amounts of insurance to other occupancy types such as other residential, non-residential business or other non-residential business but the insurer must verify the building occupancy type. The verification must occur before any loss.

4. Deductible

The MPPP policy deductible is $1,000 each for both building and contents if the building coverage is less than or equal to $100,000. The deductible is $1,250 regardless of the insured building's construction date compared to the initial FIRM date if the building coverage is over $100,000. A contents-only policy has a $1,000 deductible.

5. Duplicate Coverage

The NFIP does not allow duplicate building coverage. If more than one policy with building coverage for the same property exists, cancellation or endorsement removing building coverage from all but one of the policies must occur. The NFIP does not consider an RCBAP and a condominium unit owner Dwelling Form policy duplicate policies. However, in the event of a claim, a payment of no more than $250,000 for a single unit may occur in combined coverage under the Dwelling Form policy and the RCBAP.

6. Coverage Basis

There are no changes from the standard NFIP practices for these provisions. The coverage basis – actual cash value or replacement cost – depends on the covered building occupancy type and the coverage amount.

7. Dual Interest

MPPP policies cover both the lender and the borrower's interests and must include the recorded name of the borrower on the Application Form. It is not necessary to include the lender as a named insured because the Mortgage Clause (section VII.Q. of the Dwelling Form and the General Property Form) affords building coverage to any lender named on the Flood Insurance Application. However, insurers should include the borrower as a named insured if the borrower purchases contents coverage.

E. Premium and Fees

1. Rates

The MPPP requires limited underwriting information and provides special flood insurance rates. See Appendix J: Rate Tables for the rates applicable to MPPP policies. Note the following:

- MPPP policies are not eligible for Community Rating System premium discounts.
- Refer to **Table 2** in this section for basic and additional insurance limits.
- ICC coverage does not apply to contents-only policies or to individually owned condominium units insured under the Dwelling Form or General Property Form.
- The ICC premium is not eligible for the deductible discount. First, calculate the deductible discount, and then add in the ICC premium.

Follow the steps outlined in **Table 50** to calculate the premium for an MPPP policy. The total amount due equals the total premium plus applicable fees and surcharges.

Table 50. Calculate Premium for an MPPP Policy

STEP	ACTION	REFERENCE/GUIDANCE
1	Identify the rate	Rate tables – MPPP Rates
2	Apply the deductible factor	Deductible Factors table for deductible amounts and factors
3	Add Increased Cost of Compliance (ICC) premium	ICC Premium table for ICC premium amount Do not apply ICC premium to contents-only policies or to policies for individual condominium units in a multi-unit building.
4	Apply Community Rating System (CRS) discount	N/A
5	Apply Reserve Fund Assessment	Reserve Fund Assessment table for applicable percentage
6	Add Probation Surcharge	Community Master File or insurer to determine if community is on probation Add a $50 Probation Surcharge if community is on NFIP probation.
7	Add HFIAA Surcharge	Policies covering single-family primary residences, individual residential condominium units, or contents-only for apartments used as a primary residence by the named insured, have a $25 HFIAA Surcharge. All other policies have a $250 HFIAA Surcharge.
8	Add Federal Policy Fee	Federal Policy Fee Table The Federal Policy Fee for tenant's contents-only policy is $25; for all other policies the Federal Policy Fee is $50.

F. Policy Administration

1. Policy Reformation

The provisions for reduction of coverage limits or reformation are described in:

- Dwelling Form, section VII, paragraph G.
- General Property Form, section VII, paragraph G.
- Residential Condominium Building Association Policy (RCBAP), section VIII, paragraph G.

For additional information refer to Reforming the Policy in the Before You Start section of this manual.

2. Renewal

If the insured failed to provide evidence of a flood insurance policy, the full notification process must take place between the lender or authorized representative and the insured before the insurer can renew a policy.

3. Cancellation

Refer to the How to Cancel section for policy cancellation/nullification guidance.

4. Endorsement

An MPPP policy may be endorsed to:

- Increase coverage;
- Make a lender change; *or*
- Assign another lender or borrower.

Insurers may not endorse an MPPP policy to convert it to a conventionally underwritten SFIP. Rather, insurers must complete a new policy application with a new policy number and follow the underwriting requirements of the SFIP, as contained in this manual.

G. MPPP WYO Insurers

The following URL links to a list of insurers participating in the MPPP: https://www.fema.gov/wyo_company.

1. MPPP Expense Allowance

WYO insurers retain the same expense allowance for MPPP business as they do for all other flood insurance they write.

2. Use of WYO Allowance

WYO insurers may not use any portion of the allowance retained for MPPP policies under the WYO Financial Assistance/Subsidy Arrangement to pay, reimburse, or otherwise compensate a lending institution, mortgage servicing company, or other similar type of company the WYO insurer might work with to assist in its flood insurance compliance efforts.

The only exception to this rule is when the lender or servicer may be due a commission on a flood insurance policy written on any portion of the institution's portfolio because a licensed property insurance agent on their staff or a licensed insurance agency owned by the institution or servicing company wrote the policy.

IX. Rating Examples

This section provides 29 illustrative "how to" rating examples for NFIP insurance.

PROVISIONAL RATING EXAMPLE 1
REGULAR PROGRAM, POST-FIRM CONSTRUCTION

Essential Data to Determine Appropriate Rates and Premium:

REGULAR PROGRAM:

- Flood Zone: A with BFE, AE, A1–A30, AO, or AH
- Occupancy: Single-Family Dwelling
- Number of Floors: 3 or More Floors
- Basement/Enclosure: Basement
- Deductible: $3,000/$2,000
- Deductible Factor: .900
- Contents Location: Basement and Above
- Date of Construction: Post-FIRM
- Elevation Difference: N/A
- Floodproofed (Yes/No): No
- Building Coverage: $250,000
- Contents Coverage: $100,000
- ICC Premium: $8
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment $1,061
- Probation Surcharge: $50
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee $50

DETERMINED RATES:

Building: 3.00 / 2.00 Contents: 3.00 / 2.00

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 3,000 CONTENTS $ 2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$250,000	$60,000	3.00	$1,800	$190,000	2.00	$3,800	–$560	$5,040
CONTENTS	$100,000	$25,000	3.00	$750	$75,000	2.00	$1,500	–$225	$2,025

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$7,065
ICC PREMIUM	$8
SUBTOTAL	$7,073
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$7,073
RESERVE FUND ____ %	$1,061
SUBTOTAL	$8,134
PROBATION SURCHARGE	$50
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	$8,259

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $5,600 / Contents: $2,250
2. Apply Deductible Factor: Building: .900 × $5,600 = $5,040 / Contents: .900 × $2,250 = $2,025
3. Premium Reduction: Building: $5,600 – $5,040 = $560 / Contents: $2,250 – $2,025 = $225
4. Subtotal: $7,065
5. Add ICC Premium: $8
6. Subtotal: $7,073
7. Subtract CRS Discount: N/A
8. Subtotal: $7,073
9. Add Reserve Fund Assessment: $1,061 (15%)
10. Subtotal: $8,134
11. Add Probation Surcharge: $50
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $8,259**

RATE EXAMPLE 1
EMERGENCY PROGRAM, $1,500/$1,500 DEDUCTIBLE, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Emergency Program:

- Flood Zone: N/A
- Occupancy: Single-Family Dwelling
- Number of Floors: 1 Floor
- Basement/Enclosure: None
- Deductible: $1,500/$1,500
- Deductible Factor: 1.050
- Contents Location: Lowest Floor Above Ground Level
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Floodproofed (Yes/No): No
- Building Coverage: $35,000
- Contents: $10,000
- ICC Premium: N/A
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $84
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: 1.12 Contents: 1.41

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 1,500 CONTENTS $ 1,500

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$35,000	$35,000	1.12	$392				$20	$412
CONTENTS	$10,000	$10,000	1.41	$141				$7	$148

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$560
ICC PREMIUM	$0
SUBTOTAL	$560
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$560
RESERVE FUND ____ %	$84
SUBTOTAL	$644
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$719**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $392 / Contents: $141
1. Apply Deductible Factor: Building: 1.050 × $392 = $412 / Contents: 1.050 × $141 = $148
1. Premium Increase: Building: $392 – $412 = $20 / Contents: $141 – $148 = $7
1. Annual Subtotal: $560
2. Add ICC Premium: N/A
3. Subtotal: $560
4. Subtract CRS Discount: N/A
5. Subtotal: $560
6. Add Reserve Fund Assessment: $84 (15%)
7. Subtotal: $644
8. Add Probation Surcharge: N/A
9. Add HFIAA Surcharge: $25
10. Add Federal Policy Fee: $50
11. **Total Amount Due: $719**

RATE EXAMPLE 2
REGULAR PROGRAM, PRE-FIRM CONSTRUCTION, $1,250/$1,250 DEDUCTIBLE OPTION, ZONE B, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: B
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,250/$1,250
- Deductible Factor: .980
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Floodproofed (Yes/No): No
- Building Coverage: $150,000
- Contents Coverage: $60,000
- ICC Premium: $8
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $227
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: 1.10 / .30 Contents: 1.69 / .53

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $

DEDUCTIBLE: BUILDING $ 1,250 CONTENTS $ 1,250

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$150,000	$60,000	1.10	$660	$90,000	.30	$270	–$19	$911
CONTENTS	$60,000	$25,000	1.69	$423	$35,000	.53	$186	–$12	$597

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$1,508
ICC PREMIUM	$8
SUBTOTAL	$1,516
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$1,516
RESERVE FUND ____ %	$227
SUBTOTAL	$1,743
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$1,818**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $930 / Contents: $609
2. Apply Deductible Factor: Building: .980 × $930 = $911 / Contents: .980 × $609 = $597
3. Premium Reduction: Building: $930 – $911 = $19 / Contents: $609 – $597 = $12
4. Annual Subtotal: $1,508
5. Add ICC Premium: $8
6. Subtotal: $1,516
7. Subtract CRS Discount: N/A
8. Subtotal: $1,516
9. Add Reserve Fund Assessment: $227 (15%)
10. Subtotal: $1,743
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $1,818**

RATE EXAMPLE 3
REGULAR PROGRAM, PRE-FIRM CONSTRUCTION, $2,000/$2,000 DEDUCTIBLE OPTION, ZONE AE, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AE
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: Enclosure
- Deductible: $2,000/$2,000
- Deductible Factor: 1.000
- Contents Location: Enclosure and Above
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Floodproofed (Yes/No): No
- Building Coverage: $200,000
- Contents Coverage: $75,000
- ICC Premium: $56
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $687
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: 1.20 / 1.81 Contents: 1.41 / 1.84

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 2,000 CONTENTS $ 2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF INSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$200,000	$60,000	1.20	$720	$140,000	1.81	$2,534	$0	$3,254
CONTENTS	$75,000	$25,000	1.41	$353	$50,000	1.84	$920	$0	$1,273

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$4,527
ICC PREMIUM	$56
SUBTOTAL	$4,583
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$4,583
RESERVE FUND ____ %	$687
SUBTOTAL	$5,270
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$5,345**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $3,254 / Contents: $1,273
2. Apply Deductible Factor: Building: 1.000 × $3,254 = $3,254 / Contents: 1.000 × $1,273 = $1,273
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $4,527
5. Add ICC Premium: $56
6. Subtotal: $4,583
7. Subtract CRS Discount: N/A
8. Subtotal: $4,583
9. Add Reserve Fund Assessment: $687 (15%)
10. Subtotal: $5,270
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $5,345**

RATE EXAMPLE 4
REGULAR PROGRAM, PRE-FIRM CONSTRUCTION, $3,000/$2,000 DEDUCTIBLE OPTION, ZONE A15, NON-PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: A15
- Occupancy: Single-Family Dwelling
- Number of Floors: 3 or More Floors
- Basement/Enclosure: Basement
- Deductible: $3,000/$2,000
- Deductible Factor: .975
- Contents Location: Basement and Above
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Floodproofed (Yes/No): No
- Building Coverage: $250,000
- Contents Coverage: $100,000
- ICC Premium: $49
- CRS Rating: 4
- CRS Discount: 30%
- Reserve Fund Assessment: $1,418
- Probation Surcharge: N/A
- HFIAA Surcharge: Non-Primary Residence $250
- Federal Policy Fee: $50

Determined Rates:

Building: 3.39 / 4.04 Contents: 4.00 / 4.12

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 3,000 CONTENTS $ 3,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF INSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$250,000	$60,000	3.39	$2,034	$190,000	4.04	$7,676	–$243	$9,467
CONTENTS	$100,000	$25,000	4.00	$1,000	$75,000	4.12	$3,090	–$102	$3,988

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$13,455
ICC PREMIUM	$49
SUBTOTAL	$13,504
CRS PREMIUM DISCOUNT ____ %	–$4,051
SUBTOTAL	$9,453
RESERVE FUND ____ %	$1,418
SUBTOTAL	$10,871
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$11,171**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $9,710/ Contents: $4,090
2. Apply Deductible Factor: Building: .975 × $9,710 = $9,467 / Contents: .975 × $4,090 = $3,988
3. Premium Reduction: Building: $9,710 – $9,467 = $243 / Contents: $4,090 – $3,988 = $102
1. Annual Subtotal: $13,455
1. Add ICC Premium: $49
1. Subtotal: $13,504
1. Subtract CRS Discount: –$4.051 (30%)
1. Subtotal: $9,453
1. Add Reserve Fund Assessment: $1,418 (15%)
1. Subtotal: $10,871
2. Add Probation Surcharge: N/A
3. Add HFIAA Surcharge: $250
4. Add Federal Policy Fee: $50
5. **Total Amount Due: $11,171**

RATE EXAMPLE 5
REGULAR PROGRAM, PRE-FIRM CONSTRUCTION, $2,000/$2,000 DEDUCTIBLE OPTION, ZONE AE, SEVERE REPETITIVE LOSS PROPERTY, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AE
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $2,000/$2,000
- Deductible Factor: 1.000
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Floodproofed (Yes/No): No
- Building Coverage: $200,000
- Contents Coverage: $40,000
- SRL Premium: $314
- ICC Premium: $56
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $941
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: 2.39 / 2.44 Contents: 3.05 / 4.39

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $

DEDUCTIBLE: BUILDING $ 2,000 CONTENTS $ 2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF INSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$200,000	$60,000	2.39	$1,434	$140,000	2.44	$3,416	$0	$4,850
CONTENTS	$40,000	$25,000	3.05	$763	$15,000	4.39	$659	$0	$1,422

RATE CATEGORY:
☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD:
☐ CHECK ☐ CREDIT CARD
☐ OTHER: _____

ANNUAL SUBTOTAL	$6,272
SEVERE REPETITIVE LOSS PREMIUM	$314
ICC PREMIUM	$56
SUBTOTAL	$6,642
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$6,642
RESERVE FUND ____ %	$941
SUBTOTAL	$7,583
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$7,658**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $4,850 / Contents: $1,422
2. Apply Deductible Factor: Building: 1.000 × $4,850 = $4,850 / Contents: 1.000 × $1,422 = $1,422
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $6,272
5. Add SRL Premium: $314 (5%)
6. Add ICC Premium: $56
7. Subtotal: $6,642
8. Subtract CRS Discount: N/A
9. Subtotal: $6,642
10. Add Reserve Fund Assessment: $941 (15%)
11. Subtotal: $7,583
12. Add Probation Surcharge: N/A
13. Add HFIAA Surcharge: $25
14. Add Federal Policy Fee: $50
15. **Total Amount Due: $7,658**

RATE EXAMPLE 6
REGULAR PROGRAM, PRE-FIRM CONSTRUCTION, $2,000/$2,000 DEDUCTIBLE OPTION, ZONE AE, BUILDING SUBSTANTIALLY IMPROVED, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AE
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $2,000/$2,000
- Deductible Factor: 1.000
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Pre-FIRM
- Elevation Difference: N/A
- Floodproofed (Yes/No): No
- Building Coverage: $250,000
- Contents Coverage: $100,000
- ICC Premium: $49
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $1,387
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: 2.36 / 2.17 Contents: 2.96 / 3.89

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $

DEDUCTIBLE: BUILDING $ 2,000 CONTENTS $ 2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF INSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$250,000	$60,000	2.36	$1,415	$190,000	2.17	$4,123	$0	$5,539
CONTENTS	$100,000	$25,000	2.96	$740	$75,000	3.89	$2,918	$0	$3,658

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$9,197
ICC PREMIUM	$49
SUBTOTAL	$9,246
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$9,246
RESERVE FUND ____ %	$1,387
SUBTOTAL	$10,633
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$10,708**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $5,539 / Contents: $3,658
2. Apply Deductible Factor: Building: 1.000 × $5,539 = $5,539 / Contents: 1.000 × $3,658 = $3,658
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $9,197
5. Add ICC Premium: $49
6. Subtotal: $9,246
7. Subtract CRS Discount: N/A
8. Subtotal: $9,246
9. Add Reserve Fund Assessment: $1,387 (15%)
10. Subtotal: $10,633
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $10,708**

RATE EXAMPLE 7
REGULAR PROGRAM, PRE-FIRM CONSTRUCTION RATED WITH FULL-RISK RATES, $1,500/$1,500 DEDUCTIBLE, ZONE AE, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AE
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,500/$1,500
- Deductible Factor: 0.965
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Pre-FIRM
- Elevation Difference: +1
- Floodproofed (Yes/No): No
- Building Coverage: $150,000
- Contents Coverage: $50,000
- ICC Premium: $8
- CRS Rating: 8
- CRS Discount: 10%
- Reserve Fund Assessment: $82
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: .76 / .08 Contents: .39 / .12

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 1,500 CONTENTS $ 1,500

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$150,000	$60,000	.76	$456	$90,000	.08	$72	–$18	$510
CONTENTS	$50,000	$25,000	.39	$98	$25,000	.12	$30	–$4	$124

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$634
ICC PREMIUM	$8
SUBTOTAL	$642
CRS PREMIUM DISCOUNT ____ %	–$64
SUBTOTAL	$578
RESERVE FUND ____ %	$87
SUBTOTAL	$665
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$740**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $528 / Contents: $128
2. Apply Deductible Factor: Building: .965 × $528 = $510 / Contents: .965 × $128 = $124
3. Premium Reduction/Increase: Building: $528 – $510 = $18 / Contents: $128 – $124 = $4
4. Annual Subtotal: $634
5. Add ICC Premium: $8
6. Subtotal: $642
7. Subtract CRS Discount: –$64 (10%)
8. Subtotal: $578
9. Add Reserve Fund Assessment: $87 (15%)
10. Subtotal: $665
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $740**

RATE EXAMPLE 8
REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, $5,000/$5,000 DEDUCTIBLE OPTION, ZONE AE, NON-RESIDENTIAL BUSINESS

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AE
- Occupancy: Non-Residential Business
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $5,000/$5,000
- Deductible Factor: .890
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +4
- Floodproofed (Yes/No): No
- Building Coverage: $500,000
- Contents Coverage: $500,000
- ICC Premium: $6
- CRS Rating: 5
- CRS Discount: 25%
- Reserve Fund Assessment: $139
- Probation Surcharge: N/A
- HFIAA Surcharge: Non-Residential Business $250
- Federal Policy Fee: $50

Determined Rates:

Building: .21 / .08 Contents: .22 / .12

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 5,000 CONTENTS $ 5,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$500,000	$175,000	.21	$368	$325,000	.08	$260	–$69	$559
CONTENTS	$500,000	$150,000	.22	$330	$350,000	.12	$420	–$82	$668

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$1,227
ICC PREMIUM	$6
SUBTOTAL	$1,233
CRS PREMIUM DISCOUNT ____ %	–$308
SUBTOTAL	$925
RESERVE FUND ____ %	$139
SUBTOTAL	$1,064
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$1,364**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $628 / Contents: $750
2. Apply Deductible Factor: Building: .890 × $628 = $559 / Contents: .890 × $750 = $668
3. Premium Reduction: Building: $628 – $559 = $69 / Contents: $750 – $668 = $82
4. Annual Subtotal: $1,227
5. Add ICC Premium: $6
6. Subtotal: $1,233
7. Subtract CRS Discount: –$308 (25%)
8. Subtotal: $925
9. Add Reserve Fund Assessment: $139 (15%)
10. Subtotal: $1,064
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $1,364**

RATE EXAMPLE 9
REGULAR PROGRAM, 1975–'81 POST-FIRM V1–V30, $2,000/$2,000 DEDUCTIBLE OPTION, ELEVATION RATED, ZONE V13, NON-PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: V13
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $2,000/$2,000
- Deductible Factor: .925
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: 1975–'81 (Post-FIRM)
- Elevation Difference: +1
- Floodproofed (Yes/No): No
- Building Coverage: $150,000
- Contents Coverage: $100,000
- ICC Premium: $33
- CRS Rating: 8
- CRS Discount: 10%
- Reserve Fund Assessment: $907
- Probation Surcharge: N/A
- HFIAA Surcharge: Non-Primary Residence $250
- Federal Policy Fee: $50

Determined Rates:

Building: 5.63 / 1.21 Contents: 4.47 / 2.19

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 2,000 CONTENTS $ 2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF INSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$150,000	$60,000	5.63	$3.378	$90,000	1.21	$1, 089	–$335	$4,132
CONTENTS	$100,000	$25,000	4.47	$1,118	$75,000	2.19	$1,643	–$207	$2,554

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$6,686
ICC PREMIUM	$33
SUBTOTAL	$6,719
CRS PREMIUM DISCOUNT ____ %	–$672
SUBTOTAL	$6,047
RESERVE FUND ____ %	$907
SUBTOTAL	$6,954
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$7,254**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $4,467 / Contents: $2,761
2. Apply Deductible Factor: Building: .925 × $4,467 = $4,132 / Contents: .925 × $2,761 = $2,761
3. Premium Reduction: Building: $4,467 – $4,132 = $335 / Contents: $2,761 – $2,554 = $207
4. Annual Subtotal: $6,686
5. Add ICC Premium: $33
6. Subtotal: $6,719
7. Subtract CRS Discount: –$672 (10%)
8. Subtotal: $6,047
9. Add Reserve Fund Assessment: $907 (15%)
10. Subtotal: $6,954
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $7,254**

RATE EXAMPLE 10
REGULAR PROGRAM, POST-1981 VE OR V1–V30, $3,000/$3,000 DEDUCTIBLE OPTION, WITH ENCLOSURE, ZONE VE, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: VE
- Occupancy: Single-Family Dwelling
- Number of Floors: 3 or More Floors
- Basement/Enclosure: Enclosure (< 300 sq. ft., w/o M&E)
- Deductible: $3,000/$3,000
- Deductible Factor: .850
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Post-'81
- Elevation Difference: –1
- Floodproofed (Yes/No): No
- Building Coverage: $250,000
- Contents Coverage: $100,000
- Replacement Cost Ratio: 75% or more
- ICC Premium: $16
- CRS Rating: 9
- CRS Discount: 5%
- Reserve Fund Assessment: $1,923
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: 4.89 / 4.89 Contents: 3.63 / 3.63

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 3,000 CONTENTS $ 3,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$250,000	$60,000	4.89	$2,934	$190,000	4.89	$9,291	–$1,834	$10,391
CONTENTS	$100,000	$25,000	3.63	$908	$75,000	3.63	$2,723	–$545	$3,086

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$13,477
ICC PREMIUM	$16
SUBTOTAL	$13,493
CRS PREMIUM DISCOUNT ____ %	–$675
SUBTOTAL	$12,818
RESERVE FUND ____ %	$1,923
SUBTOTAL	$14,741
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$14,816**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $12,225 / Contents: $3,631
2. Apply Deductible Factor: Building: .850 × $12,225 = $10,39 / Contents: .850 × $3,631 = $3,086
3. Premium Reduction: Building: $12,225 – $10,39 = $1,834 / Contents: $3,631 – $3,086 = $545
4. Annual Subtotal: $13,477
5. Add ICC Premium: $16
6. Subtotal: $13,493
7. Subtract CRS Discount: –$675 (5%)
8. Subtotal: $12,818
9. Add Reserve Fund Assessment: $1,923 (15%)
10. Subtotal: $14,741
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $14,816**

RATE EXAMPLE 11
REGULAR PROGRAM, POST-FIRM CONSTRUCTION, $1,000 DEDUCTIBLE OPTION, CONTENTS-ONLY POLICY, ZONE A17, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: A17
- Occupancy: 2–4 Family Dwelling (Renter's Policy)
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,000 Contents-Only
- Deductible Factor: 1.000
- Contents Location: Above Ground Level More Than 1 Full Floor
- Date of Construction: Post-FIRM
- Elevation Difference: +2
- Floodproofed (Yes/No): No
- Building Coverage: N/A
- Contents Coverage: $100,000
- ICC Premium: N/A
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $27
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $25

Determined Rates:

Building: N/A Contents: .35 / .12

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING CONTENTS $ 1,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF INSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING									
CONTENTS	$100,000	$25,000	.35	$88	$75,000	.12	$90	$0	$178

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$178
ICC PREMIUM	$0
SUBTOTAL	$178
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$178
RESERVE FUND ____ %	$27
SUBTOTAL	$205
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$25
TOTAL AMOUNT DUE	**$255**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: N/A / Contents: $178
2. Apply Deductible Factor: Building: N/A / Contents: 1.000 × $178 = $178
3. Premium Reduction/Increase: Building: N/A / Contents: $0
4. Annual Subtotal: $178
5. Add ICC Premium: N/A
6. Subtotal: $178
7. Subtract CRS Discount: N/A
8. Subtotal: $178
9. Add Reserve Fund Assessment: $27 (15%)
10. Subtotal: $205
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $25
14. **Total Amount Due: $255**

RATE EXAMPLE 12
REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, $5,000/$5,000 DEDUCTIBLE OPTION, ZONE AO (WITHOUT CERTIFICATION OF COMPLIANCE OR ELEVATION CERTIFICATE), OTHER NON-RESIDENTIAL

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AO (Without Certification of Compliance or Elevation Certificate)
- Occupancy: Other Non-Residential
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $5,000/$5,000
- Deductible Factor: .890
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: –1
- Floodproofed (Yes/No): No
- Building Coverage: $500,000
- Contents Coverage: $500,000
- ICC Premium: $6
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $793
- Probation Surcharge: N/A
- HFIAA Surcharge: Other Non-Residential $250
- Federal Policy Fee: $50

Determined Rates:

Building: 1.56 / .26 Contents: 1.20 / .16

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ DEDUCTIBLE: BUILDING $ 5,000 CONTENTS $ 5,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$500,000	$175,000	1.56	$2,730	$325,000	.26	$845	–$393	$3,182
CONTENTS	$500,000	$150,000	1.20	$1,800	$350,000	.16	$560	–$260	$2,100

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$5,282
ICC PREMIUM	$6
SUBTOTAL	$5,288
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$5,288
RESERVE FUND ____ %	$793
SUBTOTAL	$6,081
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$6,381**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $3,575 / Contents: $2,360
2. Apply Deductible Factor: Building: .890 × $3,575 = $3,182 / Contents: .890 × $2,360 = $2,100
3. Premium Reduction: Building: $3,575 – $3,182 = $393 / Contents: $2,360 – $2,100 = $260
4. Annual Subtotal: $5,282
5. Add ICC Premium: $6
6. Subtotal: $5,288
7. Subtract CRS Discount: N/A
8. Subtotal: $5,288
9. Add Reserve Fund Assessment: $793 (15%)
10. Subtotal: $6,081
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $6,381**

RATE EXAMPLE 13
REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, $1,250/$1,250 DEDUCTIBLE OPTION, ZONE AO (WITH CERTIFICATION OF COMPLIANCE OR ELEVATION CERTIFICATE), PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AO (With Certification of Compliance or Elevation Certificate)
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,250/$1,250
- Deductible Factor: .980
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +1
- Floodproofed (Yes/No): No
- Building Coverage: $250,000
- Contents Coverage: $100,000
- ICC Premium: $6
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $76
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: .28 / .08 Contents: .38 / .13

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 1,250 CONTENTS $ 1,250

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF INSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$250,000	$60,000	.28	$168	$190,000	.08	$152	–$6	$314
CONTENTS	$100,000	$25,000	.38	$95	$75,000	.13	$98	–$4	$189

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$503
ICC PREMIUM	$6
SUBTOTAL	$509
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$509
RESERVE FUND ____ %	$76
SUBTOTAL	$585
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$660**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $320 / Contents: $193
2. Apply Deductible Factor: Building: .980 × $320 = $314 / Contents: .980 × $193 = $189
3. Premium Reduction: Building: $320 – $314 = $6 / Contents: $193 – $189 = $4
4. Annual Subtotal: $503
5. Add ICC Premium: $6
6. Subtotal: $509
7. Subtract CRS Discount: N/A
8. Subtotal: $509
9. Add Reserve Fund Assessment: $76 (15%)
10. Subtotal: $585
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $660**

RATE EXAMPLE 14
REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, $3,000/$2,000 DEDUCTIBLE OPTION, ZONE AH (WITHOUT CERTIFICATION OF COMPLIANCE OR ELEVATION CERTIFICATE), PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AH (Without Certification of Compliance or Elevation Certificate)
- Occupancy: Single-Family Dwelling
- Number of Floors: 1 Floor
- Basement/Enclosure: None
- Deductible: $3,000/$2,000
- Deductible Factor: .900
- Contents Location: Lowest Floor Above Ground Level
- Date of Construction: Post-FIRM
- Elevation Difference: –1
- Floodproofed (Yes/No): No
- Building Coverage: $250,000
- Contents Coverage: $25,000
- ICC Premium: $6
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $219
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: 1.71 / .20 Contents: .84 / .15

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ DEDUCTIBLE: BUILDING $ 3,000 CONTENTS $ 2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF AINSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$250,000	$60,000	1.71	$1,026	$190,000	.20	$380	–$141	$1,265
CONTENTS	$25,000	$25,000	.84	$210	$0	.15	$0	–$21	$189

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$1,454
ICC PREMIUM	$6
SUBTOTAL	$1,460
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$1,460
RESERVE FUND ____ %	$219
SUBTOTAL	$1,679
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$1,754**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $1,406 / Contents: $210
2. Apply Deductible Factor: Building: .900 × $1,406 = $1,265 / Contents: .900 × $210 = $189
3. Premium Reduction: Building: $1,406 – $1,265 = $141 / Contents = $210 – $189 = $21
4. Annual Subtotal: $1,454
5. Add ICC Premium: $6
6. Subtotal: $1,460
7. Subtract CRS Discount: N/A
8. Subtotal: $1,460
9. Add Reserve Fund Assessment: $219 (15%)
10. Subtotal: $1,679
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $1,754**

RATE EXAMPLE 15
REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, $1,250/$1,250 DEDUCTIBLE OPTION, ZONE AH (WITH CERTIFICATION OF COMPLIANCE OR ELEVATION CERTIFICATE), 2–4 FAMILY

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: AH (With Certification of Compliance or Elevation Certificate)
- Occupancy: 2–4 Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,250/$1,250
- Deductible Factor: .980
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +3
- Floodproofed (Yes/No): No
- Building Coverage: $200,000
- Contents Coverage: $40,000
- ICC Premium: $8
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $59
- Probation Surcharge: N/A
- HFIAA Surcharge: 2–4 Family $250
- Federal Policy Fee: $50

Determined Rates:

Building: .28 / .08 Contents: .38 / .13

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 1,250 CONTENTS $ 1,250

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF AINSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$200,000	$60,000	.28	$168	$140,000	.08	$112	–$6	$274
CONTENTS	$40,000	$25,000	.38	$95	$15,000	.13	$20	–$2	$113

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$387
ICC PREMIUM	$8
SUBTOTAL	$395
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$395
RESERVE FUND ____ %	$59
SUBTOTAL	$454
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$754**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $280 / Contents: $115
2. Apply Deductible Factor: Building: .980 × $280 = $274 / Contents: .980 × $115 = $113
3. Premium Reduction: Building: $280 – $274 = $6 / Contents = $115 – $113 = $2
4. Annual Subtotal: $387
5. Add ICC Premium: $8
6. Subtotal: $395
7. Subtract CRS Discount: N/A
8. Subtotal: $395
9. Add Reserve Fund Assessment: $59 (15%)
10. Subtotal: $454
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $754**

RATE EXAMPLE 16
REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, $1,250/$1,250 DEDUCTIBLE OPTION, ZONE A (WITH BFE), 2–4 FAMILY

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: A
- Occupancy: 2–4 Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,250/$1,250
- Deductible Factor: .980
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +6 (with BFE)
- Floodproofed (Yes/No): No
- Building Coverage: $140,000
- Contents Coverage: $70,000
- ICC Premium: $8
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $78
- Probation Surcharge: N/A
- HFIAA Surcharge: 2–4 Family $250
- Federal Policy Fee: $50

Determined Rates:

Building: .55 / .10 Contents: .31 / .08

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ DEDUCTIBLE: BUILDING $ 1,250 CONTENTS $ 1,250

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF AINSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$140,000	$60,000	.55	$330	$80,000	.10	$80	–$8	$402
CONTENTS	$70,000	$25,000	.31	$78	$45,000	.08	$36	–$2	$112

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$514
ICC PREMIUM	$8
SUBTOTAL	$522
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$522
RESERVE FUND ____ %	$78
SUBTOTAL	$600
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$900**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $410 / Contents: $114
2. Apply Deductible Factor: Building: .980 × $410 = $402 / Contents: .980 × $114 = $112
3. Premium Reduction: Building: $410 – $402 = $8 / Contents = $114 – $112 = $2
4. Annual Subtotal: $514
5. Add ICC Premium: $8
6. Subtotal: $522
7. Subtract CRS Discount: N/A
8. Subtotal: $522
9. Add Reserve Fund Assessment: $78 (15%)
10. Subtotal: $600
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $900**

RATE EXAMPLE 17
REGULAR PROGRAM, POST-FIRM, ELEVATION RATED, $1,250/$1,250 DEDUCTIBLE OPTION, ZONE A (WITHOUT BFE), PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

Regular Program:

- Flood Zone: A
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,250/$1,250
- Deductible Factor: .980
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +5 (without BFE)
- Floodproofed (Yes/No): No
- Building Coverage: $135,000
- Contents Coverage: $60,000
- ICC Premium: $8
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $79
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:

Building: .56 / .11 Contents: .32 / .08

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $ **DEDUCTIBLE:** BUILDING $ 1,250 CONTENTS $ 1,250

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF AINSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$135,000	$60,000	.56	$336	$75,000	.11	$83	–$8	$411
CONTENTS	$60,000	$25,000	.32	$80	$35,000	.08	$28	–$2	$106

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$517
ICC PREMIUM	$8
SUBTOTAL	$525
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$525
RESERVE FUND ____ %	$79
SUBTOTAL	$604
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$25
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$679**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____ /_____ /_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____ /_____ /_____ DATE (MM/DD/YYYY)

Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $419 / Contents: $108
2. Apply Deductible Factor: Building: .980 × $419 = $411 / Contents: .980 × $108 = $106
3. Premium Reduction: Building: $419 – $411 = $8 / Contents = $108 – $106 = $2
4. Annual Subtotal: $517
5. Add ICC Premium: $8
6. Subtotal: $525
7. Subtract CRS Discount: N/A
8. Subtotal: $525
9. Add Reserve Fund Assessment: $79 (15%)
10. Subtotal: $604
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due: $679**

PRP RATING EXAMPLE
PREFERRED RISK POLICY, $1,250/$1,250 DEDUCTIBLE, ZONE X, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

REGULAR PROGRAM:

- Flood Zone: X
- Policy Effective Date: 4/8/2019
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,250/$1,250
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Replacement Cost $200,000
- Building Coverage: $200,000
- Contents Coverage: $80,000
- Multiplier: 1.000
- ICC Premium: $8
- Reserve Fund Percent 15%
- Reserve Fund Assessment $53
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee $25

COVERAGE AND PREMIUM:

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION):

$ _____

ENTER SELECTED OPTION FOR COVERAGE LIMIT AND PREMIUM FROM THE TABLES IN THIS MANUAL.

BUILDING AND CONTENTS COVERAGE COMBINATION

REQUESTED COVERAGE	
BUILDING COVERAGE	$200,000
CONTENTS COVERAGE / CONTENTS ONLY	$80,000
PREMIUM CALCULATION	
BASE PREMIUM	$345
MULTIPLIER	1.000
ADJUSTED PREMIUM	$345
ICC PREMIUM	$8
PREMIUM SUBTOTAL	**$353**
RESERVE FUND ASSESSMENT PERCENT	15%
RESERVE FUND ASSESSMENT AMOUNT	$53
TOTAL PREMIUM	**$406**
FEES AND SURCHARGES	
HFIAA SURCHARGE	$25
PROBATION SURCHARGE	$0
FEDERAL POLICY FEE	$25
TOTAL AMOUNT DUE	**$456**

INDICATE THE RATE TABLE USED FOR THE BASE PREMIUM: 3A
RISK RATING METHOD: ☐ 7 – PRP ☐ R – NEWLY MAPPED

PREMIUM CALCULATION:

1. Enter the coverage amounts: Building: $200,000 / Contents: $80,000
2. Select Base Premium: $345
3. Apply the Multiplier: 1.000
4. Adjusted Premium: $345
5. Add ICC Premium: $8
6. Subtotal: $353
7. Enter Reserve Fund Assessment Percentage: 15%
8. Add Reserve Fund Assessment Amount: $53
9. Subtotal: $406
10. HFIAA Surcharge: $25
11. Add Federal Policy Fee: $25
12. **Total Prepaid Amount: $456**

NEWLY MAPPED RATING EXAMPLE
ZONE X, NEWLY MAPPED INTO SFHA ON 11/16/2018, $1,250/$1,250 DEDUCTIBLE, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

REGULAR PROGRAM:

- Flood Zone: X
- Policy Effective Date: 5/3/2019
- Occupancy: Single-Family Dwelling
- Number of Floors: 2 Floors
- Basement/Enclosure: None
- Deductible: $1,250/$1,250
- Contents Location: Lowest Floor Above Ground Level and Higher Floors
- Replacement Cost $150,000
- Building Coverage: $150,000
- Contents Coverage: $60,000
- Multiplier: 1.000
- ICC Premium: $8
- Reserve Fund Percent 15%
- Reserve Fund Assessment $48
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee $50

COVERAGE AND PREMIUM:

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION):

$ _____

ENTER SELECTED OPTION FOR COVERAGE LIMIT AND PREMIUM FROM THE TABLES IN THIS MANUAL.

BUILDING AND CONTENTS COVERAGE COMBINATION

REQUESTED COVERAGE	
BUILDING COVERAGE	$150,000
CONTENTS COVERAGE / CONTENTS ONLY	$60,000
PREMIUM CALCULATION	
BASE PREMIUM	$312
MULTIPLIER	1.000
ADJUSTED PREMIUM	$312
ICC PREMIUM	$8
PREMIUM SUBTOTAL	**$320**
RESERVE FUND ASSESSMENT PERCENT	15%
RESERVE FUND ASSESSMENT AMOUNT	$48
TOTAL PREMIUM	**$368**
FEES AND SURCHARGES	
HFIAA SURCHARGE	$25
PROBATION SURCHARGE	$0
FEDERAL POLICY FEE	$50
TOTAL AMOUNT DUE	**$443**

INDICATE THE RATE TABLE USED FOR THE BASE PREMIUM: 3
RISK RATING METHOD: ☐ 7 – PRP ☐ R – NEWLY MAPPED

PREMIUM CALCULATION:

1	Enter the coverage amounts: Building: $150,000 / Contents: $60,000	
2	Select Base Premium:	$312
3	Apply the Multiplier:	1.000
4	Adjusted Premium:	$312
5	Add ICC Premium:	$8
6	Subtotal:	$320
7	Enter Reserve Fund Assessment Percentage:	15%
8	Add Reserve Fund Assessment Amount:	$48
9	Subtotal:	$368
10	HFIAA Surcharge:	$25
11	Add Federal Policy Fee:	$50
12	**Total Prepaid Amount:**	**$443**

CONDO RATING EXAMPLE 1
PRE-FIRM, LOW-RISE, WITH ENCLOSURE, COINSURANCE PENALTY, ZONE A

REGULAR PROGRAM:

- Building Coverage: $140,000
- Contents Coverage: $100,000
- Condominium Type: Low-rise
- Flood Zone: A
- Occupancy: Other Residential
- Number of Units: 6
- Date of Construction: Pre-FIRM
- Building Type: 3 or More Floors, Including Enclosure
- Deductible: $2,000/$2,000
- Deductible Factor: 1.000
- Replacement Cost: $600,000
- Elevation Difference: N/A
- 80% Coinsurance Amount: $480,000
- ICC Premium: $56 ($30,000 Coverage)
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment $506
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee $400

DETERMINED RATES:

Building: 1.11 / 1.46 Contents: 1.41 / 1.88

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $600,000 **DEDUCTIBLE:** BUILDING $2,000 CONTENTS $2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$140,000	$140,000	1.11	$1,554	$0	1.46	$0	$0	$1,554
CONTENTS	$100,000	$25,000	1.41	$353	$75,000	1.88	$1,410	$0	$1,763

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$3,317
ICC PREMIUM	$56
SUBTOTAL	$3,373
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$3,373
RESERVE FUND ____ %	$506
SUBTOTAL	$3,879
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$400
TOTAL AMOUNT DUE	**$4,529**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____/_____/_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $1,554 / Contents: $1,763
2. Apply Deductible Factor: Building: 1.000 × $1,554 = $1,554 / Contents: 1.000 × $1,763 = $1,763
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $3,317
5. Add ICC Premium: $56
6. Subtotal: $3,373
7. Subtract CRS Discount: N/A
8. Subtotal: $3,373
9. Add Reserve Fund Assessment: $506 (15%)
10. Subtotal: $3,879
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $400
14. **Total Amount Due: $4,529**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Claim Payment is determined as follows:

$$\frac{\text{(Insurance Carried) } \$140{,}000}{\text{(Insurance Required) } \$480{,}000} \times \text{(Amount of Loss) } \$100{,}000 = \text{(Limit of Recovery) } \$29{,}167 - \text{Less Deductible}$$

(Coinsurance Penalty applies because minimum insurance amount of $480,000 was not met.)

CONDO RATING EXAMPLE 2
PRE-FIRM, LOW-RISE, NO BASEMENT/ENCLOSURE, ZONE AE

REGULAR PROGRAM:

- Building Coverage: $480,000
- Contents Coverage: $50,000
- Condominium Type: Low-rise
- Flood Zone: AE
- Occupancy: Other Residential
- Number of Units: 6
- Date of Construction: Pre-FIRM
- Building Type: 1 Floor, No Basement
- Deductible: $2,000/$2,000
- Deductible Factor: 1.000
- Replacement Cost: $600,000
- Elevation Difference: N/A
- 80% Coinsurance Amount: $480,000
- ICC Premium: $56 ($30,000 Coverage)
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment $857
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee $400

DETERMINED RATES:

Building: 1.01 / 1.00 Contents: 1.41 / 1.88

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $600,000

DEDUCTIBLE: BUILDING $2,000 CONTENTS $2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$480,000	$360,000	1.01	$3,636	$120,000	1.00	$1,200	$0	$4,836
CONTENTS	$50,000	$25,000	1.41	$353	$25,000	1.88	$470	$0	$823

RATE CATEGORY:
☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD:
☐ CHECK ☐ CREDIT CARD
☐ OTHER: _____

ANNUAL SUBTOTAL	$5,659
ICC PREMIUM	$56
SUBTOTAL	$5,715
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$5,715
RESERVE FUND ____ %	$857
SUBTOTAL	$6,572
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$400
TOTAL AMOUNT DUE	**$7,222**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____/_____/_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $4,836 / Contents: $823
2. Apply Deductible Factor: Building: 1.00 × $4,836 = $4,836 / Contents: 1.00 × $823 = $823
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $5,656
5. Add ICC Premium: $56
6. Subtotal: $5,715
7. Subtract CRS Discount: N/A
8. Subtotal: $5,715
9. Add Reserve Fund Assessment: $857 (15%)
10. Subtotal: $6,572
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $400
14. **Total Amount Due: $7,222**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Coinsurance Penalty does not apply since minimum insurance amount of 80% was met.

CONDOMINIUM RATING EXAMPLE 3
PRE-FIRM, LOW-RISE, NO BASEMENT/ENCLOSURE, ZONE AE, BUILDING SUBSTANTIALLY IMPROVED

REGULAR PROGRAM:

- Building Coverage: $1,000,000
- Contents Coverage: $40,000
- Condominium Type: Low-rise
- Flood Zone: AE
- Occupancy: 2–4 Family
- Number of Units: 4
- Date of Construction: Pre-FIRM
- Building Type: 2 Floors, No Basement/ Enclosure
- Deductible: $2,000/$2,000
- Deductible Factor: 1.000
- Replacement Cost: $1,200,000
- Elevation Difference: N/A
- ICC Premium: $56 ($30,000 Coverage)
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment $3,377
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee $150

DETERMINED RATES:

Building: 2.15 / 2.10 Contents: 2.96 / 3.97

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $1,200,000 **DEDUCTIBLE:** BUILDING $2,000 CONTENTS $2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS AMOUNT OF INSURANCE	BASIC LIMITS RATE	BASIC LIMITS ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY) AMOUNT OF INSURANCE	ADDITIONAL LIMITS RATE	ADDITIONAL LIMITS ANNUAL PREMIUM	DEDUCTIBLE PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$1,000,000	$240,000	2.15	$5,160	$760,000	2.10	$15,960	$0	$21,120
CONTENTS	$40,000	$25,000	2.96	$740	$15,000	3.97	$696	$0	$1,336

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$22,456
ICC PREMIUM	$56
SUBTOTAL	$22,512
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$22,512
RESERVE FUND ____ %	$3,377
SUBTOTAL	$25,889
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$150
TOTAL AMOUNT DUE	**$26,289**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $21,120 / Contents: $1,336
2. Apply Deductible Factor: Building: 1.000 × $21,120 = $21,120 / Contents: 1.000 × $1,336 = $1,336
3. Premium Reduction: Building: $0 / Contents: $0
4. Annual Subtotal: $22,456
5. Add ICC Premium: $56
6. Subtotal: $22,512
7. Subtract CRS Discount: N/A
8. Subtotal: $22,512
9. Add Reserve Fund Assessment: $3, 377 (15%)
10. Subtotal: $25,889
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $150
14. **Total Amount Due: $26,289**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Coinsurance Penalty does not apply as the maximum amount of insurance was purchased.

CONDO RATING EXAMPLE 4
POST-FIRM, LOW-RISE, COINSURANCE PENALTY, ZONE AE

REGULAR PROGRAM:

- Building Coverage: $750,000
- Contents Coverage: $100,000
- Condominium Type: Low-rise
- Flood Zone: AE
- Occupancy: Other Residential
- Number of Units: 14
- Date of Construction: Post-FIRM
- Building Type: 2 Floors, No Basement/ Enclosure
- Deductible: $1,500/$1,500
- Deductible Factor: .990
- Replacement Cost: $1,120,000
- Elevation Difference: +1
- 80% Coinsurance Amount: $896,000
- ICC Premium: $8 ($30,000 Coverage)
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment $775
- Probation Surcharge: N/A
- HFIAA Surcharge: $250
- Federal Policy Fee $800

DETERMINED RATES:

Building: .67 / .08 Contents: .39 / .12

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $1,120,000 **DEDUCTIBLE:** BUILDING $1,500 CONTENTS $1,500

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$750,000	$750,000	.67	$5,025	$0	.08	$0	–$50	$4,975
CONTENTS	$100,000	$25,000	.39	$98	$75,000	.12	$90	–$2	$186

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$5,161
ICC PREMIUM	$8
SUBTOTAL	$5,169
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$5,169
RESERVE FUND ____ %	$775
SUBTOTAL	$5,944
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$800
TOTAL AMOUNT DUE	**$6,994**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $5,025 / Contents: $188
2. Apply Deductible Factor: Building: .990 × $5,025 = $4,975 / Contents: .990 × $188 = $186
3. Premium Reduction: Building: $5,025 – $4,975 = $50 / Contents: $188 – $186 = $2
4. Annual Subtotal: $5,161
5. Add ICC Premium: $8
6. Subtotal: $5,169
7. Subtract CRS Discount: N/A
8. Subtotal: $5,169
9. Add Reserve Fund Assessment: $775 (15%)
10. Subtotal: $5,944
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $800
14. **Total Amount Due: $6,994**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Claim Payment is determined as follows:

$$\frac{\text{(Insurance Carried) } \$750{,}000}{\text{(Insurance Required) } \$896{,}000} \times \text{(Amount of Loss) } \$300{,}000 = \text{(Limit of Recovery) } \$251{,}116 - \text{Less Deductible}$$

(Coinsurance Penalty applies because minimum insurance amount of $896,000 was not met.)

CONDO RATING EXAMPLE 5
POST-FIRM, LOW-RISE, ZONE AE

REGULAR PROGRAM:

- Building Coverage: $600,000
- Contents Coverage: $15,000
- Condominium Type: Low-rise
- Flood Zone: AE
- Occupancy: Other Residential
- Number of Units: 6
- Date of Construction: Post-FIRM
- Building Type: 3 or More Floors, Townhouse, No Basement/Enclosure
- Deductible: $2,000/$2,000
- Deductible Factor: .975
- Replacement Cost: $600,000
- Elevation Difference: +2
- 80% Coinsurance Amount: $480,000
- ICC Premium: $8 ($30,000 Coverage)
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment $253
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee $400

DETERMINED RATES:

Building: .41 / .08 Contents: .38 / .12

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $600,000

DEDUCTIBLE: BUILDING $2,000 CONTENTS $2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$600,000	$360,000	.41	$1,476	$240,000	.08	$192	–$42	$1,626
CONTENTS	$15,000	$15,000	.38	$57	$0	.12	$0	–$1	$56

RATE CATEGORY:
☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD:
☐ CHECK ☐ CREDIT CARD
☐ OTHER: _____

ANNUAL SUBTOTAL	$1,682
ICC PREMIUM	$8
SUBTOTAL	$1,690
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$1,690
RESERVE FUND ____ %	$253
SUBTOTAL	$1,943
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$400
TOTAL AMOUNT DUE	**$2,593**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $1,668 / Contents: $57
2. Apply Deductible Factor: Building: .975 × $1,668 = $1,626 / Contents: .975 × $57 = $56
3. Premium Reduction: Building: $1,668 – $1,626 = $42 / Contents: $57 – $56 = $1
4. Annual Subtotal: $1,682
5. Add ICC Premium: $8
6. Subtotal: $1,690
7. Subtract CRS Discount: N/A
8. Subtotal: $1,690
9. Add Reserve Fund Assessment: $253 (15%)
10. Subtotal: $1,943
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $400
14. **Total Amount Due: $2,593**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Coinsurance Penalty does not apply since the minimum insurance amount of 80% was met.

CONDO RATING EXAMPLE 6
PRE-FIRM, HIGH-RISE, COINSURANCE PENALTY, ZONE A

REGULAR PROGRAM:

- Building Coverage: $1,110,000
- Contents Coverage: $100,000
- Condominium Type: High-rise
- Flood Zone: A
- Occupancy: Other Residential
- Number of Units: 50
- Date of Construction: Pre-FIRM
- Building Type: 3 or More Floors, No Basement/Enclosure
- Deductible: $2,000/$2,000
- Deductible Factor: 1.000
- Replacement Cost: $1,500,000
- Elevation Difference: N/A
- 80% Coinsurance Amount: $1,200,000
- ICC Premium: $56 ($30,000 Coverage)
- CRS Rating: 5
- CRS Discount: 25%
- Reserve Fund Assessment $773
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee $2,000

DETERMINED RATES:

Building: 1.24 / .356 Contents: 1.41 / 1.28

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $1,500,000 **DEDUCTIBLE:** BUILDING $2,000 CONTENTS $2,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$1,110,000	$175,000	1.24	$2,170	$935,000	.356	$3,329	$0	$5,499
CONTENTS	$100,000	$25,000	1.41	$353	$75,000	1.28	$960	$0	$1,313

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$6,812
ICC PREMIUM	$56
SUBTOTAL	$6,868
CRS PREMIUM DISCOUNT ____ %	–$1,717
SUBTOTAL	$5,151
RESERVE FUND ____ %	$773
SUBTOTAL	$5,924
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$2,000
TOTAL AMOUNT DUE	**$8,174**

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.

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_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $5,499 / Contents: $1,313
2. Apply Deductible Factor: Building: 1.000 × $5,499 = $5,499 / Contents: 1.000 × $1,313 = $1,313
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $6,812
5. Add ICC Premium: $56
6. Subtotal: $6,868
7. Subtract CRS Discount: –$1,717 (25%)
8. Subtotal: $5,151
9. Add Reserve Fund Assessment: $773 (15%)
10. Subtotal: $5,924
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $2,000
14. **Total Amount Due: $8,174**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Claim Payment is determined as follows:

$$\frac{\text{(Insurance Carried) } \$1{,}110{,}000}{\text{(Insurance Required) } \$1{,}200{,}000} \times \text{(Amount of Loss) } \$200{,}000 = \text{(Limit of Recovery) } \$185{,}000 - \text{Less Deductible}$$

(Coinsurance Penalty applies because minimum insurance amount of $1,200,000 was not met.)

CONDO RATING EXAMPLE 7
PRE-FIRM, HIGH-RISE, BASEMENT, MAXIMUM DEDUCTIBLE DISCOUNT, ZONE AE

REGULAR PROGRAM:

- Building Coverage: $3,000,000
- Contents Coverage: $100,000
- Condominium Type: High-rise
- Flood Zone: AE
- Occupancy: Other Residential
- Number of Units: 50
- Date of Construction: Pre-FIRM
- Building Type: 3 or More Floors, including Basement
- Deductible: $5,000/$5,000
- Deductible Factor: .940 (Maximum Total Discount of $221 applies)
- Replacement Cost: $3,750,000
- Elevation Difference: N/A
- 80% Coinsurance Amount: $3,000,000
- ICC Premium: $56 ($30,000 Coverage)
- CRS Rating: 8
- CRS Discount: 10%
- Reserve Fund Assessment: $2,310
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee: $2,000

DETERMINED RATES:

Building: 1.34 / .475 Contents: 1.41 / 1.55

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $3,750,000 **DEDUCTIBLE:** BUILDING $5,000 CONTENTS $5,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$3,000,000	$175,000	1.34	$2,345	$2,825,000	.475	$13,419	–$221	$15,543
CONTENTS	$100,000	$25,000	1.41	$353	$75,000	1.55	$1,163	$0	$1,516

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$17,059
ICC PREMIUM	$56
SUBTOTAL	$17,115
CRS PREMIUM DISCOUNT ____ %	–$1,712
SUBTOTAL	$15,403
RESERVE FUND ____ %	$2,310
SUBTOTAL	$17,713
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$2,000
TOTAL AMOUNT DUE	**$19,963**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____/_____/_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $14,775 / Contents: $1,516
2. Apply Deductible Factor: Building: .940 × $14,775 = $14,554 / Maximum Total Discount of $221 applies
3. Premium Reduction: Building: $14,775 – $14,554 = $221 / Contents: $0
4. Annual Subtotal: $17,059
5. Add ICC Premium: $56
6. Subtotal: $17,115
7. Subtract CRS Discount: –$1,712 (10%)
8. Subtotal: $15,403
9. Add Reserve Fund Assessment: $2,310 (15%)
10. Subtotal: $17,713
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $2,000
14. **Total Amount Due: $19,963**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Coinsurance Penalty does not apply since the minimum insurance amount of 80% was met.

NOTE: The NFIP accepts premium only in whole dollars. If the discount for an optional deductible does not result in a whole-dollar premium, round up if 50¢ or more; round down if less. Always submit gross premium.

CONDO RATING EXAMPLE 8
POST-FIRM, HIGH-RISE, MAXIMUM DEDUCTIBLE DISCOUNT, ZONE AE

REGULAR PROGRAM:

- Building Coverage: $12,000,000
- Contents Coverage: $100,000
- Condominium Type: High-rise
- Flood Zone: AE
- Occupancy: Other Residential
- Number of Units: 100
- Date of Construction: Post-FIRM
- Building Type: 3 or More Floors, No Basement/Enclosure
- Deductible: $5,000/$5,000
- Deductible Factor: .920 (Maximum Total Discount of $221 applies)
- Replacement Cost: $15,000,000
- Elevation Difference: 0
- 80% Coinsurance Amount: $12,000,000
- ICC Premium: $8 ($30,000 Coverage)
- CRS Rating: 9
- CRS Discount: 5%
- Reserve Fund Assessment $2,646
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee $2,000

DETERMINED RATES:

Building: 2.31 / .076 Contents: .73 / .12

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $15,000,000 **DEDUCTIBLE:** BUILDING $5,000 CONTENTS $5,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$12,000,000	$175,000	2.31	$4,043	$11,825,000	.076	$8,987	–$221	$12,809
CONTENTS	$100,000	$25,000	.73	$183	$75,000	.12	$90	$0	$273

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$13,082
ICC PREMIUM	$8
SUBTOTAL	$13,090
CRS PREMIUM DISCOUNT ____ %	–$665
SUBTOTAL	$12,435
RESERVE FUND ____ %	$2,646
SUBTOTAL	$14,300
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$2,000
TOTAL AMOUNT DUE	**$16,550**

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.

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____/_____/_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $13,030 / Contents: $273
2. Apply Deductible Factor: Building: .920 × $13,030 = $12,809 / Maximum Total Discount of $221 applies
3. Premium Reduction: Building: $13,030 – $12,809 = $221 / Contents: $0
4. Annual Subtotal: $13,082
5. Add ICC Premium: $8
6. Subtotal: $13,090
7. Subtract CRS Discount: –$655 (5%)
8. Subtotal: $12,435
9. Add Reserve Fund Assessment: $2,646 (15%)
10. Subtotal: $14,300
12. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $2,000
14. **Total Amount Due: $16,550**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Coinsurance Penalty does not apply since the minimum insurance amount of 80% was met.

NOTE: The NFIP accepts premium only in whole dollars. If the discount for an optional deductible does not result in a whole-dollar premium, round up if 50¢ or more; round down if less. Always submit gross premium.

CONDO RATING EXAMPLE 9
PRE-FIRM, HIGH-RISE, ENCLOSURE, MAXIMUM DEDUCTIBLE DISCOUNT, COINSURANCE PENALTY, ZONE AE

REGULAR PROGRAM:

- Building Coverage: $4,000,000
- Contents Coverage: $100,000
- Condominium Type: High-rise
- Flood Zone: AE
- Occupancy: Other Residential
- Number of Units: 200
- Date of Construction: Pre-FIRM
- Building Type: 3 or More Floors, Including Enclosure
- Deductible: $3,000/$3,000
- Deductible Factor: .980 (Maximum Total Discount of $111 applies)
- Replacement Cost: $18,000,000
- Elevation Difference: N/A
- 80% Coinsurance Amount: $14,400,000
- ICC Premium: $56 ($30,000 Coverage)
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment $2,646
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee $2,000

DETERMINED RATES:

Building: 1.34 / .356 Contents: 1.41 / 1.84

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $18,000,000 **DEDUCTIBLE:** BUILDING $3,000 CONTENTS $3,000

INSURANCE COVERAGE	TOTAL AMOUNT OF INSURANCE	BASIC LIMITS: AMOUNT OF INSURANCE	BASIC LIMITS: RATE	BASIC LIMITS: ANNUAL PREMIUM	ADDITIONAL LIMITS (REGULAR PROGRAM ONLY): AMOUNT OF INSURANCE	ADDITIONAL LIMITS: RATE	ADDITIONAL LIMITS: ANNUAL PREMIUM	DEDUCTIBLE: PREMIUM REDUCTION/ INCREASE	TOTAL PREMIUM
BUILDING	$4,000,000	$175,000	1.34	$2,345	$3,825,000	.356	$13,617	–$111	$15,851
CONTENTS	$100,000	$25,000	1.41	$353	$75,000	1.84	$1,380	$0	$1,733

RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING

PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: _____

ANNUAL SUBTOTAL	$17,584
ICC PREMIUM	$56
SUBTOTAL	$17,640
CRS PREMIUM DISCOUNT ____ %	$0
SUBTOTAL	$17,640
RESERVE FUND ____ %	$2,646
SUBTOTAL	$20,286
PROBATION SURCHARGE	$0
HFIAA SURCHARGE	$250
FEDERAL POLICY FEE	$2,000
TOTAL AMOUNT DUE	**$22,536**

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_____ SIGNATURE OF INSURANCE AGENT/PRODUCER _____/_____/_____ DATE (MM/DD/YYYY)

_____ SIGNATURE OF INSURED (OPTIONAL) _____/_____/_____ DATE (MM/DD/YYYY)

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $15,962 / Contents: $1,733
2. Apply Deductible Factor: Building: .980 × $15,962 = $15,851 / Maximum Total Discount of $111 applies
3. Premium Reduction: Building: $15,962 – $15,851 = $111 / Contents: $0
4. Annual Subtotal: $17,584
5. Add ICC Premium: $56
6. Subtotal: $17,640
7. Subtract CRS Discount: $0
8. Subtotal: $17,640
9. Add Reserve Fund Assessment: $2,646 (15%)
10. Subtotal: $20,286
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $2,000
14. **Total Amount Due: $22,536**

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Claim Payment is determined as follows:

$$\frac{\text{(Insurance Carried) } \$4{,}000{,}000}{\text{(Insurance Required) } \$14{,}400{,}000} \times \text{(Amount of Loss) } \$1{,}000{,}000 = \text{(Limit of Recovery) } \$277{,}778 - \text{Less Deductible}$$

(Coinsurance Penalty applies because minimum insurance amount of $14,400,000 was not met.)