GENERAL CHANGE ENDORSEMENT

The NFIP General Change Endorsement form cannot be used to renew, extend, or change a policy term. However, the General Change Endorsement form, or a similar form for WYO companies, can be used to make certain types of coverage and rating changes or corrections to existing policy data.

I. ENDORSEMENT RULES

A. Coverage Endorsements

1. Additional Coverage or Increase in Amount of Insurance

Added coverage, or an increase in the amount of insurance, is permitted at any time during a policy term. The additional premium is calculated pro rata for the balance of the policy term, at either the rate in effect on the endorsement effective date or the rate in effect on the policy effective date, in accordance with each WYO company's standard business practice. (See Examples 1 through 4 at the end of this section.) Refer to the General Rules section, page GR 8, for the applicable waiting period.

2. Reduction of Insurance

A reduction in the amount of *building* insurance *cannot* be made unless part of the building has been removed, which reduces the building's value to less than the amount of the building insurance, or a current appraisal or cost estimate is provided which shows that the building's current coverage amount is higher than the estimated replacement cost of the building. (See Example 6 at the end of this section.)

A reduction in the amount of *contents* insurance *cannot* be made unless some of the contents have been sold or removed, which reduces the contents' value to less than the amount of the contents insurance.

3. Removal of a Coverage

There is no return premium for the removal of building or contents coverage unless the property is no longer at the described location or the property of the policyholder. (See Example 5 at the end of this section.)

B. Rating Endorsements

1. Rate Reduction

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

2. Rating Error

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

Corrections will be allowed for only the current year for failure of the WYO company or NFIP Direct to:

- Use the map grandfather rule.
- Use the V-Zone Risk Factor Rating Form. The endorsement effective date is either the date the V-Zone Risk Factor Rating Form was certified or the effective date of the current policy year, whichever is later.
- Make a timely revision of alternative rates (rates used for Pre-FIRM rated risks where the zone is unknown).
- Use Post-FIRM rating for a Pre-FIRM structure. The refund will be processed if the insured provides an Elevation Certificate. The endorsement effective date is the effective date of the current policy year.
- Use an Elevation Certificate on Post-FIRM buildings rated using "Without Certification of Compliance or Elevation Certificate" for Zones AO and AH, or "No Elevation Certificate or No Estimated BFE" for Unnumbered A Zone. The endorsement effective date is the effective date of the current policy term.
- 3. Revision of an Alternative Rating

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

4. Map Revision

A map change (reprinting, Letter of Map Amendment [LOMA], Letter of Map Revision [LOMR], or Letter of Determination Review [LODR]) may change the flood zone in which a property is located to a lower rated zone, or it may change the Base Flood Elevation. In such cases, the policy rating may be revised for the current and prior policy years if the change occurred prior to the current policy year.

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

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

C. Misrated Policy

Premium refunds will be allowed with proper documentation (see III.B.2.a.) going back a maximum of 6 calendar years when there was a misrating such as an incorrect building description, lowest floor elevation, community number, flood zone, or Base Flood Elevation, so long as the insured can provide proof of the misrating.

The flood zone and Base Flood Elevation can only be corrected using the current FIRM.

Any lapse in coverage does not extend the number of years the premium refund is allowed.

D. Conversion of Standard Rated Policy to PRP Due to Misrating or Map Revision

A policy written as a Standard B, C, or X Zone policy and later found to be eligible for a PRP may be endorsed or rewritten as a PRP for only the current policy term. When the risk has been rated with other than B, C, or X Zone rates, but is later found to be in a B, C, or X Zone and eligible for a PRP, the writing company will be allowed to endorse or cancel/rewrite up to 6 years.

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

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

The new PRP building coverage will be equal either to the building limit issued under the Standard B, C, or X Zone policy or the next higher limit available under the PRP if there is no PRP option equal to the Standard B, C, or X Zone building limit.

E. Changing Deductibles

Increasing deductibles is permitted during the current policy term. (See Example 7 at the end of this section.) Deductibles cannot be reduced mid-term, unless required by the mortgagee and written authorization is provided by the mortgagee. A 30-day waiting period will apply unless the request to reduce the deductible is in connection with making, extending, or renewing a loan.

The ICC premium is not eligible for the deductible discount or surcharge. First calculate the deductible discount or surcharge, then add in the ICC premium.

F. Correcting Property Address

A policy cannot be endorsed to change the location. This includes relocation from one unit to another unit in the same building.

However, an erroneous address (e.g., through typographical error) can be corrected through endorsement. The agent must provide proof or a reasonable explanation for the error.

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

A. During Last 90 Days of Policy Term

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

B. During Last 75 Days of Policy Term

- 1. If the original Renewal Notice has not been paid, the producer must submit the General Change Endorsement for the current policy term only and submit a renewal Application for the upcoming term. A separate premium payment must be submitted for each transaction. (The insured and/or mort-gagee, if payor, should be advised not to pay the Renewal Notice or Final Notice when a renewal Application and premium have been submitted.)
- 2. If the original Renewal Notice has been paid, the producer must submit the General Change Endorsement together with any required additional premium for the renewal policy term and, if applicable, a separate Endorsement General Change and additional premium for the remainder of the current policy term. The effective date of the endorsement to increase coverage (up to the inflation factor) will be the "renewal date" only if the endorsement and additional premium are received within the 30-day grace period.

C. Refunds Generated from Endorsement Processing

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

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

III. PREPARATION OF FORM

A. General Instructions

Endorsements are processed by submitting a completed General Change Endorsement form and proper documentation (see III.B.2.a.) to the writing company.

Instructions for completing the General Change Endorsement form are self-explanatory. The following items are of special note:

• The policy term cannot be changed. All calculations must reflect the policy term shown on the current declarations page.

 A geographic location must be given for a property. For example, the insured's mailing address may be shown as:

> Route 4 Box 179 Danville, Ohio 43014

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

- Check whether the building was built in compliance or has had continuous coverage. If grandfathering for continuous coverage, enter the prior policy number. If the building was built in compliance, enter the current community identification number, map panel number, suffix, FIRM zone, and, if applicable, the BFE.
- The contents location section should be completed if contents coverage is being added/deleted or if the location of the contents being insured within the described building has changed. Provide an explanation of the change of location in the description area of the section.
- All endorsements, whether paper or electronic form, must be signed. Electronic transactions are permitted if the business process includes authentication of signatures and dates of receipt of premium. WYO companies are responsible for determining the business practices and transaction authentication methods they will use to ensure the security and integrity of such transactions.
- The insured must sign and date the General Change Endorsement form whenever there is a request to reduce policy limits, make policy assignment, or change the agent of record.

B. Refund Processing Procedures

- The current NFIP insurer (WYO Company or Direct Business) will be responsible for returning the premium for the current and prior policy year, provided that it was the insurer for that period. If another NFIP insurer was the insurer for the prior policy year, it will be responsible for returning the premium for that year. Agents submit requests to their carrier.
- 2. Requests for refunds for more than 2 years must be processed by the NFIP Bureau.
 - a. For requests processed by the Bureau, the current NFIP insurer must submit all
 - of the documentation necessary to

make a refund for any period exceeding 2 years. At a minimum, this documen-tation will consist of the following:

- The company's statistical records or declarations pages for each policy term and evidence of premium payments obtained from the insured if these documents are not available from the company's records.
- An endorsement request for each year and the premium refund calculation for each year that the company had the policy.
- A Letter of Map Amendment (LOMA); a Letter of Map Revision (LOMR); a Letter of Determination Review (LODR); a copy of the most recent flood map marked to show the exact location and flood zone of the building; a letter indicating the exact location and flood zone of the building, and signed and dated by a local community official; an Elevation Certificate indicating the

exact location and flood zone of the building, and signed and dated by a surveyor, engineer, architect, or local community official; or a flood zone determination certification that guarantees the accuracy of the information.

- b. In order for the Bureau to process a refund request, the appropriate documentation must be mailed directly to the NFIP Bureau and Statistical Agent, Underwriting Department, 8400 Corporate Drive, Suite 350, Landover, MD 20785.
- 3. WYO Companies will be notified of the premium refunded and the Expense Allowance due to the NFIP. The companies must maintain this documentation as part of their underwriting files.
- 4. Any lapse in coverage does not extend the number of years the premium refund is allowed.

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

IV. ENDORSEMENT RATING EXAMPLES

TABLE OF CONTENTS

| EXAMPLE | | PAGE |
|-----------|--|--------|
| Example 1 | Increasing Coverage on a Preferred Risk Policy | END 6 |
| Example 2 | Increasing Coverage, Program Conversion | END 7 |
| Example 3 | Increasing Coverage | END 8 |
| Example 4 | Increasing Coverage After a Rate Change | END 9 |
| Example 5 | Removing Contents | END 10 |
| Example 6 | Reducing Building Coverage | END 11 |
| Example 7 | Increasing Deductible | END 12 |

INCREASING COVERAGE ON A PREFERRED RISK POLICY

- Policy term is October 15, 2009-2010
- Pre-FIRM, X-Zone, with basement
- Present coverage: Building \$75,000/Contents \$30,000
- Premium at policy inception was \$232.
- Endorsement effective date is April 2, 2010.
- Coverages added are \$125,000 on the building and \$50,000 on the contents for a total of

\$200,000 on the building and \$80,000 on the contents.

- Rates in effect on the effective date of the policy are to be used in calculating the premiums.
- The difference between these two premiums is \$99.
- Prorate the Difference.

Time period is April 2, 2010, to October 15, 2010 Number of days is 169 Pro rata factor is .537

| | JRANCE /ERAGE | | | TION A COVERAGE | | + INCREASED - | NEW PREMIUM TOTALS | | | |
|---|------------------|-------------------|--------------|--------------------|--------------|--------------------|-------------------------------|----------------|------|--|
| | | AMOUNT | RAT | E Pf | REMIUM | AMOUNT | RATE | PREMIUM | | |
| BUILDING | BASIC | 75,000 | _ | | 232 | 125,000 | | 331 | 331 | |
| | | | - | | — | | | | | |
| CONTEN | FS BASIC | 30,000 | _ | | _ | 50,000 | _ | _ | | |
| CONTEN [®] | - | | _ | | | — | _ | | — | |
| IF | CHANGING AMOUN | T OF INSURANCE, E | NTER NEW T | OTAL AMOUNT BI | ELOW | PAYMENT OPTION: | SUBTOTAL | | 331 | |
| В | UILDING COVE | RAGE | CON | NTENTS COV | ERAGE | | DEDUCT. DISCOUNT/SURCHARGE | | — | |
| BASIC | ADDITIONAL | TOTAL | BASIC | ADDITIONAL | TOTAL | | SUBTOTAL | | 331 | |
| _ | | 200,000 | _ | | 80,000 | | ICC PREMIUM | | - | |
| | | | | | | | SUBTOTAL | 331 | | |
| IF RETURN | I PREMIUM, MAIL | REFUND TO: | INSURED | AGENT | PAYOR. THE | ABOVE | CRS PREMIUM | DISCOUNT% | | |
| STATEMEN | NTS ARE CORRE | CT TO THE BEST | OF MY KNC | WLEDGE. I UN | IDERSTAND TI | HAT | SUBTOTAL | | 331 | |
| | | MAY BE PUNISHAI | BLE BY FIN | E OR IMPRISON | MENT UNDER | R | PREMIUM PRE | VIOUSLY PAID | | |
| APPLICABLE FEDERAL LAW. (Excludes Probation Surcharge/ Federal Policy Fee) | | | | | | | | | | |
| | | | | | | | DIFFERENCE | <u>+</u> (+/-) | +99 | |
| SIGNATURE | OF INSURED AND I | DATE SIGNATUR | RE OF INSUR/ | ANCE AGENT/BRO | DKER DATE | (MMDDYY) | PRO RATA FAC | TOR | .537 | |
| | | | | | | | TOTAL | (+/-) | +53 | |

INCREASING COVERAGE, PROGRAM CONVERSION

- Policy term is January 15, 2009-2010
 - Single family dwelling, no basement, Pre-FIRM
 - Present coverage: Building \$35,000/ Contents \$10,000
- Policy conversion date from Emergency to Regular Program: July 15, 2009
- Building located in an A99 Zone
- Premium rates are: Building .78/.21, Contents 1.20/.37.
- Endorsement effective date is October 14, 2009. (The Emergency Program premiums that already exist on this policy are earned for the remainder of the policy term; they are not refundable.)
 - The coverages being added are \$50,000 on the building and \$15,000 on the contents for a total of \$85,000 on the building and \$25,000 on the contents; and \$30,000 coverage for ICC.
 - To increase coverage, complete Sections A and B. Section A is for current coverage, Section B should show only the amounts of the increases.
 - \$15,000 of the \$50,000 coverage to be added on the building must be calculated in the "Amount" column

under Section B, "Increased-Decreased Coverage Only" (using the applicable rate) to amend the present coverage to the threshold for the Regular Program basic limits.

- \$10,000 of the \$15,000 coverage to be added on the contents must be calculated under the "Amount" column under Section B, "Increased-Decreased Coverage Only" (using the applicable rate) to amend the present coverage to the threshold for the Regular Program basic limits.
- Add Sections A and B premiums to obtain the New Premium Subtotals.
- Add the ICC premium, which was not paid in the Emergency Program.
- The Premium Previously Paid is \$362 (excluding ICC/Probation Surcharge/Federal Policy Fee).
- Subtract the Premium Previously Paid from the Premium Total to obtain the Difference (additional/return premium).
- Prorate the Difference.

Time period is October 14, 2009, to January 15, 2010 Number of days is 272 Pro rata factor is .255

| | JRANCE /ERAGE | | | TION A I COVERAGE | | + INCREASED - | NEW PREMIUM TOTALS | | | |
|----------------------|------------------|---------------|---------------|----------------------|-------------|--------------------|---|--------------------|------|--|
| | | AMOUN | Г RAT | E PR | EMIUM | AMOUNT | RATE | PREMIUM | | |
| BUILDING | BASIC | 35,000 | .76 | 5 | 266 | 25,000 | .78 | 195 | 461 | |
| BUILDING ADDITION | | _ | | _ | | 25,000 | .21 | .21 53 1.20 180 | | |
| CONTENT | S BASIC | 10,000 | .96 | 5 | 96 15, | | 1.20 | | | |
| CONTENT ADDITION | - | | | | _ | | | | | |
| IF (| CHANGING AMOUN | F OF INSURANC | E, ENTER NEW | TOTAL AMOUNT BE | ELOW | PAYMENT OPTION: | SUBTOTAL | | 790 | |
| BUI | DING COVER | AGE | CON | TENTS COVER | RAGE | CREDIT CARD | CREDIT CARD DEDUCT. DISCOUNT/SURCHARGE | | | |
| BASIC | ADDITIONAL | TOTAL | BASIC | ADDITIONAL | TOTAL | | SUBTOTAL | | 790 | |
| 60,000 | 25,000 | 85,000 | 25,000 | | 25,000 | | ICC PREMIUM | | 6 | |
| | | | · | | , | | SUBTOTAL | | 796 | |
| F RETURN | PREMIUM, MAIL | REFUND TO | | AGENT | PAYOR. TH | E ABOVE | CRS PREMIUM | DISCOUNT% | | |
| STATEMEN | ITS ARE CORRE | CT TO THE BE | EST OF MY KN | IOWLEDGE. I UN | NDERSTAND T | HAT | SUBTOTAL | | 796 | |
| - | STATEMENTS N | - | SHABLE BY FII | NE OR IMPRISO | MENT UNDE | २ | PREMIUM PRE | VIOUSLY PAID | | |
| APPLICABL | E FEDERAL LAW | Ι. | | | | | (Excludes Proba Federal Policy F | | 362 | |
| | | | | | | | DIFFERENCE | <u>+</u> (+/-) | +434 | |
| SIGNATURE | OF INSURED AND [| DATE SIGNA | TURE OF INSUR | ANCE AGENT/BRO | KER DATE | (MMDDYY) | PRO RATA FAC | TOR | .255 | |
| | | | | | | | TOTAL | (+/-) | +111 | |

INCREASING COVERAGE

- Policy term is December 12, 2009-2010
 - Single family dwelling, no basement
 - Pre-FIRM Building
 - Building located in Zone C
 - Present coverage: Building \$35,000/ Contents \$10,000
 - Endorsement is effective on May 1, 2010, to add additional coverage of \$65,000 on the building and \$15,000 on the contents for a total of \$100,000 building coverage and \$25,000 contents coverage.
 - Premium rates are: Building .78/.21, Contents 1.20/.37.
 - To increase coverage, complete Sections A and B. Section A is for current coverage. Section B should show the amount of the coverage increase only.
 - \$25,000 of the \$60,000 coverage to be added on the building must be calculated in the "Amount" column under Section B, "Increased-Decreased Coverage Only" (using the applicable rate) to amend the present coverage to the threshold for the Regular Program basic limits.

- \$10,000 of the \$15,000 coverage to be added on the contents must be calculated under the "Amount" column under Section B, "Increased-Decreased Coverage Only" (using the applicable rate) to amend the present coverage to the threshold for the Regular Program basic limits.
- Add Section A and B premiums to obtain the New Premium Totals.
- Add the New Premium Totals to calculate the Premium Subtotal.
- Add in the ICC Premium.
- The Premium Previously Paid is \$358 (excluding Probation Surcharge/Federal Policy Fee) which is the total current annual premium including ICC premium.
- Subtract the Premium Previously Paid from the Premium Total to obtain the Difference (should be additional/return premium).
- Prorate the Difference.

Time period is May 1, 2010, to December 12, 2010 Number of days is 140 Pro rata factor is .616

| | JRANCE /ERAGE | | | TION A COVERAGE | | + INCREASED - | COVERAGE | NEW PREMIUM TOTALS | |
|---------------------|------------------|----------------|--------------|--------------------|-------------|--------------------|-------------------------------------|--------------------------|------|
| | | AMOUNT | RAT | E PR | EMIUM | AMOUNT | RATE | PREMIUM | |
| BUILDING | BASIC | 35,000 | .78 | ; | 273 | 25,000 | .78 | 195 | 468 |
| | | | _ | | _ | 40,000 | .21 84 | | 84 |
| CONTEN | TS BASIC | 10,000 | 1.20 | D | 120 | 15,000 | 1.20 | 300 | |
| CONTEN [®] | • | | _ | | _ | _ | _ | — | |
| IF (| CHANGING AMOUNT | F OF INSURANCE | , ENTER NEW | TOTAL AMOUNT BE | ELOW | PAYMENT OPTION: | SUBTOTAL | | 852 |
| BU | ILDING COVER | AGE | CON | TENTS COVE | RAGE | | DEDUCT. DISCOUNT/SUI | RCHARGE | — |
| BASIC | ADDITIONAL | TOTAL | BASIC | ADDITIONAL | TOTAL | | SUBTOTAL | | 852 |
| 60,000 | 40,000 | 100,000 | 25,000 | 0 | 25,000 | · | ICC PREMIUM | | 6 |
| | | | · | | | | SUBTOTAL | | 858 |
| IF RETURN | I PREMIUM, MAIL | REFUND TO: | INSURED | AGENT | PAYOR. TH | EABOVE | CRS PREMIUM | DISCOUNT% | |
| STATEMEN | NTS ARE CORREC | CT TO THE BE | ST OF MY KN | OWLEDGE. I UN | NDERSTAND T | HAT | SUBTOTAL | | 858 |
| - | E STATEMENTS N | | HABLE BY FI | NE OR IMPRISO | NMENT UNDE | २ | PREMIUM PRE | VIOUSLY PAID | |
| APPLICABI | LE FEDERAL LAW | Ι. | | | | | (Excludes Proba Federal Policy F | ation Surcharge/ Fee) | 358 |
| | | | | | | | DIFFERENCE | + (+/-) | +500 |
| SIGNATURE | OF INSURED AND D | DATE SIGNAT | URE OF INSUR | ANCE AGENT/BRO | KER DATE | (MMDDYY) | PRO RATA FAC | TOR | .616 |
| | | | | | | | TOTAL | (+/-) | +308 |

INCREASING COVERAGE AFTER A RATE CHANGE

- Policy term is July 15, 2009-2010
 - Single family dwelling, Regular Program
 - One floor, no basement
 - Current policy limits: Building \$30,000 Contents
 \$8,000
 - Building located in an AE Zone, Post-FIRM
 - Premium rates are: Building 1.43, Contents 1.24
 - Post-FIRM construction with a 0 elevation difference
 - Endorsement effective date is October 15, 2009
 - The coverages being added are \$15,000 on the building and \$7,000 on contents for a total of \$45,000 building coverage and \$15,000 contents coverage.
 - A rate increase takes effect on October 1, 2009.
 - Rates in effect on the effective date of the policy are to be used.
 - In Section A, enter the basic limits and rates for building and contents in effect at the beginning of the policy term.

- In Section B, enter the \$15,000 basic building amount, and the applicable rate (1.43). (See page END 1, "Additional Coverage or Increase in Amount of Insurance." Companies are allowed to use either rates in effect at policy inception or rates in effect at endorsement effective date.)
- In Section B, enter the \$7,000 basic contents amount and the applicable rate (1.24).
- Add Sections A and B premiums to obtain the New Premium Totals.
- Add the New Premium Totals to calculate the Premium Subtotal.
- Add in the ICC Premium.
- The Premium Previously Paid is \$528 (excluding Probation Surcharge/Federal Policy Fee), which is the total current annual premium including ICC premium.

Subtract the Premium Previously Paid from the Premium Total to obtain the Difference (should be additional/return premium).

• Prorate the Difference.

Time period is October 15, 2009, to July 15, 2010 Number of days is 92 Pro rata factor is .748

| INSURAN | | E | | - | ECTIO ENT CO | N A VERAGE | | + INCREASED - | NEW PREMIUM TOTALS | | |
|---------------------|------------------|-------|-----------|-------------|-----------------|---------------|------------|--------------------|-------------------------------------|----------------|------|
| | | | AMOUN | NT R/ | λΤΕ | PR | EMIUM | AMOUNT | RATE | PREMIUM | |
| BUILDING | BASIC | | 30,00 | 0 1 | .43 | | 429 | 15,000 | 1.43 | 215 | 644 |
| BUILDING | | | | - | | | _ | | _ | _ | |
| CONTENT | S BASIC | | 8,00 | 0 1 | .24 | | 99 | 7,000 | 1.24 | 186 | |
| CONTENT ADDITION | - | | | - | _ | | _ | | — | | _ |
| IF C | HANGING AMOUNT | OF I | NSURANCE | , ENTER NEV | / TOTAL A | AMOUNT BE | LOW | PAYMENT OPTION: | SUBTOTAL | | 830 |
| BUII | DING COVERA | GE | | CO | TENTS | S COVER | AGE | | DEDUCT. DISCOUNT/SUF | RCHARGE | |
| BASIC | ADDITIONAL | тс | DTAL | BASIC | ADD | ITIONAL | TOTAL | | SUBTOTAL | 830 | |
| 45,000 | 0 | 45 | ,000 | 15,000 | | 0 | 15,000 | | ICC PREMIUM | | 6 |
| | | | | · | | | · | | SUBTOTAL | | 836 |
| IF RETURN | PREMIUM, MAIL | REF | UND TO: | INSUREI | | GENT | PAYOR. THE | ABOVE | CRS PREMIUM | DISCOUNT% | |
| STATEMEN | ITS ARE CORREC | ст то | THE BES | ST OF MY K | NOWLE | DGE. I UN | DERSTAND T | HAT | SUBTOTAL | | 836 |
| | STATEMENTS N | | BE PUNISH | HABLE BY F | INE OR | IMPRISON | MENT UNDER | २ | PREMIUM PRE | VIOUSLY PAID | |
| APPLICABL | E FEDERAL LAW | - | | | | | | | (Excludes Proba Federal Policy F | | 528 |
| | | | | | | | | | DIFFERENCE | <u>+</u> (+/-) | +308 |
| SIGNATURE | OF INSURED AND D | ATE | SIGNA | TURE OF INS | URANCE | AGENT/BRO | OKER DATE | (MMDDYY) | PRO RATA FAC | TOR | .748 |
| | | | | | | | | | TOTAL | (+/-) | +230 |

REMOVING CONTENTS

- Policy term is November 20, 2009-2010
 - Non-residential structure
 - Emergency Program
 - Policy limits: Building \$100,000/Contents \$100,000
 - Insured purchased a new business location and moved the contents to the new location while still retaining the old location as rental property. (This explanation should be recorded in the Reason for Change section of the General Change Endorsement form.)
 - Present rates are: Building .83, Contents 1.62.
 - Removal date and effective date of change is January 14, 2010.
 - Enter the current building and contents coverages in Section A and the current rates (.83/1.62).

• Enter the decrease in contents coverage in Section B.

Add all New Premium Totals to obtain the Premium Subtotal.

- The Premium Previously Paid is \$2,450 (excluding Probation Surcharge/Federal Policy Fee), which is the total current premium from Section A.
- Subtract the Premium Previously Paid from the Premium Total to obtain the Difference (should be additional/return premium).
- Prorate the Difference.

Time period is January 14, 2010, to November 20, 2010 Number of days is 55 Pro rata factor is .151

| | SURANCE OVERAGE | | | TION A | AGE | | + INCREASED - | NEW PREMIUM TOTALS | | | |
|---|--------------------|--------------|----------------|------------|---------|-------------|--------------------|--------------------------|----------------|--------|--|
| | | AMOUN | T RA | ГЕ | PR | EMIUM | AMOUNT | RATE | PREMIUM | | |
| BUILDI | NG BASIC | 100,00 | 0.8 | 3 | | 830 | 0 | — | — | 830 | |
| BUILDI ADDITI | | - | _ | - | | | — | — | | | |
| CONTE | NTS BASIC | 100,00 | 0 1.6 | 62 | 1, | ,620 | -100,000 | 1.62 | 1.62 -1,620 | | |
| CONTE ADDITI | - | | | | | — | | | | | |
| II | CHANGING AMOUN | T OF INSURAN | CE, ENTER NEW | TOTAL AM | OUNT BI | ELOW | PAYMENT OPTION: | SUBTOTAL | | 830 | |
| Bl | JILDING COVER | RAGE | CON | TENTS C | OVER | AGE | CREDIT CARD | DEDUCT. DISCOUNT/SUF | _ | | |
| BASIC | ADDITIONAL | TOTAL | BASIC | ADDITIC | ONAL | TOTAL | | SUBTOTAL | | 830 | |
| | _ | 100,000 | 00,000 | | _ 0 | | | ICC PREMIUM | | | |
| | | | | | | | | SUBTOTAL | | 830 | |
| IF RETU | RN PREMIUM, MA | AL REFUND T | O: 🗌 INSURE | D 🗌 AG | ENT | 🗌 PAYOR. TI | HE ABOVE | CRS PREMIUM | DISCOUNT% | _ | |
| STATEN | IENTS ARE CORR | ECT TO THE | BEST OF MY 🖌 | NOWLED | GE. I L | JNDERSTAND | THAT | SUBTOTAL | | 830 | |
| | SE STATEMENTS | - | NISHABLE BY I | FINE OR IN | MPRISC | ONMENT UND | ER | PREMIUM PRE | VIOUSLY PAID | | |
| APPLICABLE FEDERAL LAW. (Excludes Probation Surcharge/ Federal Policy Fee) | | | | | | | | | | | |
| | | | | | | | | DIFFERENCE | <u>-</u> (+/-) | -1,620 | |
| SIGNATU | RE OF INSURED AN | D DATE SIGN | NATURE OF INSU | JRANCE AG | ENT/BR | OKER DAT | E (MMDDYY) | PRO RATA FAC | TOR | .151 | |
| | | | | | | | | TOTAL | (+/-) | -245 | |

REDUCING BUILDING COVERAGE

- Policy term is December 1, 2009-2010
 - Single family dwelling, with basement
 - Regular Program, Zone B, Post-FIRM
 - Policy limits: Building \$150,000/Contents \$0
- A wing of the building was destroyed by fire on July 1, 2010, and the building was repaired without the wing, reducing the value of the dwelling to \$100,000. (This explanation should be recorded in the Reason for Change section of the General Change Endorsement form.)
- Present rates are: Building .89/.30.
 - Endorsement effective date is July 1, 2010.
 - In Section A, enter the basic building amount (\$60,000) and the applicable rate (.89).
 - In Section B, enter the new additional building amount at the same rate of .30.

- Add Sections A and B to obtain the New Premium Totals.
- Add the New Premium Totals to obtain the Premium Subtotal.
- The Premium Previously Paid is \$804 (excluding Probation Surcharge/Federal Policy Fee), which is the total current annual premium including ICC premium.
- Add ICC Premium.
- Subtract the Premium Previously Paid from the Premium Total to obtain the Difference (should be additional/return premium).
- Prorate the Difference.

Time period is July 1, 2010, to December 1, 2010 Number of days is 212 Pro rata factor is .581

| | IRANCE ERAGE | | | TION A COVERAGE | | + INCREASED - | NEW PREMIUM TOTALS | | | | |
|---|------------------------|--|--------------|--------------------|-------------|---------------|-------------------------------------|--------------------------|-----|--|--|
| | | AMOUNT | RAT | E PR | EMIUM | AMOUNT RATE | | PREMIUM | | | |
| BUILDING | BASIC | 60,00 | 0.89 |) | 534 | 0 | — | — | 534 | | |
| | BUILDING ADDITIONAL | | 0.30 |) | 270 | -50,000 | .30 | -150 | 120 | | |
| CONTENT | 'S BASIC | | | | | _ | _ | | | | |
| CONTENT ADDITION | ONTENTS DDITIONAL | | | | | | _ | | | | |
| IF C | CHANGING AMOUN | MOUNT OF INSURANCE, ENTER NEW TOTAL AMOUNT BELOW PAYMENT OPTION: SUBTOTAL | | | | | | | | | |
| BUI | LDING COVER | AGE | CON | TENTS COVER | AGE | CREDIT CARD | DEDUCT. DISCOUNT/SUI | RCHARGE | | | |
| BASIC | ADDITIONAL | TOTAL | BASIC | ADDITIONAL | TOTAL | | SUBTOTAL | | 654 | | |
| 60,000 | 40,000 | 100,000 | | | _ | | ICC PREMIUM | | 6 | | |
| | | | | | | | SUBTOTAL | | 660 | | |
| IF RETURN | PREMIUM, MAIL | REFUND TO: | INSURED | AGENT | PAYOR. THE | ABOVE | CRS PREMIUM | DISCOUNT% | | | |
| STATEMEN | TS ARE CORREC | CT TO THE BE | ST OF MY KNO | OWLEDGE. I UNI | DERSTAND TH | HAT | SUBTOTAL | | 660 | | |
| - | STATEMENTS N | | HABLE BY FIN | E OR IMPRISON | MENT UNDER | | PREMIUM PRE | VIOUSLY PAID | | | |
| APPLICABL | E FEDERAL LAW | Ι. | | | | | (Excludes Proba Federal Policy F | ation Surcharge/ Fee) | 804 | | |
| DIFFERENCE (+/-) | | | | | | | | | | | |
| SIGNATURE OF INSURED AND DATE SIGNATURE OF INSURANCE AGENT/BROKER DATE (MMDDYY) PRO RATA FACTOR | | | | | | | | | | | |
| | | | | | | | TOTAL | (+/-) | -84 | | |

INCREASING DEDUCTIBLE

- Policy term is January 15, 2010-2011
 - Single family dwelling
 - Emergency Program (Pre-FIRM)
 - Current policy limits: Building \$35,000/Contents
 \$10,000
- Policy deductible: \$2,000/\$2,000
 - Insured requests to increase deductible to \$4,000/\$2,000 (.900), effective April 15, 2010. (This explanation should be recorded in the Reason for Change section of the General Change Endorsement form.)
- Present rates are: Building .76, Contents .96.
 - Enter the current building and contents coverage in Section A, and enter the applicable rates.

- Add Sections A and B to obtain the New Premium Totals.
- Add the New Premium Totals to obtain the Premium Subtotal.
- The Premium Previously Paid is \$422 (excluding ICC*, and Probation Surcharge/Federal Policy Fee), which is the total current annual premium from Section A.
- Calculate the Deductible Discount amount and enter that amount in the block marked Difference.
- Prorate the Difference.

Time period is April 15, 2010, to January 15, 2010 Number of days is 90 Pro rata factor is .753

*ICC-N/A in Emergency Program

| | SURANCE OVERAGE | | CUR | SECTION RENT COV | | | + INCREASED - | NEW PREMIUM TOTALS | | |
|---|--------------------|--------------|------------|---------------------|-----------|-------------|--------------------|-------------------------------------|--------------------------|------|
| | | AMOL | JNT | RATE | PR | EMIUM | AMOUNT | RATE | PREMIUM | |
| BUILDI | NG BASIC | 35,0 | 00 | .76 | | 266 | 0 | | _ | 266 |
| BUILDI ADDITI | - | _ | | | — | | — | — | — | _ |
| CONTE | NTS BASIC | 10,0 | 00 | .96 | | 96 | 0 | _ | _ | 96 |
| CONTE ADDITI | - | _ | - | | | — | | — | _ | |
| IF | CHANGING AMOUN | IT OF INSURA | NCE, ENTER | R NEW TOTA | | BELOW | PAYMENT OPTION: | SUBTOTAL | • | 362 |
| BU | JILDING COVER | AGE | C | ONTENT | 'S COVER | AGE | | DEDUCT. DISCOUNT/SUF | RCHARGE | -36 |
| BASIC | ADDITIONAL | TOTAL | BASIC | | | TOTAL | | SUBTOTAL | | 326 |
| | | | | | | | | ICC PREMIUM | | N/A |
| | | | | | | | | SUBTOTAL | | 326 |
| IF RETU | IRN PREMIUM, MA | AIL REFUND | | SURED | AGENT | PAYOR. 1 | HE ABOVE | CRS PREMIUM | DISCOUNT% | |
| STATEN | IENTS ARE CORF | RECT TO TH | E BEST OF | MY KNOW | VLEDGE. I | UNDERSTANI | O THAT | SUBTOTAL | | 326 |
| | LSE STATEMENTS | | JNISHABLI | E BY FINE | OR IMPRIS | SONMENT UNI | DER | PREMIUM PRE | VIOUSLY PAID | |
| APPLICA | ABLE FEDERAL L/ | AW. | | | | | | (Excludes Proba Federal Policy F | ation Surcharge/ Fee) | 422 |
| | | | | | | | | DIFFERENCE | (+/-) | -96 |
| SIGNATURE OF INSURED AND DATE SIGNATURE OF INSURANCE AGENT/BROKER DATE (MMDDYY) PRO RATA FACTOR | | | | | | | | | | .753 |
| | | | | | | | | TOTAL | (+/-) | -72 |

THIS LAYOUT OF THE REVISED GENERAL CHANGE ENDORSEMENT IS PROVIDED FOR YOUR REFERENCE. THE FINAL FORM IS AWAITING OMB APPROVAL AND NOT YET AVAILABLE.

| | | | | | | | | | POLICY NUM | BER |
|---------------------|--|---|--|---|--|-------------|-------------------------------|---|--|----------------------------------|
| _ | | | | IMPORTANT- | PLEASE PI | AINT OR T | YPE | | | |
| POLICY TERM | REASON FOR CHANGE: (ATTACH MEMO IF ADDITIONAL SPACE I DIRECT BILL INSTRUCTIONS: BILL INSURED BILL FIRST | MORTGAGEE | POLICY PERIOD IS F 12:01 A.M. LOCAL TI | ME AT THE INSU | | | TOTO | | | TION-NO WAITING |
| 2F | BILL SECOND BILL LOSS MORTGAGEE BILL OTHER NAME, ADDRESS OF LICENSED PROPER | | ENDORSEMENT EFFE | I MAP | | IE CHANG | (FOR ADDED CON | L TO SFHA)-ONE DAY /ERAGE , DETERMINE THE / ING ADDRESS, AND TELEP | APPROPRIATE WAIT | ING PERIOD) |
| z | INSURANCE AGENT OR BROKER: | RIT OR CASUAL | AGENCY | | YES IN N | 0 | NAME, MAIL | ING ADDRESS, AND TELEP | HONE NO. OF INSUR | |
| AGENT | | | | TAX ID # : ENT ⊻YES | NO NO | | CODEWAN | | | |
| NFO | PHONE NO: FAX 1 | NO: | IFYES, THE | INSURED MU | ST SIGN TH | | L | | | |
| DISAS. ASSIST. | IS INSURANCE REQUIRED FOR DISA IF YES, CHECK THE GOVERNMEN OTHER (SPECIFY): ENTER CASE FILE NUMBER | IT AGENCY: [| SBA FE | | IS INSURED PROPERTY LOCATION SAME AS INSURED'S MAILING ADDRESS? | | | | | |
| | NAME AND ADDRESS OF FIRST MC | RTGAGEE | | | | IF SEC | | EE, LOSS PAYEE OR OT | | LLED, COMPLETE |
| FIRST | | | | | | | ND MORTGAGEE OTHER, PLEASE | DISASTER AGEN SPECIFY: | CY LOSS PA | YEE |
| -S | LOAN NO: PHONE NO.: | EAT | X NO.: | | | | NO.: | | 0210 | |
| | RATING MAP INFORMATION | PA | A NO.: | | <u> </u> | | NE NO .: | FAX N | NO.: ES, 🗌 BUILT IN | COMPLIANCE ? |
| VTINUMITY | NAME OF COUNTY/ PARISH COMMUNITY NO. / PANEL NO. AND FIRM ZONE | | | + | | | CONTINUOUS C | OVERAGE ? PRIOR | POLICY NO ND SUFFIX | |
| WO | COMMUNITY PROGRAM TYPE IS: IS INSURED BUILDING OWNED BY | and the second se | | | | | RENT FIRM ZON | and the second se | ENT BFE | <u> </u> |
| | BUILDING OCCUPANCY | NUMBER OF FL | OORS IN ENTIRE | CONDO FO | RM OF OW | | IS BUILDING | IN THE COURSE OF | BUILDING USE | 5 |
| | SINGLE FAMILY | BASEMENT/ENC | G (INCLUDE IT/ENCLOSED AREA, IF ANY) | | | FOR: | | TION! YES N NO | and the second sec | USE/BUILDING |
| | OTHER RESIDENTIAL | | | | | | G Y YES N | NO DETACHED G | | |
| 15 | NON-RESIDENTIAL (INCLUDING HOTEL/MOTEL) | | e 🗌 split level Jse/rowhouse | RESIDENTIA | RESIDENTIAL CONDOMINIUM BUILDING ASSOCIATION POLICY ONLY : TOTAL NUMBER OF UNITS | | | OVER WATER? | AGRICUL | I UKAL BUILDING |
| BUILDING | BASEMENT/ENCLOSURE/ | 1 | WRISE ONLY) | 100000000000000000000000000000000000000 | | | | | POOLHO | USE, CLUBHOUSE, |
| | CRAWLSPACE | | TURED (MOBILE) | | NCLUDE N | | TS PARTIAL ENTIREL | | TOOL/STO | ION BUILDING DRAGE SHED |
| 8 | NONE FINISHED BASEMENT/ENCLOSURE | FOUNDATIO | VELTRAILER ON ON | | | | IS BUILDING | | | |
| | UNFINISHED BASEMENT/ENCLOSURE | | | | | | | REA BELOW IS: | | |
| | CRAWLSPACE | | E FAMILY DWELLING | ESTIMATED REPLACEMENT COST AMOUNT \$ | | | | - FREE OF ODDIRUCTION | | CTURED (MOBILE) PLETE PART 2, |
| | | | INUMBER OF OCCUPANCIES IS BUILDING INSUR IITS) IS IS BUILDING INSUR DENCE? Y YES | | | | RESI- IF ELEVATED, | COMPLETE PART 2 OF INSURANCE APPLICATIO | INCLIDANCE | OF THE FLOOD APPLICATION. |
| 2 | CONTENTS LOCATED IN: | | | | LOWEST | FLOOR AB | OVE GROUND LEVI | EL AND HIGHER | | Y |
| CONTENTS | BASEMENT/ENCLOSURE | VE | | | | | EVEL MORE THAN C | | | |
| No | LOWEST FLOOR ONLY ABOVE GR | | | | (IF SINGLI | e family, c | ONTENTS ARE RAT | ED THROUGHOUT THE BL | JILDING) | |
| | IS PERSONAL PROPERTY HOUSEHOLD | | | | | | | | | |
| | ALL BUILDINGS: (CHECK ONE OF THE BUILDING PERMIT DATE | FIVE BLOCKS AN | | | | | | IN A MOBILE HOME PARK | | DATE |
| ¥ | | | | | | | | RK OR SUBDIVISION FACI | | DAIL |
| DA | SUBSTANTIAL IMPROVEMENT DAT | E | | | | | | OUTSIDE A MOBILE HOM | PARK - | // (MM/DD/YYYY) |
| CONSTRUCTION DATA | IS BUILDING POST-FIRM CONSTRUCTION | N MYES N N | | DIVISION: DATI | E OF PERM | ANENT PL | AGEMENT | | l | |
| SUC | IF POST-FIRM CONSTRUCTION IN ZOM | | | | | | | | | |
| ILSN | BUILDING DIAGRAM NUMBER | | LOWEST ADJACENT | | | | ELEVATION CERTIF | | | E FLOOD INSURANCE |
| 8 | LOWEST FLOOR ELEVATION | | | | | | | | YES N NO | MANUAL FOR CERTIFICATION FORM |
| | DEDUCTIBLE: BUILDING \$ | c | ONTENTS \$ | | _ | DEDUCTIB | LE BUYBACK? | ES N NO | | |
| | т | D INCREASE/DEC | REASE COVERAGE, CO | OMPLETE SECTION | | | | COMPLETE SECTION A O | NLY. | |
| | INSURANCE COVERAGE | | | TION A COVERAGE | | | | SECTION B | | NEW PREMIUM |
| ING | | AMO | | LATE | PREM | IUM | AMOUNT | RATE | PREMIUM | |
| RAT | BUILDING BASIC BUILDING ADDITIONAL | | | | | | | | | |
| Q | CONTENTS BASIC | | | | | | | | | |
| COVERAGE AND RATING | CONTENTS ADDITIONAL IF CHANGING AMOUN | T OF INCIDENCE | | AMOUNT OF | CW. | | PAYMENT | SUBTOTAL | | |
| ERAC | IF CHANGING AMOUN | IT OF INSURANC | T | APICONT BEL | 011 | | | DEDUCT. DISCOUNT/SURCHARGE | | |
| NO | BUILDING COVERAGE | | cor | NTENTS COVE | RAGE | | | D SUBTOTAL ICC PREMIUM | | |
| | BASIC ADDITIONAL | TOTAL | BASIC | ADDITIONAL | TO | TAL | | | | |
| | | | | | | | | CRS PREMIUM DISC SUBTOTAL | | |
| w. | IF RETURN PREMIUM, MAIL REFUND TO | | | OR. THE ABON | VE STATEME | | CORRECT TO THE | PREMIUM PREVIOU | | |
| ITUR | BEST OF MY KNOWLEDGE. I UNDERST UNDER APPLICABLE FEDERAL LAW. | AND THAT ANY I | FALSE STATEMENTS N | 1AY BE PUNISH | ABLE BY FI | INE OR IM | PRISONMENT | (Excludes Probation Se Federal Policy Fee) | ircharge/ | |
| SIGNATURE | | | | | | | | DIFFERENCE | | +/-) |
| ^s | SIGNATURE OF INSURED AND DA | TE | SIGNATURE OF INSU | RANCE AGENT | /BROKER | - | DATE (MM/DD/YYY | PRO RATA FACTOR | | +/.3 |

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