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**

<table>
<thead>
<tr>
<th>Step</th>
<th>Decision</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Initial Determinations</strong></td>
<td>Community Information</td>
<td>• Participating versus Non-Participating</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Emergency versus Regular Program</td>
</tr>
<tr>
<td></td>
<td>Building</td>
<td>• Meets the definition of an eligible building</td>
</tr>
<tr>
<td></td>
<td>Amount and Type of Coverage</td>
<td>• Building coverage, contents coverage, or both</td>
</tr>
<tr>
<td></td>
<td>Application Form to Use</td>
<td>• Flood Insurance Application</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Preferred Risk Policy and Newly Mapped Application</td>
</tr>
<tr>
<td><strong>Gather Preliminary Rating Information</strong></td>
<td>Property Location</td>
<td>• Street address</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Legal description</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Geographic location</td>
</tr>
<tr>
<td></td>
<td>Flood Zone</td>
<td>• Special Flood Hazard Area (SFHA) zones are:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Non–SFHA zones are: B, C, X, D</td>
</tr>
<tr>
<td></td>
<td>Date of Construction</td>
<td>• Pre-FIRM</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Post-FIRM</td>
</tr>
<tr>
<td></td>
<td>Rating Considerations</td>
<td>• Preferred Risk Policy (PRP)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Newly Mapped rating procedure</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Post-FIRM (Full Risk)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Optional Post-FIRM Rating</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Grandfathering</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Pre-FIRM</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Pre-FIRM subsidized</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Residential Condominium Building Association Policy (RCBAP)</td>
</tr>
<tr>
<td></td>
<td>Building Occupancy</td>
<td>• Single family</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• 2–4 family</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Other residential</td>
</tr>
<tr>
<td></td>
<td>Primary Residence</td>
<td>• Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• No</td>
</tr>
</tbody>
</table>
### Table 1. Rating a Flood Insurance Policy  
*continued*

<table>
<thead>
<tr>
<th>Step</th>
<th>Decision</th>
<th>Options</th>
</tr>
</thead>
</table>
| Gather Preliminary Rating Information        | 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 |
|                                               |                                                                          |                                                                                                                                          |
| 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     | Calculate difference between Lowest Floor Elevation (LFE) and Base Flood Elevation (BFE) or grade elevation | • Building LFE  
• BFE or grade elevation                                                                                                                                 |
| with an EC                                    |                                                                          |                                                                                                                                          |
| Determine Premium                             | Calculate premium and add fees, surcharges, etc.                         | • Standard-rated policy  
• PRP  
• Newly Mapped rating procedure  
• RCBAP  

**Note:** Instructions for 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 Condominiums heading in this section for the basic insurance limits and maximum amount of insurance available under the RCBAP.

---

**NOTE**

If the building’s value is less than the minimum deductible available, then the amount of any building loss will be less than the minimum deductible.
3. How To Write

Table 2. Maximum Amount of Insurance Available for the Emergency and Regular Programs

<table>
<thead>
<tr>
<th>Building Occupancy</th>
<th>Building Coverage</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Emergency Program</td>
<td>Regular Program Basic Insurance Limits</td>
<td>Regular Program Additional Insurance Limits</td>
<td>Regular Program Total Insurance Limits</td>
</tr>
<tr>
<td>Single-Family Dwelling</td>
<td>$35,000³</td>
<td>$60,000</td>
<td>$190,000</td>
<td>$250,000</td>
</tr>
<tr>
<td>2–4 Family Building</td>
<td>$35,000³</td>
<td>$60,000</td>
<td>$190,000</td>
<td>$250,000</td>
</tr>
<tr>
<td>Other Residential Building</td>
<td>$100,000⁵</td>
<td>$175,000</td>
<td>$325,000</td>
<td>$500,000</td>
</tr>
<tr>
<td>Non-Residential Building (including Business Buildings and Other Non-Residential Buildings)⁴</td>
<td>$100,000⁵</td>
<td>$175,000</td>
<td>$325,000</td>
<td>$500,000</td>
</tr>
</tbody>
</table>

| Contents Coverage | | | | |
| Residential Property⁶ | $10,000 | $25,000 | $75,000 | $100,000 |
| Non-Residential Business, Other Non-Residential Property⁴ | $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 heading in this section for the basic insurance limits and maximum amount of insurance available under the RCBAP.
3. In Alaska, Guam, Hawaii, and the 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 the U.S. Virgin Islands, the amount available is $150,000.
6. The Residential Property occupancy category includes the Single Family, 2–4 Family, Other Residential, and Residential Condominium occupancies.

3. Application Forms

Write a policy using one of two different application forms, selecting the appropriate form based on the guidance below.

- 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 an SFHA (zones B, C, X, D), or in an AR or A99 zone on the current effective Flood Insurance Rate Map (FIRM) that are eligible for 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 headings in this section for eligibility requirements.
3. How To Write

B. Preliminary Rating Information

1. Determine the 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.

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 may include 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 (some of which are available at the FEMA Flood Map Service Center at https://msc.fema.gov/portal/home):

- FIRM;
- Standard Flood Hazard Determination Form (SFHDF);
- Letter of Determination Review (LODR);
- EC;
- Letter of Map Amendment (LOMA); or
- Letter of Map Revision (LOMR).
The rating process defines flood zones as either SFHAs or non-SFHAs.

- **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 SFHDF 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**

<table>
<thead>
<tr>
<th>Manufactured (Mobile) Home/Travel Trailer Location</th>
<th>Determine Construction Date</th>
</tr>
</thead>
</table>
| **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. |

**NOTE**

4. Substantial Improvement

The agent must confirm if a local community official has declared the building substantially improved and, if so, the substantial improvement date.

a. Post-FIRM

For buildings that were originally Post-FIRM construction, 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

For buildings that were originally Pre-FIRM construction, 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 premiums/coverage.

Table 4. Types of Rating

<table>
<thead>
<tr>
<th>Rating Type</th>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRP or Newly Mapped Rating</td>
<td>PRP • Buildings in a B, C, X, AR, or A99 Zone.</td>
</tr>
<tr>
<td></td>
<td>Newly Mapped • Buildings recently mapped into an SFHA other than Zone AR or A99.</td>
</tr>
<tr>
<td></td>
<td>Both PRP and Newly Mapped • Must meet eligibility requirements.</td>
</tr>
<tr>
<td></td>
<td>• Not available for condominium associations.</td>
</tr>
<tr>
<td></td>
<td>• See the PRP and Newly Mapped headings later in this section.</td>
</tr>
<tr>
<td>Pre-FIRM Subsidized Rating</td>
<td>Eligible Pre-FIRM buildings.</td>
</tr>
<tr>
<td></td>
<td>• Insurers should use full-risk rates for Pre-FIRM buildings ineligible for Pre-FIRM subsidized rates because of a lapse in coverage.</td>
</tr>
<tr>
<td></td>
<td>• Refer to Table 6, Pre-FIRM Subsidized Rates Ineligibility Determination in this section, to determine eligibility for Pre-FIRM subsidized rates.</td>
</tr>
</tbody>
</table>
### 3. How To Write

#### Table 4. Types of Rating continued

<table>
<thead>
<tr>
<th>Rating Type</th>
<th>Requirements</th>
</tr>
</thead>
</table>
| **Optional Post-FIRM Rating for a Pre-FIRM Building** | • Full-risk rates may be lower than Pre-FIRM subsidized rates for Pre-FIRM buildings located in SFHAs.  
• Insured may submit an EC and request full-risk rating for:  
  – Pre-FIRM buildings located in an SFHA;  
  – Pre-FIRM buildings located in an AR or AR Dual Zone.  
**Note:** See the Floodproofing and Elevation Certificate forms and instructions in Appendix B: Forms. |
| **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; or  
• Continuous coverage.  
**See Table 5 for more details.** |
| **Submit for Rate**                              | **See the Submit-for-Rate heading in this section.** 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

When a FIRM is revised and republished, new or existing policyholders affected by changes to the BFE and/or flood zones may be eligible for grandfathering. Grandfathering gives policyholders the option of having their premium rate determined using either the rating criteria for that property under the current effective FIRM (new map) or the BFE and/or flood zone on a prior FIRM (old map). Insurers should choose the rating method that provides the most favorable premium or flood coverage to the insured. Buildings built in compliance with the FIRM in effect at the time of construction may be eligible for “built-in-compliance” grandfathering. Buildings that have had continuous NFIP flood insurance coverage may be eligible for “continuous coverage” 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

<table>
<thead>
<tr>
<th>Type</th>
<th>Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Built-in-Compliance</td>
<td>Buildings built in compliance with the FIRM in effect at the time of construction</td>
</tr>
</tbody>
</table>

In an elevated building, an enclosure below the elevated floor must be compliant with the FIRM in effect at the time of construction. An enclosure with the lowest floor at or above the BFE at the time of construction is compliant. An enclosure with the lowest floor below the BFE (for example, the lowest floor is 0.1 to 0.5 feet below the BFE) at the time of construction is not compliant if any of the following conditions exist (see the Enclosures heading in this section):

- The enclosure is finished;
- The enclosure is used for other than parking, storage, or building access;
- For A zones, the enclosure does not have proper openings;
- For V zones, the enclosure does not have breakaway walls; or
- For V zones, there is machinery and equipment below the elevated floor.

**Note:** Do not apply the rounding rule first to determine grandfathering eligibility.

<table>
<thead>
<tr>
<th>Type</th>
<th>Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuous Coverage</td>
<td>Continuous coverage under the NFIP maintained on the building</td>
</tr>
</tbody>
</table>

- 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.
- Condominium unit owners are eligible for continuous coverage grandfathering if the condominium association has maintained a master policy.
- Policy assignment does not affect eligibility.

**Note:** In addition to removing eligibility for continuous coverage grandfathering, a policy lapse may impact 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 EC, or a certified SFHDF.
- 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:
3. How To Write

- 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 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 the community's reinstatement as a participating NFIP community.

**Note:** This restriction applies to all lapses that occur on or after April 1, 2016.

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

### Table 6. Pre-FIRM Subsidized Rates Ineligibility Determination\(^{1,2}\)

<table>
<thead>
<tr>
<th>Was there a prior NFIP policy for this property in the insured’s name?</th>
<th>Did a lender require the prior NFIP policy?</th>
<th>Did the prior NFIP policy lapse while required by a lender?</th>
<th>Was the lapse the result of a community suspension?</th>
<th>Was the community reinstated within the last 180 days?</th>
<th>Eligible for Pre-FIRM subsidized rates?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

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 in part 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

<table>
<thead>
<tr>
<th>Occupancy</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Family</td>
<td>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 non-residential uses within the unit are limited to less than 50 percent of the unit’s total floor area. Examples of non-residential 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. <strong>Note:</strong> A residential building or unit rented out short term or seasonally is considered residential.</td>
</tr>
<tr>
<td>2–4 Family</td>
<td>A residential building containing 2–4 residential units, with non-residential 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.</td>
</tr>
<tr>
<td>Other Residential</td>
<td>A residential building containing 5 or more residential units, with non-residential uses limited to less than 25 percent of the building’s total floor area. This category includes the following buildings where the normal occupancy of a guest is 6 months or more: • Dormitories; • Assisted-living facilities; • Condominium buildings; • <strong>Cooperative buildings:</strong> • Apartment buildings; • Hotels and motels; • Tourist homes; and • Rooming houses. <strong>Note:</strong> Condominium associations may be eligible for the RCBAP. Refer to the Condominium heading in this section for more information.</td>
</tr>
</tbody>
</table>
### Table 7. Building Occupancy Types continued

<table>
<thead>
<tr>
<th>Occupancy</th>
<th>Definition</th>
</tr>
</thead>
</table>
| **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 non-residential 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;  
  - Agricultural structures;  
  - Garages;  
  - Pool houses;  
  - Clubhouses; and  
  - Recreational buildings.  
A small business cannot use this category. |

**NOTE**

The occupancy for manufactured homes and travel trailers eligible for NFIP coverage (see the Types of Eligible Buildings the NFIP Insures heading in Section 2) may be residential or non-residential depending on their use.

### 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:

**NOTE**

Insurers can submit requests to FEMA seeking single-building determinations for complex structures with multiple building owners.
> 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.
3. How To Write

b. Documentation of Primary Residence

If the policy or application indicates that coverage is for a primary residence, the insurer must verify that the address is the primary residence. When the mailing address and the property address match, that provides sufficient verification and no further documentation is required. If the addresses do not match, the insurer must obtain supporting documentation. The 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

For more information regarding ECs, please refer to the Certifications heading in this section.

1. 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.
3. How To Write

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 (LAG) (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

<table>
<thead>
<tr>
<th>Type of Wall</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundation walls</td>
<td>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.</td>
</tr>
<tr>
<td>Shear walls</td>
<td>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.</td>
</tr>
<tr>
<td>Piers, posts, piles, and columns</td>
<td>This includes reinforced masonry piers, concrete piers or columns.</td>
</tr>
</tbody>
</table>

2. Enclosures

An enclosure is the portion of an elevated building below the lowest elevated floor partially or fully enclosed by rigid walls. 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 and next to an elevated building with the enclosure floor lower than the elevated floor; or
- An enclosed crawlspace below the lowest elevated floor.
FEMA does not consider an enclosed area below the lowest elevated floor to be an enclosure if all the following criteria are met:

- It is the minimum size necessary to protect the building’s utilities (i.e., plumbing, pipes, wiring, HVAC supply/return lines);
- It is constructed with flood damage resistant materials;
- There are no mechanical or electrical equipment inside the enclosed area; and
- There is not enough space for a person to enter into the enclosed area.

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:
  - For an enclosure’s walls to qualify as breakaway walls, they 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 or its supporting foundation system as a result of failure.

b. Finished or Unfinished 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.

FEMA considers an enclosure that complies with NFIP flood damage-resistant materials regulations (44 CFR 60.3(a)(3)) to be an unfinished enclosure. See FEMA Technical Bulletin 2, “Flood Damage-Resistant Materials Requirements.”

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.
3. How To Write

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, there must be 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. Engineered Openings Certified by a Design Professional

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. FEMA Technical Bulletin 1-08, “Openings in Foundation Walls and Walls of Enclosures below Elevated Buildings in Special Flood Hazard Areas” provides technical guidance for these 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 Certified by the International Code Council Evaluation Service

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 each specific engineered opening product (make and model) that it certifies, specifying 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. Reference the evaluation report information to confirm whether the engineered openings satisfy the proper openings requirement. Examples of documentation that can be used are:

- Documentation to confirm installation 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
- An EC may have information that confirms the use of engineered openings.

FEMA Technical Bulletin 1-08, “Openings in Foundation Walls and Walls of Enclosures below Elevated Buildings in Special Flood Hazard Areas” provides technical guidance for these requirements.
3. How To Write

3. Building Partially or Entirely Over Water

a. Buildings Entirely Over Water

Follow Submit-for-Rate procedures in this section if the building is located entirely over water (i.e., entirely in, on, or over water or seaward of mean high tide) and was not constructed or substantially improved after September 30, 1982. 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, then the property owner must establish eligibility for NFIP coverage by submitting all of the following documentation:

- 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 (regardless of any changes in the ownership of the building), or from the date of construction if less than 1 year.

b. 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 construction, it is eligible for Pre-FIRM subsidized rates or optional full-risk rates under the Submit-for-Rate procedure. Refer to the Before You Start section of this manual for information on coverage the NFIP provides for such buildings.

c. Boathouses Located Partially Over Water

When rating a boathouse located partially over water, 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. Refer to the Before You Start section of this manual for information on coverage the NFIP provides for such buildings.

D. Determine Type of Rating

1. Rating without an EC

The NFIP does not require an 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.
3. How To Write

a. Non-Elevated Building without an EC

The rating classes for non-elevated buildings rated without an EC 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 without an EC

<table>
<thead>
<tr>
<th>Rating Class</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Basement</td>
<td>Non-elevated building without a basement or subgrade crawlspace with slab-on-grade foundation.</td>
</tr>
<tr>
<td>With Basement</td>
<td>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.</td>
</tr>
<tr>
<td>Non-elevated with Subgrade Crawlspace</td>
<td>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 LAG (ground) level on all sides.</td>
</tr>
</tbody>
</table>

b. Elevated Building without an EC

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.

Note: FEMA considers an enclosure that complies with NFIP flood damage-resistant materials regulations (44 CFR 60.3(a)(3)) to be an unfinished enclosure. See FEMA Technical Bulletin 2, “Flood Damage-Resistant Materials Requirements.”

Table 10. Rating Classes for Elevated Buildings without an EC

<table>
<thead>
<tr>
<th>Rating Class</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Enclosure</td>
<td>An elevated building with no enclosure below the lowest elevated floor. Use the No Enclosure rates if the Enclosures heading in this section:</td>
</tr>
<tr>
<td></td>
<td>• There is no enclosure below the lowest elevated floor;</td>
</tr>
<tr>
<td></td>
<td>• The area below the lowest elevated floor is enclosed by lattice or screening; or</td>
</tr>
<tr>
<td></td>
<td>• The enclosure has proper flood openings.</td>
</tr>
<tr>
<td>With Enclosure</td>
<td>An elevated building with an enclosure (including garage, elevator shaft) below the lowest elevated floor.</td>
</tr>
<tr>
<td></td>
<td>Use the With Enclosure rates if any of the following conditions exists:</td>
</tr>
<tr>
<td></td>
<td>• The enclosure is finished;</td>
</tr>
<tr>
<td></td>
<td>• The enclosure is unfinished and does not have proper openings;</td>
</tr>
<tr>
<td></td>
<td>• The enclosure is used for other than building access, parking, or storage; or</td>
</tr>
<tr>
<td></td>
<td>• There is an elevator below the lowest elevated floor.</td>
</tr>
<tr>
<td>Elevated on Crawlspace</td>
<td>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.</td>
</tr>
</tbody>
</table>
3. How To Write

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

<table>
<thead>
<tr>
<th>Rating Class</th>
<th>Description</th>
</tr>
</thead>
</table>
| 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. EC 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 LFE of the building to the BFE or grade elevation to establish an elevation difference. Additional information about ECs and determining the elevation difference is included in this section of the manual. See Appendix C: Lowest Floor Guide for additional information.

a. Non-Elevated Building Rated with EC

The LFE used for rating a non-elevated building with an EC is the elevation of the building’s lowest floor, including basement or subgrade crawlspace. Refer to Table 11.

In V zones, the LFE used for rating is the 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.
3. How To Write

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

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attached garage</td>
<td>In any zone beginning with the letter “A” where the floor of the attached garage is below the top of the bottom floor of the building:</td>
</tr>
<tr>
<td></td>
<td><strong>Single Family (including a condominium unit within a multi-unit residential building that qualifies as a single building)</strong></td>
</tr>
<tr>
<td></td>
<td>• The garage floor can be excluded from rating in the following situations:</td>
</tr>
<tr>
<td></td>
<td>– The garage floor is at or above the BFE;</td>
</tr>
<tr>
<td></td>
<td>– The garage has proper openings (see the Proper Flood Openings Requirement heading in this section);</td>
</tr>
<tr>
<td></td>
<td>– The garage is below the BFE and there is no machinery or equipment; or</td>
</tr>
<tr>
<td></td>
<td>– The garage has machinery or equipment below the BFE, and the garage has proper openings.</td>
</tr>
<tr>
<td>All Other Occupancies</td>
<td>• Use the garage floor as the lowest floor for rating when the garage floor is below the bottom floor of the building.</td>
</tr>
<tr>
<td>Basement</td>
<td>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.</td>
</tr>
<tr>
<td>Subgrade crawlspace</td>
<td>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 LAG on all sides.</td>
</tr>
</tbody>
</table>

**b. Elevated Building Rated with EC**

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

**Note:** FEMA considers an enclosure that complies with NFIP flood damage-resistant materials regulations (44 CFR 60.3(a)(3)) to be an unfinished enclosure. See FEMA Technical Bulletin 2, “Flood Damage-Resistant Materials Requirements.”

**Any Flood Zone Beginning with A**

For buildings located in any flood zone beginning with A, the LFE 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 characteristics of the enclosure area determine what elevation to use.

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

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Enclosure</td>
<td>Use the elevation of the lowest elevated floor if:</td>
</tr>
<tr>
<td></td>
<td>• There is no enclosure below the lowest elevated floor;</td>
</tr>
<tr>
<td></td>
<td>• The area below the lowest elevated floor is enclosed by lattice or screening; or</td>
</tr>
<tr>
<td></td>
<td>• The enclosure has proper flood openings (see the Proper Flood Openings Requirement heading in this section).</td>
</tr>
</tbody>
</table>
### Table 12. Elevated Buildings in A Zones Rated with an EC  
**continued**

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
</tr>
</thead>
</table>
| **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 (see the Enclosures heading in this section):  
    - The enclosure is finished;  
    - The enclosure is unfinished and 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. |
| **Elevated on Crawlspace with Attached Garage** | For an elevated building on a crawlspace with an attached garage, the crawlspace and garage are separate enclosures if foundation walls separate the main building and garage. Use the lowest elevated floor as the LFE for rating if all the following conditions exist:  
  - Each enclosure is unfinished;  
  - Each enclosure is used only for parking, storage or access;  
  - Each enclosure has proper openings; and  
  - There is no elevator below the BFE.  
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 floor 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.  
**Note:** If a residential structure built on a crawlspace foundation has an attached garage and the garage floor is at the same elevation or below the crawlspace floor and the garage is converted into a living space, then the building is considered non-elevated and must be rated as non-elevated. The LFE for rating is the floor of the converted living area. |
| **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 the 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 LFE used for rating can be the lowest elevated floor when there is no enclosure, or the enclosure floor, depending on the characteristics of the enclosure area.

See Table 13 for how such characteristics determine what LFE to use. The LFE is measured from the bottom of the lowest horizontal structural member as identified on C.2.c on the EC.
Table 13. Elevated Buildings in V Zones Rated with an EC

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
</tr>
</thead>
</table>
| With Enclosure      | For an elevated building with an enclosure (including attached garage, elevator shaft) below the elevated floor:  
• Use the bottom of the enclosure floor as the LFE for rating if any of the following conditions exist (see the Enclosures heading in this section):  
  – The enclosure is used for other than parking, storage, and building access;  
  – The enclosure is finished;  
  – 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;  
  – The enclosure is constructed with breakaway walls but is more than 300 square feet in area; or  
  – The enclosure has load-bearing, supporting walls that provide more than 25% of the building’s structural support. |


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

| 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 V-Zone elevated buildings. 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) and the bottom of the elevated floor’s lowest horizontal structural member as the LFE for rating if all of the following conditions exist:  
• There is no elevator, machinery, or equipment below the BFE; and  
• There is no enclosure.  
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 LFE for rating, if all of the following conditions exist:  
• The enclosure is unfinished; |
3. How To Write

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

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
</tr>
</thead>
</table>
| **1981 Post-FIRM Elevated Buildings continued** | If there is an enclosure, use the Free of Obstruction rate table if all of the following conditions exist:  
- There is no elevator, machinery, or equipment below the BFE;  
- The walls of the enclosure are made of any of the following:  
  - Insect screening with no additional support;  
  - Wooden or plastic lattice with at least 40% of its area open and made with material no more than 1/2 inch thick;  
  - Wooden or plastic slats or shutters with at least 40% of their area open and made with material no more than 1 inch thick;  
  - One solid breakaway wall or a garage door with the remaining walls of the enclosure constructed with screening, lattice, slats, or shutters.  
Otherwise, use the With Obstruction rate table. |
| **Post-'81 V-Zone Optional Rating** | Elevated buildings in Zones VE and V1–V30 that are Pre-FIRM construction or 1975-1981 Post-FIRM V-Zone Elevated construction can, optionally, be rated using the 1981 Post-FIRM V-Zone rate tables (Table 3E or 3F in Appendix J) if the rates are more favorable to the insured.  
To qualify, all the following criteria must apply:  
- 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 and either:  
  - Be free of obstructions; or  
  - Have an enclosure of less than 300 square feet with breakaway walls and no other obstructions.  
**Note:** Any machinery or equipment located below the BFE are considered obstructions, requiring rating through the Submit-for-Rate procedures in this section. |

**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](https://www.fema.gov/media-library/assets/documents/34620).
E. Determine Elevation Difference

When determining the full-risk premium rate for a building in an SFHA, calculate the elevation difference in feet between the building’s LFE used for rating and the BFE, Base Flood Depth (BFD), or grade elevation, depending on the flood zone. Refer to the “Determine Type of Rating” heading in this section and Lowest Floor Guide in Appendix C of this manual to determine the building’s LFE for rating purposes.

For policies outside the SFHA or rated with Pre-FIRM subsidized rates, the NFIP does not require the elevation difference to identify a rate.

1. Guidelines for Elevation Datum Conversion

When determining the elevation difference, verify all elevation data used the datum reflected on the most current FIRM. 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 the elevation requiring conversion in the orthometric height field. If the elevation is in feet (most places other than Puerto Rico) make sure to enter “ft” after the elevation.
- Specify the datum of the entered elevation.
- The tool will then provide the conversion factor and the elevation in the other datum.

Conversion Example:

- 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 format specified by the tool.
- Enter the elevation requiring conversion to NAVD 88 and “ft” (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.

Alternatively, refer to the Flood Insurance Study or FIRM, which generally list datum conversion factors for specific NFIP communities.
3. How To Write

2. Elevation Truncation Rule
If any elevations (BFE, LFE, etc.) are shown in hundredths or greater (ex. 10.572), first truncate all decimals beyond tenths before calculating the elevation difference.

- If the LFE is 10.572 truncate the elevation to 10.5
- If the BFE is 8.45 truncate the elevation to 8.4

3. Elevation Difference Rounding Rule
If the elevation difference is shown in tenths (ex. 10.5), apply the rounding rules.

- If the difference is **negative**, round up from .5 and down from .6
  9.5 – 12 = −2.5 (round up to −2)
  8.1 – 10.8 = −2.7 (round down to −3)
- If the difference is **positive**, round up from .5 and down from .4
  12.4 – 8.8 = 3.6 (round up to 4)
  9.8 – 3.5 = 6.3 (round down to 6)

4. Elevation Difference Calculation by Flood Zone

For A zones, the LFE for rating purposes is the top of the lowest floor. For V zones, the LFE for rating purposes is the lowest horizontal structural member.
LFE – 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. See Rate Table 3A in Appendix J.

b. Zone AO
For Zone AO, the difference between the building’s LFE and the **highest adjacent grade** (HAG) is the LFE used for rating.

If the LFE is equal to or greater than the 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.
(LFE – HAG) – BFD = Elevation Difference

*Example:*
- LFE is 10.9
- HAG is 8.0
- BFD is 3.0
  - 10.9 – 8.0 = 2.9 = Elevation Difference
  - 2.9 – 3.0 = 0 (Use With Certification of Compliance rates)
3. How To Write

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 HAG is the LFE used for rating.

\[ \text{LFE} - \text{HAG} = \text{Elevation Difference} \]

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.

\[ \text{LFE} - \text{Estimated BFE} = \text{Elevation Difference} \]

Examples:
- \(10 - 6 = 4\)
- \(8.3 - 6 = 2.3\) (round to 2)

5. 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 EC, the BFE must include the wave height. Refer to Table 14 for the conversion requirement.

Table 14. FIRMs with Wave Height Conversion

<table>
<thead>
<tr>
<th>FIRM Date</th>
<th>Wave Height Conversion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before January 1, 1981</td>
<td>Convert the BFE to reflect wave height.</td>
</tr>
<tr>
<td>January 1, 1981 and after</td>
<td>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.”</td>
</tr>
</tbody>
</table>

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 EC.
- BFE from the EC (Item B9) or from the FIRM.
- LAG from Item C2.f of the EC completed by a registered professional engineer, architect, or surveyor.
- Depth of Still Water Flooding (subtract the LAG 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 \times \text{[still water BFE – LAG elevation].})
3. How To Write

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 Adjustment Calculations

<table>
<thead>
<tr>
<th>Steps</th>
<th>Example 1</th>
<th>Example 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>BFE</td>
<td>14</td>
<td>14</td>
</tr>
<tr>
<td>Subtract LAG</td>
<td>−6</td>
<td>−11</td>
</tr>
<tr>
<td>Still Water BFE</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>Factor</td>
<td>× 0.55</td>
<td>× 0.55</td>
</tr>
<tr>
<td>Wave Height Adjustment</td>
<td>4.4</td>
<td>1.65 (2.1)*</td>
</tr>
<tr>
<td>Add BFE</td>
<td>14</td>
<td>14</td>
</tr>
<tr>
<td>BFE adjusted</td>
<td>18.4</td>
<td>16.1</td>
</tr>
</tbody>
</table>

Note: In Example 2, if the calculation results in less than the minimum 2.1 feet, use 2.1 feet in the calculation of the BFE adjusted.


Not all buildings are eligible for the floodproofing premium discount. The Floodproofing heading in this section provides a detailed description of floodproofing and the completion of the Floodproofing Certificate.

- To be eligible for the floodproofing premium discount, a registered professional engineer or architect must certify that the building is floodproofed to at least one foot above the BFE.
- Section I on the Floodproofing Certificate provides the BFE or BFD.
- Section II on the Floodproofing Certificate provides the building floodproofed elevation information.
- Calculate the elevation difference by subtracting the BFE from the building floodproofed elevation.

Table 16. Calculating Floodproofing Premium Discount Eligibility

<table>
<thead>
<tr>
<th>Steps</th>
<th>Example 1</th>
<th>Example 2</th>
<th>Example 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Floodproofed Elevation</td>
<td>14</td>
<td>13</td>
<td>12</td>
</tr>
<tr>
<td>Subtract BFE</td>
<td>12</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td>Elevation Difference</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Eligible for Floodproofing Discount</td>
<td>YES</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th>CONTENTS IN SHADED AREAS</th>
<th>BUILDING TYPE (INCLUDING BASEMENT, IF ANY)</th>
<th>BASEMENT</th>
<th>CONTENTS LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Floor or 2 Floors</td>
<td>None or Finished or Unfinished</td>
<td>Lowest Floor Only Above Ground Level</td>
<td></td>
</tr>
<tr>
<td>2 Floors or 3 or More Floors</td>
<td>Finished</td>
<td>Basement Only</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LIMITED COVERAGE IN BASEMENT</td>
<td></td>
</tr>
<tr>
<td>2 Floors or 3 or More Floors</td>
<td>None</td>
<td>Lowest Floor Above Ground Level and Higher Floors</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Finished</td>
<td>Basement and Above</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LIMITED COVERAGE IN BASEMENT</td>
<td></td>
</tr>
<tr>
<td>2 Floors or 3 or More Floors</td>
<td>Unfinished</td>
<td>Basement and Above</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LIMITED COVERAGE IN BASEMENT</td>
<td></td>
</tr>
<tr>
<td>3 or More Floors</td>
<td>Finished or Unfinished</td>
<td>Lowest Floor Above Ground Level and Higher Floors</td>
<td></td>
</tr>
<tr>
<td>2 Floors or 3 or More Floors</td>
<td>None or Finished or Unfinished</td>
<td>Above Ground Level More Than 1 Full Floor</td>
<td></td>
</tr>
</tbody>
</table>
### Table 18. Contents Location in Elevated Buildings

<table>
<thead>
<tr>
<th>CONTENTS IN SHADED AREAS</th>
<th>ON APPLICATION FORM</th>
<th>ENCLOSURE</th>
<th>CONTENTS LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elevated building free of obstruction</td>
<td>1 floor</td>
<td>None</td>
<td>Lowest Floor Only Above Ground Level</td>
</tr>
<tr>
<td>Elevated building free of obstruction</td>
<td>2 floors</td>
<td>None</td>
<td>Lowest Floor Above Ground Level And Higher Floor</td>
</tr>
<tr>
<td>Elevated building with enclosure below lowest elevated floor</td>
<td>3 or more floors</td>
<td>Unfinished</td>
<td>Basement/Enclosure and Above MAY HAVE LIMITED COVERAGE IN ENCLOSED AREA</td>
</tr>
<tr>
<td>Elevated building, multiple occupancy, no enclosure</td>
<td>3 or more floors</td>
<td>None</td>
<td>Lowest Floor Only Above Ground Level</td>
</tr>
<tr>
<td>Elevated building, multiple occupancy, no enclosure</td>
<td>3 or more floors</td>
<td>None</td>
<td>Above Ground Level More Than 1 Full Floor</td>
</tr>
<tr>
<td>Elevated building, multiple occupancy, with enclosure</td>
<td>3 or more floors</td>
<td>Unfinished</td>
<td>Above Ground Level More Than 1 Full Floor</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Reference/Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify the rate</td>
<td>Rate tables.</td>
</tr>
<tr>
<td>2</td>
<td>Apply the deductible factor</td>
<td>Deductible Factors table for deductible amounts and factors.</td>
</tr>
<tr>
<td>3</td>
<td>Apply SRL premium (if appropriate)</td>
<td>See Rate Table 7D. Severe Repetitive Loss Premium in Appendix J for applicable percentage.</td>
</tr>
<tr>
<td>4</td>
<td>Add Increased Cost of Compliance (ICC) premium</td>
<td>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.</td>
</tr>
<tr>
<td>5</td>
<td>Apply CRS discount</td>
<td>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.</td>
</tr>
</tbody>
</table>
Table 19. Calculate Premium for a Standard-Rated Policy continued

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Reference/Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Apply Reserve Fund Assessment</td>
<td>See the Reserve Fund Assessment table for applicable percentage.</td>
</tr>
<tr>
<td>7</td>
<td>Add Probation Surcharge</td>
<td>Community Master File or insurer to determine if community is on probation. Add a $50 Probation Surcharge if community is on NFIP probation.</td>
</tr>
<tr>
<td>8</td>
<td>Add HFIAA Surcharge</td>
<td>A $25 HFIAA surcharge applies to:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Policies covering single-family residences, 2–4 family residences, or individual residential condominium units used as a primary residence by the named insured; and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Contents-only policies for apartments used as a primary residence by the named insured.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>All other policies have a $250 HFIAA surcharge.</td>
</tr>
<tr>
<td>9</td>
<td>Add Federal Policy Fee</td>
<td>Federal Policy Fee Table.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The Federal Policy Fee for tenant’s contents-only policy is $25; for all other policies the Federal Policy Fee is $50.</td>
</tr>
</tbody>
</table>

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 SFHA. 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 LAG;
- High-rise residential condominium buildings with basements, eligible under the RCBAP, where the LFE 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 FEMA through the Submit-for-Rate link in UCORT at www.nfip.fema.gov/Default/Login.
3. How To Write

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.

The insurer may not process claims relating to a tentatively-rated policy until the insurer receives the underwriting information establishing a full-risk rate for the policy. 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 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

<table>
<thead>
<tr>
<th>Coverage Type</th>
<th>1-4 Family</th>
<th>Other Residential</th>
<th>Non Residential Business, Other Non Residential</th>
</tr>
</thead>
<tbody>
<tr>
<td>Combined Building/Contents</td>
<td>$250,000/$100,000</td>
<td>$500,000/$100,000</td>
<td>$500,000/$500,000</td>
</tr>
<tr>
<td>Contents Only</td>
<td>$100,000</td>
<td>$100,000</td>
<td>$500,000</td>
</tr>
</tbody>
</table>

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 FIRM date. A contents-only policy will have a $1,000 deductible.
3. Incomplete PRP 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:

- An SFHDF 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.
- EC 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.
- LOMA.
- LOMR.
- 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 PRP

<table>
<thead>
<tr>
<th>Building’s Flood Loss History</th>
<th>Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Buildings for which:</strong></td>
<td>• Multiple flood insurance claim payments:</td>
</tr>
<tr>
<td>• Flood-related federal disaster benefits have been provided within any 10-year period, without regard to ownership of the building; and/or</td>
<td>- Two separate payments exceeding $1,000 for separate losses.</td>
</tr>
<tr>
<td>• Flood insurance claim payments have been made within any 10-year period, without regard to ownership of the building;</td>
<td>- Three (or more) payments for separate losses, regardless of amount.</td>
</tr>
<tr>
<td>are ineligible for the PRP if any of the conditions to the right exist.</td>
<td>• Multiple Federal flood disaster relief payments (including loans and grants):</td>
</tr>
<tr>
<td></td>
<td>- Two separate payments exceeding $1,000 for separate occurrences.</td>
</tr>
<tr>
<td></td>
<td>- Three separate payments for separate occurrences, regardless of amount,</td>
</tr>
<tr>
<td></td>
<td>• 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.</td>
</tr>
</tbody>
</table>

**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 RCBAP; or
- Any building located on Leased Federal Property (LFP) 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**

A policy must meet all PRP eligibility requirements to renew as a PRP. The insurer may not renew a PRP during a policy term when the property no longer meets the loss history requirement. Likewise, a PRP may not renew during a policy term where the property becomes ineligible due to a map revision. The FIRM available at the time of the renewal offer determines a building’s continued eligibility for the PRP. If a property is no longer eligible for a PRP, it may be eligible to renew using the Newly Mapped rating procedure if it meets all eligibility criteria (see the Newly Mapped heading in this section). Otherwise, 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.

**Note:** If the policy is not eligible to renew as a PRP, it may still be endorsed during the current policy term to increase coverage mid-term or to correct misratings, such as an incorrect building description or community number.
3. How To Write

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.

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 ICC coverage.

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

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy</th>
<th>Condo Unit Indicator</th>
<th>PRP Eligibility</th>
<th>Rate Table</th>
<th>Policy/Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit Owner</td>
<td>Single family</td>
<td>Yes</td>
<td>Yes</td>
<td>1–4 Family residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (association-owned single unit)</td>
<td>Single family</td>
<td>Yes</td>
<td>Yes</td>
<td>1–4 Family residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (entire building)</td>
<td>N/A</td>
<td>N/A</td>
<td>No</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy</th>
<th>Condo Unit Indicator</th>
<th>PRP Eligibility</th>
<th>Rate Table</th>
<th>Policy/Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit Owner</td>
<td>2–4</td>
<td>Yes</td>
<td>Yes</td>
<td>1–4 Family residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (association-owned single unit)</td>
<td>2–4</td>
<td>Yes</td>
<td>Yes</td>
<td>1–4 Family residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (entire building)</td>
<td>N/A</td>
<td>N/A</td>
<td>No</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Owner of Non-Residential Contents</th>
<th>Building Occupancy</th>
<th>Condo Unit Indicator (Building coverage not available)</th>
<th>PRP Eligibility</th>
<th>Rate Table</th>
<th>Policy/Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-residential business, Other Non-residential</td>
<td>Yes</td>
<td>Yes (Building coverage not available)</td>
<td>Yes</td>
<td>Non-residential business, Other Non-residential contents-only</td>
<td>General Property</td>
</tr>
</tbody>
</table>
### 3. How To Write

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

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy(^1)</th>
<th>Condo Unit Indicator(^1)</th>
<th>PRP Eligibility</th>
<th>Rate Table</th>
<th>Policy Form</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unit Owner</strong></td>
<td>Other residential</td>
<td>Yes</td>
<td>Yes</td>
<td>Other residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td><strong>Association</strong></td>
<td>Other residential</td>
<td>Yes</td>
<td>Yes</td>
<td>Other residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>(association-owned single unit)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Association (entire building)</strong></td>
<td>N/A</td>
<td>N/A</td>
<td>No</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Owner of Non-Residential Contents</strong></td>
<td>Non-residential business, Other Non-residential</td>
<td>Yes (Building coverage not available)</td>
<td>Yes</td>
<td>Non-residential business, Other Non-residential contents-only</td>
<td>General Property</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy(^1)</th>
<th>Condo Unit Indicator(^1)</th>
<th>PRP Eligibility</th>
<th>Rate Table</th>
<th>Policy Form</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Owner of Non-Residential Contents</strong></td>
<td>Non-residential business, Other Non-residential</td>
<td>Yes (Building coverage not available)</td>
<td>Yes</td>
<td>Non-residential business, Other Non-residential contents-only</td>
<td>General Property</td>
</tr>
<tr>
<td><strong>Owner of Residential Contents</strong></td>
<td>Single family</td>
<td>Yes (Building coverage not available)</td>
<td>Yes</td>
<td>Residential contents-only</td>
<td>Dwelling</td>
</tr>
<tr>
<td><strong>Association (entire building)</strong></td>
<td>Non-residential business, Other Non-residential</td>
<td>N/A</td>
<td>Yes</td>
<td>Non-residential business, Other Non-residential building and contents</td>
<td>General Property</td>
</tr>
</tbody>
</table>

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.
3. How To Write

H. 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

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify the base</td>
<td>PRP premium table corresponding to the building occupancy type and</td>
</tr>
<tr>
<td></td>
<td>premium</td>
<td>description.</td>
</tr>
<tr>
<td>2</td>
<td>Apply multiplier</td>
<td>Apply a multiplier of 1.00 for PRPs.</td>
</tr>
<tr>
<td>3</td>
<td>Add ICC premium</td>
<td>ICC Premium table for ICC premium amount. Do not apply ICC premium to</td>
</tr>
<tr>
<td></td>
<td></td>
<td>contents-only policies or to policies for individual condominium units in</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a multi-unit building.</td>
</tr>
<tr>
<td>4</td>
<td>Apply Reserve Fund Assessment</td>
<td>See the Reserve Fund Assessment table for applicable percentage.</td>
</tr>
<tr>
<td>5</td>
<td>Add Probation Surcharge</td>
<td>Community Master File or insurer to determine if community is on probation.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Add a $50 Probation Surcharge if community is on NFIP probation.</td>
</tr>
<tr>
<td>6</td>
<td>Add HFIAA Surcharge</td>
<td>A $25 HFIAA surcharge applies to:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Policies covering single-family residences, 2-4 family residences, or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>individual residential condominium units used as a primary residence by</td>
</tr>
<tr>
<td></td>
<td></td>
<td>the named insured; and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Contents-only policies for apartments used as a primary residence by</td>
</tr>
<tr>
<td></td>
<td></td>
<td>the named insured.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>All other policies have a $250 HFIAA surcharge.</td>
</tr>
<tr>
<td>7</td>
<td>Add Federal Policy Fee</td>
<td>For PRP and contents-only: Add the $25 Federal Policy Fee to the</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total Premium.</td>
</tr>
</tbody>
</table>

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 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 FIRM.

1. Maximum Coverage Limits

Table 27. Maximum Coverage Limits by Occupancy Type

<table>
<thead>
<tr>
<th>Coverage Type</th>
<th>1–4 Family</th>
<th>Other Residential</th>
<th>Non-Residential Business, Other Non-Residential</th>
</tr>
</thead>
<tbody>
<tr>
<td>Combined Building/Contents</td>
<td>$250,000/$100,000</td>
<td>$500,000/$100,000</td>
<td>$500,000/$500,000</td>
</tr>
<tr>
<td>Contents Only</td>
<td>$100,000</td>
<td>$100,000</td>
<td>$500,000</td>
</tr>
</tbody>
</table>
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:

- An SFHDF 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.
- EC 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.
- LOMA.
- LOMR.
- LODR.
3. How To Write

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

<table>
<thead>
<tr>
<th>Building’s Flood Loss History</th>
<th>Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buildings for which:</td>
<td></td>
</tr>
<tr>
<td>• Flood-related federal disaster benefits have been provided within any 10-year period, without regard to ownership; and/or</td>
<td></td>
</tr>
<tr>
<td>• Flood insurance claim payments have been made within any 10-year period, without regard to ownership of the building</td>
<td></td>
</tr>
<tr>
<td>are ineligible for the Newly Mapped procedure if any of the conditions to the right exist.</td>
<td></td>
</tr>
</tbody>
</table>

- 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.

Note: This restriction applies to all lapses that occur on or after April 1, 2016.

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.
3. How To Write

1. Renewal Payment

Table 29. Renewal Payment Requirements

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

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 BFE 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.

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.
3. How To Write

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

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 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**

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy</th>
<th>Condo Unit Indicator</th>
<th>Newly Mapped</th>
<th>Rate Table</th>
<th>Policy/Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit Owner</td>
<td>Single family</td>
<td>Yes</td>
<td>Yes</td>
<td>1-4 Family residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (association-owned single unit)</td>
<td>Single family</td>
<td>Yes</td>
<td>Yes</td>
<td>1-4 Family residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (entire building)</td>
<td>N/A</td>
<td>N/A</td>
<td>No</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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

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

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy</th>
<th>Condo Unit Indicator</th>
<th>Newly Mapped</th>
<th>Rate Table</th>
<th>Policy/Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit Owner</td>
<td>2–4</td>
<td>Yes</td>
<td>Yes</td>
<td>1-4 Family residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (association-owned single unit)</td>
<td>2–4</td>
<td>Yes</td>
<td>Yes</td>
<td>1-4 Family residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (entire building)</td>
<td>N/A</td>
<td>N/A</td>
<td>No</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**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**

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy</th>
<th>Condo Unit Indicator</th>
<th>Newly Mapped</th>
<th>Rate Table</th>
<th>Policy Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit Owner</td>
<td>Other residential</td>
<td>Yes</td>
<td>Yes</td>
<td>Other residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (association-owned single unit)</td>
<td>Other residential</td>
<td>Yes</td>
<td>Yes</td>
<td>Other residential</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (entire building)</td>
<td>N/A</td>
<td>N/A</td>
<td>No</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**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

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

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.

#### H. 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

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify the base premium</td>
<td>Newly Mapped premium table corresponding to the building occupancy type and description.</td>
</tr>
<tr>
<td>2</td>
<td>Apply multiplier</td>
<td>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.</td>
</tr>
<tr>
<td>3</td>
<td>Add ICC premium</td>
<td>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.</td>
</tr>
<tr>
<td>4</td>
<td>Apply Reserve Fund Assessment</td>
<td>Refer to the Reserve Fund Assessment table.</td>
</tr>
<tr>
<td>5</td>
<td>Add Probation Surcharge</td>
<td>Community Master File or insurer to determine if community is on probation. Add a $50 Probation Surcharge if community is on NFIP probation.</td>
</tr>
<tr>
<td>6</td>
<td>Add HFIAA Surcharge</td>
<td>A $25 HFIAA surcharge applies to: Policies covering single-family residences, 2-4 family residences, or individual residential condominium units used as a primary residence by the named insured; and Contents-only policies for apartments used as a primary residence by the named insured. All other policies have a $250 HFIAA surcharge.</td>
</tr>
</tbody>
</table>
Table 34. Calculate Premium for a Newly Mapped Rated Policy continued

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Add Federal Policy Fee</td>
<td>Add the $50 Federal Policy Fee to the Total Premium.</td>
</tr>
</tbody>
</table>

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 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

<table>
<thead>
<tr>
<th>Policy Form</th>
<th>RCBAP</th>
</tr>
</thead>
</table>
| **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 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

<table>
<thead>
<tr>
<th>Policy Form</th>
<th>RCBAP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Other Considerations</strong></td>
<td>- 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.</td>
</tr>
<tr>
<td><strong>Replacement Cost Coverage</strong></td>
<td>- Yes, for the building only, subject to policy provisions.</td>
</tr>
<tr>
<td></td>
<td>- RCV is the cost to replace property with the same type of material and construction without deduction for depreciation.</td>
</tr>
<tr>
<td><strong>Deductibles</strong></td>
<td>Condo Table 7 in the Condominium section of Appendix J: Rate Tables shows the available optional deductibles and deductible factors.</td>
</tr>
<tr>
<td><strong>Coinsurance Penalty</strong></td>
<td>- 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.</td>
</tr>
</tbody>
</table>
| | - The coinsurance penalty calculation is:  
  \[
  \text{Insurance Carried} \times \frac{\text{Amount of Loss}}{\text{Insurance Required}} = \text{Limit of Recovery}
  \] |
| **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 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 |
3. How To Write

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

<table>
<thead>
<tr>
<th>Policy Form</th>
<th>Dwelling Form</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Maximum Coverage Limits</strong></td>
<td></td>
</tr>
<tr>
<td>Emergency Program</td>
<td>Building $35,000</td>
</tr>
<tr>
<td></td>
<td>Contents $10,000</td>
</tr>
<tr>
<td>Regular Program</td>
<td>Building $250,000</td>
</tr>
<tr>
<td></td>
<td>Contents $100,000</td>
</tr>
<tr>
<td><strong>Insured</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unit owner;</td>
</tr>
<tr>
<td></td>
<td>Association in the name of the unit owner and the association as their interests may appear;</td>
</tr>
<tr>
<td></td>
<td>Association for an individual unit owned by the association; or</td>
</tr>
<tr>
<td></td>
<td>Non-residential unit owner for contents-only coverage.</td>
</tr>
<tr>
<td><strong>Property Insured</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Building elements.</td>
</tr>
<tr>
<td></td>
<td>Individually-owned contents.</td>
</tr>
<tr>
<td><strong>Eligibility</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Emergency and Regular Programs</td>
</tr>
<tr>
<td><strong>Other Considerations</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NFIP considers a residential condominium unit in a high-rise or low-rise building, including a townhouse or rowhouse, as a single-family residence.</td>
</tr>
<tr>
<td></td>
<td>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.</td>
</tr>
<tr>
<td></td>
<td>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.</td>
</tr>
<tr>
<td></td>
<td>When the applicant is the condominium association, the lenders for the individual unit owners should not appear on the declarations page.</td>
</tr>
<tr>
<td><strong>Replacement Cost</strong></td>
<td>Yes, subject to policy provisions</td>
</tr>
<tr>
<td><strong>ICC Coverage</strong></td>
<td>No</td>
</tr>
<tr>
<td><strong>Assessment Coverage</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Federal Policy Fee</strong></td>
<td>$50</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th>Policy Form</th>
<th>General Property Form</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Maximum Coverage Limits</strong></td>
<td><strong>Emergency Program</strong></td>
</tr>
<tr>
<td></td>
<td>• Non-residential</td>
</tr>
<tr>
<td></td>
<td>• Building $100,000</td>
</tr>
<tr>
<td></td>
<td>• Contents $100,000</td>
</tr>
<tr>
<td></td>
<td><strong>Regular Program</strong></td>
</tr>
<tr>
<td></td>
<td>• Building $500,000</td>
</tr>
<tr>
<td></td>
<td>• Contents $500,000</td>
</tr>
<tr>
<td><strong>Insured Entity</strong></td>
<td>Non-residential condominium association.</td>
</tr>
<tr>
<td><strong>Property Insured</strong></td>
<td>The property insured includes:</td>
</tr>
<tr>
<td></td>
<td>• Condominium building.</td>
</tr>
<tr>
<td></td>
<td>• Individually owned units within the building.</td>
</tr>
<tr>
<td></td>
<td>• Improvements within unit.</td>
</tr>
<tr>
<td></td>
<td>• Additions and extensions attached or connected to the insured building.</td>
</tr>
<tr>
<td></td>
<td>• Fixtures, machinery, and equipment within building.</td>
</tr>
<tr>
<td></td>
<td>• Contents owned by the association.</td>
</tr>
<tr>
<td></td>
<td>• Non-residential common building elements and the contents.</td>
</tr>
<tr>
<td><strong>Note:</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Eligible Condominiums Types</strong></td>
<td>Condominium building in a Regular Program community where less than 75% of its floor area is residential use.</td>
</tr>
<tr>
<td><strong>Replacement Cost</strong></td>
<td>No</td>
</tr>
<tr>
<td><strong>ICC Coverage</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Assessment Coverage</strong></td>
<td>No</td>
</tr>
<tr>
<td><strong>Federal Policy Fee</strong></td>
<td>$50</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Policy Form</th>
<th>General Property Form or Dwelling Form</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Maximum Coverage Limits</strong></td>
<td>Emergency Program</td>
</tr>
<tr>
<td></td>
<td>Contents $100,000</td>
</tr>
<tr>
<td><strong>Insured Parties</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unit owner</td>
</tr>
<tr>
<td><strong>Definition</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Property Insured</strong></td>
<td>Contents of non-residential condominium units.</td>
</tr>
<tr>
<td><strong>Program Eligibility</strong></td>
<td>Emergency and Regular Programs</td>
</tr>
<tr>
<td><strong>Other Considerations</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Replacement Cost</strong></td>
<td>No</td>
</tr>
<tr>
<td><strong>ICC Coverage</strong></td>
<td>No</td>
</tr>
<tr>
<td><strong>Assessment Coverage</strong></td>
<td>No</td>
</tr>
<tr>
<td><strong>Federal Policy Fee</strong></td>
<td>$50</td>
</tr>
</tbody>
</table>

F. General Concepts

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**

<table>
<thead>
<tr>
<th>Building Type</th>
<th>Basic Limit of Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>High-Rise</td>
<td>$175,000</td>
</tr>
<tr>
<td>Low-Rise</td>
<td>$60,000 × Number of Units</td>
</tr>
</tbody>
</table>

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 the community’s reinstatement as a participating NFIP community.

**Note:** This restriction applies to all lapses that occur on or after April 1, 2016.

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

Table 40. Pre-FIRM Subsidized Rates Ineligibility Determination

<table>
<thead>
<tr>
<th>Was there a prior NFIP policy for this property in the insured’s name?</th>
<th>Did a lender require the prior NFIP policy?</th>
<th>Did the prior NFIP policy lapse while required by a lender?</th>
<th>Was the lapse the result of a community suspension?</th>
<th>Was the community reinstated within the last 180 days?</th>
<th>Eligible for Pre-FIRM subsidized rates?</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>NO</td>
<td>NO</td>
</tr>
<tr>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>NO</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>NO</td>
<td>NO</td>
<td>NO</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Pre-FIRM</th>
<th>Pre-FIRM SRL</th>
<th>Substantially Improved</th>
<th>High-Rise Table For Rating</th>
<th>Low-Rise Table For Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>YES</td>
<td>NO</td>
<td>N/A</td>
<td>4B</td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
<td>YES</td>
<td>3B</td>
<td>4C</td>
</tr>
<tr>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>N/A</td>
<td>4B</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Number of Units</th>
<th>Federal Policy Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 unit</td>
<td>$50 per policy</td>
</tr>
<tr>
<td>2–4 units</td>
<td>$150 per policy</td>
</tr>
<tr>
<td>5–10 units</td>
<td>$400 per policy</td>
</tr>
<tr>
<td>11–20 units</td>
<td>$800 per policy</td>
</tr>
<tr>
<td>21 or more units</td>
<td>$2,000 per policy</td>
</tr>
</tbody>
</table>

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.
3. How To Write

Table 43. Calculate Premium for an RCBAP

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify the rate</td>
<td>Separate rate tables and different basic coverage limits for Low-rise and High-Rise condominium buildings.</td>
</tr>
<tr>
<td>2</td>
<td>Apply the deductible factor</td>
<td>Deductible Factors table for deductible amounts and factors.</td>
</tr>
<tr>
<td>3</td>
<td>Apply SRL premium (if appropriate)</td>
<td>See Rate Table 7D. Severe Repetitive Loss Premium in Appendix J for applicable percentage.</td>
</tr>
<tr>
<td>4</td>
<td>Add ICC premium</td>
<td>ICC Premium table for ICC premium amount.</td>
</tr>
<tr>
<td>5</td>
<td>Apply CRS discount</td>
<td>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.</td>
</tr>
<tr>
<td>6</td>
<td>Apply Reserve Fund Assessment</td>
<td>Reserve Fund Assessment table for applicable percentage.</td>
</tr>
<tr>
<td>7</td>
<td>Add Probation Surcharge</td>
<td>Community Master File or insurer to determine if community is on probation. Add a $50 Probation Surcharge if community is on NFIP probation.</td>
</tr>
<tr>
<td>8</td>
<td>Add HF1AA Surcharge</td>
<td>The surcharge is $250 for these policies.</td>
</tr>
<tr>
<td>9</td>
<td>Add Federal Policy Fee</td>
<td>Federal Policy Fee table for RCBAP.</td>
</tr>
</tbody>
</table>

7. 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.

8. 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.

9. 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.
3. How To Write

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

Table 44. Assessment Coverage After a Loss

<table>
<thead>
<tr>
<th>Condition at Time of Loss</th>
<th>Assessment Coverage Under the Dwelling Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>No RCBAP</td>
<td>The unit owner has purchased building coverage.</td>
</tr>
<tr>
<td></td>
<td>• Responds to a loss assessment against the unit owner for damages to common areas, up to the building limit under the Dwelling Form.</td>
</tr>
<tr>
<td></td>
<td>• If there is also damage to the building elements of the unit:</td>
</tr>
<tr>
<td></td>
<td>– Coverage combination cannot exceed the maximum coverage limits available for a single-family dwelling.</td>
</tr>
<tr>
<td></td>
<td>– Settlement of the unit building damages applies first and then the loss assessment.</td>
</tr>
<tr>
<td>RCBAP Insured to at Least 80% of the Building Replacement Cost</td>
<td>The unit owner has purchased building coverage:</td>
</tr>
<tr>
<td></td>
<td>• 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.</td>
</tr>
<tr>
<td></td>
<td>• The loss assessment coverage under the Dwelling Form will not cover the association’s policy deductible purchased by the condominium association.</td>
</tr>
<tr>
<td></td>
<td>• The RCBAP is primary and the Dwelling Form is considered excess after exhausting the RCBAP limits.</td>
</tr>
<tr>
<td></td>
<td>• Coverage combination cannot exceed the maximum coverage limits available for a single-family dwelling.</td>
</tr>
<tr>
<td>RCBAP Insured to Less Than 80% of the Building Replacement Cost</td>
<td>The unit owner has purchased building coverage:</td>
</tr>
<tr>
<td></td>
<td>• The RCBAP is primary and the Dwelling Form is considered excess after exhausting the RCBAP limits.</td>
</tr>
<tr>
<td></td>
<td>• 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.</td>
</tr>
</tbody>
</table>

10. 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

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy¹</th>
<th>Building Indicator²</th>
<th>Contents Indicator²</th>
<th>Type of Coverage</th>
<th>Rating Classification</th>
<th>Policy Form³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit owner</td>
<td>Single family</td>
<td>Single unit</td>
<td>Household</td>
<td>RC⁴</td>
<td>Single family</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (association-owned single unit only)</td>
<td>Single family</td>
<td>Single unit</td>
<td>Household</td>
<td>RC⁴</td>
<td>Single family</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (entire building)</td>
<td>Determined by the number of units, i.e., Single family, 2–4 family, other residential</td>
<td>Low-rise</td>
<td>Household</td>
<td>RC</td>
<td>RCBAP low-rise</td>
<td>RCBAP</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy¹</th>
<th>Building Indicator²</th>
<th>Contents Indicator²</th>
<th>Type of Coverage</th>
<th>Rating Classification</th>
<th>Policy Form³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit Owner</td>
<td>2–4</td>
<td>Single unit</td>
<td>Household</td>
<td>RC⁴</td>
<td>Single family for building; 2–4 family for contents</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (association-owned single unit only)</td>
<td>2–4</td>
<td>Single unit</td>
<td>Household</td>
<td>RC⁴</td>
<td>Single family for building; 2–4 family for contents</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association (entire building)</td>
<td>2–4</td>
<td>Low-rise</td>
<td>Household</td>
<td>RC</td>
<td>RCBAP low-rise</td>
<td>RCBAP</td>
</tr>
<tr>
<td>Owner of Non-Residential Contents</td>
<td>Non-residential</td>
<td>Single unit (Building coverage not available)</td>
<td>Other than household</td>
<td>ACV</td>
<td>Non-residential</td>
<td>General Property</td>
</tr>
</tbody>
</table>
### Table 47. Multi-Unit Building – 5 or More Units Per Building, Fewer Than 3 Floors

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy</th>
<th>Building Indicator</th>
<th>Contents Indicator</th>
<th>Type of Coverage</th>
<th>Rating Classification</th>
<th>Policy Form</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unit Owner</strong></td>
<td>Other residential</td>
<td>Single unit</td>
<td>Household</td>
<td>RC4</td>
<td>Single family for building; other residential for contents</td>
<td>Dwelling</td>
</tr>
<tr>
<td><strong>Association</strong></td>
<td>Other residential</td>
<td>Single unit</td>
<td>Household</td>
<td>RC4</td>
<td>Single family for building; other residential for contents</td>
<td>Dwelling</td>
</tr>
<tr>
<td><em>(association-owned single unit only)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Association</strong></td>
<td>Other residential</td>
<td>Low-rise</td>
<td>Household</td>
<td>RC</td>
<td>RCBAP low-rise</td>
<td>RCBAP</td>
</tr>
<tr>
<td><em>(entire building)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Owner of Non-Residential Contents</strong></td>
<td>Non-residential</td>
<td>Single unit (Building coverage not available)</td>
<td>Other than household</td>
<td>ACV</td>
<td>Non-residential</td>
<td>General Property</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy</th>
<th>Building Indicator</th>
<th>Contents Indicator</th>
<th>Type of Coverage</th>
<th>Rating Classification</th>
<th>Policy Form</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unit Owner</strong></td>
<td>Other residential</td>
<td>Single unit</td>
<td>Household</td>
<td>RC5</td>
<td>Single family for building; other residential for contents</td>
<td>Dwelling</td>
</tr>
<tr>
<td><strong>Association</strong></td>
<td>Other residential</td>
<td>Single unit</td>
<td>Household</td>
<td>RC5</td>
<td>Single family for building; other residential for contents</td>
<td>Dwelling</td>
</tr>
<tr>
<td><em>(association-owned single unit only)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Association</strong></td>
<td>Other residential</td>
<td>High-rise</td>
<td>Household</td>
<td>RC</td>
<td>RCBAP High-rise</td>
<td>RCBAP</td>
</tr>
<tr>
<td><em>(entire building)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Table 49. Non-Residential Condominiums

<table>
<thead>
<tr>
<th>Purchaser of Policy</th>
<th>Building Occupancy</th>
<th>Building Indicator</th>
<th>Contents Indicator</th>
<th>Type of Coverage</th>
<th>Rating Classification</th>
<th>Policy Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owner of Non-Residential Contents</td>
<td>Non-residential</td>
<td>Single unit (Building coverage not available)</td>
<td>Other than household</td>
<td>ACV</td>
<td>Non-residential</td>
<td>General Property</td>
</tr>
<tr>
<td>Owner of Residential Contents</td>
<td>Single family (In a 2–4 unit building)</td>
<td>Single unit (Building coverage not available)</td>
<td>Household</td>
<td>ACV</td>
<td>Single family</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Owner of Residential Contents</td>
<td>Other residential (In a 5-or-more-unit building)</td>
<td>Single unit (Building coverage not available)</td>
<td>Household</td>
<td>ACV</td>
<td>Single family</td>
<td>Dwelling</td>
</tr>
<tr>
<td>Association</td>
<td>Non-residential</td>
<td>Low-rise or high-rise</td>
<td>Other than household</td>
<td>ACV</td>
<td>Non-residential</td>
<td>General property</td>
</tr>
</tbody>
</table>

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).
3. How To Write

G. Sample Replacement Cost Value Letter

Every 3 years the insurer must update the 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

---
3. How To Write

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.
- EC form.
- Non-Residential Floodproofing Certificate, if applicable.
- If the building is Post-FIRM and has its LFE 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.
3. How To Write

- 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 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 BFEs.
3. How To Write

C. Reformation

A provisionally-rated policy has limited reformation rights. The reformation rights depend upon the submission of a valid EC, 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.
3. How To Write

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 EC and NFIP Floodproofing Certificate.

B. EC
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 LOMA or LOMR-F.

A sample EC can be found in Appendix B: Forms.

1. The NFIP Requires ECs for SFHAs
For rating purposes, the NFIP requires an EC for buildings in the 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 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 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.

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 LAG 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.
3. How To Write

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 LAG along with lowest floor and HAG.
• 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.

1. Eligibility for a Premium Discount

• Insureds may receive a premium discount 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 premium discount; and
  – The building is located in zone A1–A30, AE, AR, AR Dual, AO, AH, or A with a BFE.
• Insureds may receive a premium discount 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.
3. How To Write

2. Requirements for a Premium Discount

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

3. Residential Buildings with Basements

- Insurers must submit a completed Residential Basement Floodproofing Certificate and at least two photographs of the building to obtain a premium discount.
- The NFIP grandfathered a residential floodproofing premium discount if the building was constructed:
  - In a community approved for the residential floodproofing premium discount at the time of construction; or
  - Before the date the NFIP removed the community’s residential floodproofing premium discount 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 EC;
  - Completed Floodproofing Certificate;
  - Photographs of the exterior of the building (all sides);
  - Photographs of the components used to provide floodproofing protection (shields, gates, barriers);
  - Flood Emergency Plan that includes:
    > Chain of command;
    > Notification procedures;
    > Personnel duties;
    > Location of floodproofing components, install procedures, repair procedures;
    > Evacuation procedures for building occupants;
    > Component maintenance procedures during flooding event;
    > Drill and training program (at least once a year);
    > Regular review/update of Flood Emergency Plan; and
  - Inspection and Maintenance Plan that includes:
    > Inspection procedures for the entire floodproofing system: wall systems, floor slab, openings, floodproofing components, valve operation, drainage/pump systems, equipment/tools required to engage floodproofing measures; and
    > Cadence of the Inspection and Maintenance Plan.
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 (NFIRA). The law requires flood insurance for all buildings located in a 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 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;
3. How To Write

- 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.
3. How To Write

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 NFIP policy that satisfies the requirement in Federal law, 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 NFIP 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.
3. How To Write

- 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 CRS 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**

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Reference/Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Identify the rate</td>
<td>Rate tables – MPPP Rates</td>
</tr>
<tr>
<td>2</td>
<td>Apply the deductible factor</td>
<td>Deductible Factors table for deductible amounts and factors</td>
</tr>
<tr>
<td>3</td>
<td>Add ICC premium</td>
<td>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.</td>
</tr>
<tr>
<td>4</td>
<td>Apply CRS discount</td>
<td>N/A</td>
</tr>
<tr>
<td>5</td>
<td>Apply Reserve Fund Assessment</td>
<td>Reserve Fund Assessment table for applicable percentage</td>
</tr>
<tr>
<td>6</td>
<td>Add Probation Surcharge</td>
<td>Community Master File or insurer to determine if community is on probation. Add a $50 Probation Surcharge if community is on NFIP probation.</td>
</tr>
<tr>
<td>7</td>
<td>Add HFIAA Surcharge</td>
<td>A $25 HFIAA surcharge applies to: Policies covering single-family residences, 2–4 family residences, or individual residential condominium units used as a primary residence by the named insured; <em>and</em> Contents-only policies for apartments used as a primary residence by the named insured. All other policies have a $250 HFIAA Surcharge.</td>
</tr>
<tr>
<td>8</td>
<td>Add Federal Policy Fee</td>
<td>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.</td>
</tr>
</tbody>
</table>

**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.
- 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.

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</tr>
<tr>
<td>Condo Rating Example 8: Post-FIRM, High-Rise, Maximum Deductible Discount, Zone AE</td>
<td>3-105</td>
</tr>
<tr>
<td>Condo Rating Example 9: Pre-FIRM, High-Rise, Enclosure, Maximum Deductible Discount, Coinsurance Penalty, Zone AE</td>
<td>3-106</td>
</tr>
</tbody>
</table>
3. How to Write

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: $6
- CRS Rating: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $1,273
- Probation Surcharge: $50
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

DETERMINED RATES:

Building: 3.00 / 2.00  Contents: 3.00 / 2.00

<table>
<thead>
<tr>
<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>AMOUNT OF INSURANCE</th>
<th>ANNUAL PREMIUM</th>
<th>AMOUNT OF INSURANCE</th>
<th>ANNUAL PREMIUM</th>
<th>PREMIUM REDUCTION/INCREASE</th>
<th>TOTAL PREMIUM</th>
</tr>
</thead>
<tbody>
<tr>
<td>BUILDING</td>
<td>$250,000</td>
<td>$60,000</td>
<td>3.00</td>
<td>$1,800</td>
<td></td>
<td>-$560</td>
<td>$5,040</td>
</tr>
<tr>
<td>CONTENTS</td>
<td>$100,000</td>
<td>$25,000</td>
<td>3.00</td>
<td>$750</td>
<td></td>
<td>-$225</td>
<td>$2,025</td>
</tr>
</tbody>
</table>

PAYMENT METHOD:
- Check
- Credit Card
- Other: ____________________________

ANNUAL SUBTOTAL $7,065
ICC PREMIUM $6
SUBTOTAL $7,071
CRS PREMIUM DISCOUNT ___ % $0
SUBTOTAL $7,071
RESERVE FUND ___ % $1,273
SUBTOTAL $8,344
PROBATION SURCHARGE $50
HFIAA SURCHARGE $25
FEDERAL POLICY FEE $50
TOTAL AMOUNT DUE $8,469

PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage: Building: $5,600 / Contents: $2,250
4. Subtotal: $7,065
5. Add ICC Premium: $6
6. Subtotal: $7,071
7. Subtract CRS Discount: N/A
8. Subtotal: $7,071
9. Add Reserve Fund Assessment: $1,273 (18%)
10. Subtotal: $8,344
11. Add Probation Surcharge: $50
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. Total Amount Due: $8,469
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: $106
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

Determined Rates:
Building: 1.18
Contents: 1.48

<table>
<thead>
<tr>
<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>BASIC LIMITS</th>
<th>ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)</th>
<th>DEDUCTIBLE</th>
<th>TOTAL PREMIUM</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>AMOUNT OF INSURANCE</td>
<td>RATE</td>
<td>ANNUAL PREMIUM</td>
<td>AMOUNT OF INSURANCE</td>
</tr>
<tr>
<td>BUILDING</td>
<td>$35,000</td>
<td>$35,000</td>
<td>1.18</td>
<td>$413</td>
<td></td>
</tr>
<tr>
<td>CONTENTS</td>
<td>$10,000</td>
<td>$10,000</td>
<td>1.48</td>
<td>$148</td>
<td></td>
</tr>
</tbody>
</table>

RATE CATEGORY: MANUAL
PAYMENT METHOD: ANNUAL SUBTOTAL: $589

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): / /

Total Amount Due: $770

Premium Calculation:
1. Multiply Rate x $100 of Coverage: Building: $413 / Contents: $148
2. Apply Deductible Factor: Building: 1.050 x $413 = $434 / Contents: 1.050 x $148 = $155
4. Annual Subtotal: $589
5. Add ICC Premium: N/A
6. Subtotal: $589
7. Subtract CRS Discount: N/A
8. Subtotal: $589
9. Add Reserve Fund Assessment: $106 (18%)
10. Subtotal: $695
11. Add Probation Surcharge: N/A
12. Subtotal: $695
13. Add HFIAA Surcharge: $25
14. Subtotal: $720
15. Add Federal Policy Fee: $50
16. Total Amount Due: $770
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: $277
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $50

**Determined Rates:**

Building: 1.11 / .31   Contents: 1.71 / .54

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<th>AMOUNT OF INSURANCE</th>
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**Premium Calculation:**

1. Multiply Rate × $100 of Coverage: Building: $945 / Contents: $617
2. Apply Deductible Factor: Building: .980 × $945 = $926 / Contents: .980 × $617 = $605
4. Annual Subtotal: $1,531
5. Add ICC Premium: $8
6. Subtotal: $1,539
7. Subtract CRS Discount: N/A
8. Add Reserve Fund Assessment: $277 (18%)
9. Subtotal: $1,816
10. Add Probation Surcharge: N/A
11. Add HFIAA Surcharge: $25
12. Add Federal Policy Fee: $50
13. Total Amount Due: $1,891
### 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:** $865
- **Probation Surcharge:** N/A
- **HFIAA Surcharge:** Primary Residence $25
- **Federal Policy Fee:** $50

**Determined Rates:**

**Building: 1.26 / 1.90**  
**Contents: 1.48 / 1.93**

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**PAYMENT METHOD:**
- **CHECK**
- **CREDIT CARD**
- **OTHER:**

**ANNUAL SUBTOTAL:**
- **BUILDING:** $4,751
- **CONTENTS:** $1,335
- **CRS PREMIUM DISCOUNT:** N/A
- **SUBTOTAL:** $4,807
- **RESERVE FUND:** $865
- **SUBTOTAL:** $5,672
- **PROBATION SURCHARGE:** N/A
- **HFIAA SURCHARGE:** $25
- **FEDERAL POLICY FEE:** $50
- **TOTAL AMOUNT DUE:** $5,747

### Premium Calculation:

1. Multiply Rate × $100 of Coverage:  
   - Building: $3,416 / Contents: $1,335
2. Apply Deductible Factor:  
   - Building: 1.000 × $3,416 = $3,416 / Contents: 1.000 × $1,335 = $1,335
3. Premium Reduction/Increase:  
   - Building: $0 / Contents: $0
4. Annual Subtotal: $4,751
5. Add ICC Premium: $56
6. Subtotal: $4,807
7. Subtract CRS Discount: N/A
8. Subtotal: $4,807
9. Add Reserve Fund Assessment: $865 (18%)  
10. Subtotal: $5,672
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. Total Amount Due: $5,747

### Additional Details:
- **Signature of Insurance Agent/Producer:** ________________________________ / _________ / _________
- **Date (MM/DD/YYYY):**
- **Signature of Insured (Optional):** ________________________________ / _________ / _________
- **Date (MM/DD/YYYY):**
- **Notice:** Building coverage benefits — except for a residential condominium building — are not available if other NFIP building coverage has been purchased by the applicant or any other party for the same building.
- **The above statements are correct to the best of my knowledge. I understand that any false statements may be punishable by fine and/or imprisonment under applicable federal law. See reverse side of copies.**

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APRIL 2020 NFIP FLOOD INSURANCE MANUAL
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: $2,074
- HFIAA Surcharge: $250
- Federal Policy Fee: $50

Determined Rates:
Building: 4.13 / 4.93 Contents: 4.88 / 5.02

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RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING
PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: ___

ANNUAL SUBTOTAL: $16,409
SUBTOTAL: $16,458
CRS PREMIUM DISCOUNT: ___ % $49
SUBTOTAL: $16,458
RESERVE FUND: ___ % $2,074
SUBTOTAL: $18,532
PROBATION SURCHARGE: $0
HFIAA SURCHARGE: $250
FEDERAL POLICY FEE: $50
TOTAL AMOUNT DUE: $13,895

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: $11,845 / Contents: $4,985
1. Annual Subtotal: $16,409
1. Add ICC Premium: $49
1. Subtotal: $16,458
1. Subtract CRS Discount: –$4,937 (30%)
1. Subtotal: $11,521
2. Add Reserve Fund Assessment: $2,074 (18%)
1. Subtotal: $13,595
2. Add Probation Surcharge: N/A
3. Add HFIAA Surcharge: $250
4. Add Federal Policy Fee: $50
5. Total Amount Due: $13,895
3. How to Write

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

Determined Rates:
Building: 2.78 / 2.84
Contents: 3.55 / 5.11

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RATE CATEGORY:
- MANUAL
- SUBMIT FOR RATE
- PROVISIONAL RATING
- OTHER:

PAYMENT METHOD:
- CHECK
- CREDIT CARD

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: $5,644 / Contents: $1,655
2. Apply Deductible Factor: Building: 1.000 × $5,644 = $5,644 / Contents: 1.000 × $1,655 = $1,655
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $7,299
5. Add SRL Premium: $730 (10%)
6. Add ICC Premium: $56
7. Subtotal: $8,085
8. Subtract CRS Discount: N/A
9. Subtotal: $8,085
10. Add Reserve Fund Assessment: $1,455 (18%)
11. Subtotal: $9,540
12. Add Probation Surcharge: N/A
13. Add HFIAA Surcharge: $25
15. Total Amount Due: $9,615
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
- **Contents Location:** Lowest Floor Above Ground Level and Higher Floors
- **Date of Construction:** Pre-FIRM
- **Elevation Difference:** N/A
- **Floodproofed (Yes/No):** No

**Determined Rates:**
- Building: 2.88 / 2.64
- Contents: 3.61 / 4.74

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**RATE CATEGORY:**
- MANUAL
- SUBMIT FOR RATE
- PROVISIONAL RATING

**PAYMENT METHOD:**
- CHECK
- CREDIT CARD
- OTHER: __________

**ANNUAL SUBTOTAL:**
- ICC PREMIUM: $49
- SUBTOTAL: $11,251

**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**

**SIGNATURE OF INSURED (OPTIONAL)**

**PREMIUM CALCULATION:**
1. **Multiply Rate x $100 of Coverage:**
   - Building: $6,744 / Contents: $4,458
2. **Apply Deductible Factor:**
   - Building: 1.000 × $6,744 = $6,744 / Contents: 1.000 × $4,458 = $4,458
3. **Premium Reduction/Increase:**
   - Building: $0 / Contents: $0
4. **Annual Subtotal:**
   - $11,202
5. **Add ICC Premium:**
   - $49
6. **Subtotal:**
   - $11,251
7. **Subtract CRS Discount:**
   - N/A
8. **Subtotal:**
   - $11,251
9. **Add Reserve Fund Assessment:**
   - $2,025 (18%)
10. **Subtotal:**
    - $13,276
11. **Add Probation Surcharge:**
    - N/A
12. **Add HFIAA Surcharge:**
    - $25
13. **Add Federal Policy Fee:**
    - $50
14. **Total Amount Due:**
    - $13,351

**TOTAL AMOUNT DUE**

$13,351
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
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Pre-FIRM
- Elevation Difference: +1
- Floodproofed (Yes/No): No

Determined Rates:
Building: .78 / .08
Contents: .40 / .12

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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) (Optional) Date (MM/DD/YYYY)

Signature of Insurance Agent/Producer Date (MM/DD/YYYY)

Total Amount Due: $770

Premium Calculation:
1. Multiply Rate × $100 of Coverage: Building: $540 / Contents: $130
4. Annual Subtotal: $646
5. Add ICC Premium: $8
6. Subtotal: $654
7. Subtract CRS Discount: −$65 (10%)
8. Subtotal: $589
9. Add Reserve Fund Assessment: $106 (18%)
10. Subtotal: $695
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. Total Amount Due: $770
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
- Contents Location: Above Ground Level and Higher Floors
- Date of Construction: Post-FIRM
- Elevation Difference: +4
- Floodproofed (Yes/No): No

**Determined Rates:**
Building: .22 / .08
Contents: .22 / .12

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

PAYMENT METHOD:
- CHECK
- CREDIT CARD
- OTHER: 

**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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<tbody>
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**Premium Calculation:**
1. Multiply Rate x $100 of Coverage: Building: $645 / Contents: $750
2. Apply Deductible Factor: Building: .890 x $645 = $574 / Contents: .890 x $750 = $668
4. Annual Subtotal: $1,242
5. Add ICC Premium: $6
6. Subtotal: $1,248
7. Subtract CRS Discount: −$312 (25%)
8. Subtotal: $936
9. Add Reserve Fund Assessment: $168
10. Subtotal: $1,104
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. Total Amount Due: $1,404
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
- **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:** $1,195
- **Probation Surcharge:** N/A
- **HFIAA Surcharge:** Non-Primary Residence $250
- **Federal Policy Fee:** $50

**Determined Rates:**
- **Building:** 6.18 / 1.33
- **Contents:** 4.47 / 2.55

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**Rate Category:**
- MANUAL
- SUBMIT FOR RATE
- PROVISIONAL RATING
- PAYMENT METHOD:
- CHECK
- CREDIT CARD
- ANNUAL SUBTOTAL: $7,341
- ICC PREMIUM: $33
- SUBTOTAL: $7,374
- CRS PREMIUM DISCOUNT %: −$737
- SUBTOTAL: $6,637
- RESERVE FUND %: $1,195
- SUBTOTAL: $7,832
- PROBATION SURCHARGE: $0
- HFIAA SURCHARGE: $250
- FEDERAL POLICY FEE: $50
- TOTAL AMOUNT DUE: $8,132

**Premium Calculation:**
1. Multiply Rate × $100 of Coverage: Building: $4,905 / Contents: $3,031
3. Premium Reduction: Building: $4,905 − $4,537 = $368 / Contents: $3,031 − $2,804 = $227
4. Annual Subtotal: $7,341
5. Add ICC Premium: $33
6. Subtotal: $7,374
7. Subtract CRS Discount: −$737 (10%)
8. Subtotal: $6,637
9. Add Reserve Fund Assessment: $1,195 (18%)
10. Subtotal: $7,832
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. Total Amount Due: $8,132
3. How to Write

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%
- **Contents Location:** Lowest Floor Above Ground Level and Higher Floors
- **Date of Construction:** Post-'81
- **Elevation Difference:** –1
- **Floodproofed (Yes/No):** No

**Determined Rates:**

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<th>BASIC LIMITS</th>
<th>ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)</th>
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<td></td>
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**PAYMENT METHOD:**
- [ ] CHECK
- [ ] CREDIT CARD
- [ ] OTHER:

**SIGNATURE OF INSURANCE AGENT/PRODUCER**

**SIGNATURE OF INSURED (OPTIONAL)**

**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.

**Total Amount Due:** $15,782

**Premium Calculation:**

1. Multiply Rate x $100 of Coverage: Building: $12,575 / Contents: $3,891
4. Annual Subtotal: $13,996
5. Add ICC Premium: $16
6. Subtotal: $14,012
7. Subtract CRS Discount: $701 (5%)
8. Subtotal: $13,311
9. Add Reserve Fund Assessment: $2,396 (18%)
10. Subtotal: $15,707
11. Add Probation Surchage: N/A
12. Add HFIAA Surchage: $25
13. Add Federal Policy Fee: $50
14. Total Amount Due: $15,782

APRIL 2020 NFIP FLOOD INSURANCE MANUAL 3 • 88
3. How to Write

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 Premium: N/A
- CRS Discount: N/A
- Reserve Fund Assessment: $33
- Probation Surcharge: N/A
- HFIAA Surcharge: Primary Residence $25
- Federal Policy Fee: $25

Determined Rates:

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

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<th>AMOUNT OF INSURANCE</th>
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PAYMENT METHOD:
- MANUAL
- SUBMIT FOR RATE
- PROVISIONAL RATING

APPROVED: CHECK
- CREDIT CARD

ANNUAL SUBTOTAL: $178
- ICC PREMIUM: $0

SUBTOTAL: $178
- CRS PREMIUM DISCOUNT: $0
- SUBTOTAL: $178
- RESERVE FUND: $32
- SUBTOTAL: $210
- PROBATION SURCHARGE: $0
- HFIAA SURCHARGE: $25
- FEDERAL POLICY FEE: $25

TOTAL AMOUNT DUE: $260

NOTICE: BUILDING COVERAGE BENEFITS — EXCEPT FOR A RESIDENTIAL CONDOMINIUM BUILDING — ARE NOT AVAILABLE IF OTHER NFIP BUILDING COVERAGE HAS BEEN PURCHASED BY THE APPLICANT OR ANY OTHER PARTY FOR THE SAME BUILDING.

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

SIGNATURE OF INSURANCE AGENT/PRODUCER: ____________________________ DATE (MM/DD/YYYY): ____________

SIGNATURE OF INSURED (OPTIONAL): ____________________________ DATE (MM/DD/YYYY): ____________

Premium Calculation:
1. Multiply Rate x $100 of Coverage: Building: N/A / Contents: $178
2. Apply Deductible Factor: Building: N/A / Contents: $100,000 x $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: $32 (18%)
10. Subtotal: $210
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $25
14. Total Amount Due: $260

APRIL 2020 NFIP FLOOD INSURANCE MANUAL
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

**Determined Rates:**
Building: 1.56 / .26  
Contents: 1.20 / .16

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**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:
   - $952 (18%)
10. Subtotal:
    - $6,240
11. Add Probation Surcharge:
    - N/A
12. Add HFIAA Surcharge:
    - $250
13. Add Federal Policy Fee:
    - $50
14. Total Amount Due:
    - $6,540
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: $92
- Probation Surcharge: N/A
- HFIAA Surcharge:
  - Primary Residence: $25
- Federal Policy Fee: $50

Determined Rates:

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

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Rate Category:
- Manual
- Submit for Rate
- Provisional Rating

Payment Method:
- Check
- Credit Card
- Other:

Annual Subtotal: $503
ICC Premium: $6
Subtotal: $509

Notice: Building Coverage Benefits — Except for a Residential Condominium Building — Are Not Available If Other NFIP Building Coverage Has Been Purchased By the Applicant or Any Other Party For the Same Building.

The Above Statements Are Correct to the Best of My Knowledge. I Understand That Any False Statements May Be Punishable by Fine and/or Imprisonment Under Applicable Federal Law. See Reverse Side of Copies.

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
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: $92 (18%)
10. Subtotal: $601
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. Total Amount Due: $676

Total Amount Due: $676
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:** $263
- **Probation Surcharge:** N/A
- **HFIAA Surcharge:** Primary Residence $25
- **Federal Policy Fee:** $50

**Determined Rates:**

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**RATE CATEGORY:**
- MANUAL
- SUBMIT FOR RATE
- PROVISIONAL RATING

**PAYMENT METHOD:**
- CHECK
- CREDIT CARD
- OTHER: ________________

**ANNUAL SUBTOTAL:** $1,454
- ICC PREMIUM: $6
- CRS PREMIUM DISCOUNT %: $0
- SUBTOTAL: $1,460
- RESERVE FUND %: $263
- SUBTOTAL: $1,723
- PROBATION SURCHARGE: $0
- HFIAA SURCHARGE: $25
- FEDERAL POLICY FEE: $50
- TOTAL AMOUNT DUE: $1,798

**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: $263 (18%)
10. Subtotal: $1,723
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. **Total Amount Due:** $1,798
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
- CRS Premium: $8
- CRS Discount: N/A
- Reserve Fund Assessment: $71
- Probation Surcharge: N/A
- HFIAA Surcharge: 2–4 Family $250
- Federal Policy Fee: $50

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

<table>
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<tr>
<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
<th>ANNUAL PREMIUM</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
<th>ANNUAL PREMIUM</th>
<th>PREMIUM REDUCTION/INCREASE</th>
<th>TOTAL PREMIUM</th>
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<tr>
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<td>.13</td>
<td>$20</td>
<td>−$2</td>
<td>$113</td>
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</table>

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 %: N/A
SUBTOTAL: $395
RESERVE FUND %: $71
SUBTOTAL: $466
PROBATION SURCHARGE: N/A
HFIAA SURCHARGE: $250
FEDERAL POLICY FEE: $50
TOTAL AMOUNT DUE: $766

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: __________ / __________ / __________
Signature of Insured (Optional): __________ / __________ / __________

Premium Calculation:
1. Multiply Rate × $100 of Coverage: Building: $280 / Contents: $115
2. Apply Deductible Factor: Building: .980 × $280 = $274 / Contents: .980 × $115 = $113
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: $71 (18%)
10. Subtotal: $466
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. Total Amount Due: $766
### 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
- **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

**Determined Rates:**
- **Building:** 0.57 / 0.10
- **Contents:** 0.32 / 0.08

<table>
<thead>
<tr>
<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
<th>ANNUAL PREMIUM</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
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<th>PREMIUM REDUCTION/ INCREASE</th>
<th>TOTAL PREMIUM</th>
</tr>
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<tbody>
<tr>
<td><strong>BUILDING</strong></td>
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</table>

**RATE CATEGORY:**
- **MANUAL**
- **SUBMIT FOR RATE**
- **PROVISIONAL RATING**

**PAYMENT METHOD:**
- >>> CHECK
- >>> CREDIT CARD
- >>> OTHER: ______________

**PREMIUM REDUCTION/INCREASE**
- **ANNUAL SUBTOTAL:** $528
- **ICC PREMIUM:** $8
- **CRS PREMIUM DISCOUNT ** % $0
- **SUBTOTAL:** $536
- **RESERVE FUND %** $96
- **SUBTOTAL:** $632
- **PROBATION SURCHARGE:** $0
- **HFIAA SURCHARGE:** $250
- **FEDERAL POLICY FEE:** $50
- **TOTAL AMOUNT DUE:** $932

**Premium Calculation:**
1. Multiply Rate × $100 of Coverage: Building: $422 / Contents: $116
2. Apply Deductible Factor: Building: 0.980 × $422 = $414 / Contents: 0.980 × $116 = $114
4. Annual Subtotal: $528
5. Add ICC Premium: $8
6. Subtotal: $536
7. Subtract CRS Discount: N/A
8. Subtotal: $536
9. Add Reserve Fund Assessment: $96 (18%)
10. Subtotal: $632
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $50
14. **Total Amount Due:** **$932**
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  • Building Coverage: $135,000
• Occupancy: Single-Family Dwelling  • Contents Coverage: $60,000
• Number of Floors: 2 Floors  • ICC Premium: $8
• Basement/Enclosure: None  • CRS Rating: N/A
• Deductible: $1,250/$1,250  • CRS Discount: N/A
• Deductible Factor: .980  • Reserve Fund Assessment: $98
• Contents Location: Lowest Floor Above Ground  • Probation Surcharge: N/A
Level and Higher Floors  • HFIAA Surcharge: Primary Residence $25
• Date of Construction: Post-FIRM  • Federal Policy Fee: $50
• Elevation Difference: +5 (without BFE)  • Floodproofed (Yes/No): No
• Deductible Option, $1,250/$1,250, ZONE A (WITHOUT BFE), PRIMARY RESIDENCE

Determined Rates:
Building: .58 / .12  Contents: .33 / .08

<table>
<thead>
<tr>
<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
<th>ANNUAL PREMIUM</th>
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<th>RATE</th>
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<th>PREMIUM REDUCTION/ INCREASE</th>
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RATE CATEGORY: ☐ MANUAL ☐ SUBMIT FOR RATE ☐ PROVISIONAL RATING
PAYMENT METHOD: ☐ CHECK ☐ CREDIT CARD ☐ OTHER: ____________

ANNUAL SUBTOTAL: $538

CRS PREMIUM DISCOUNT % ☐ ☐ $0
SUBTOTAL: $546
RESERVE FUND % ☐ ☐ $98
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 INSURANCE AGENT/PRODUCER: ___________________________ DATE (MM/DD/YYYY): ___________

SIGNATURE OF INSURED (OPTIONAL): ___________________________ DATE (MM/DD/YYYY): ___________

Premium Calculation:
1. Multiply Rate × $100 of Coverage: Building: $438 / Contents: $111
4. Annual Subtotal: $538
5. Add ICC Premium: $8
6. Subtotal: $546
7. Subtract CRS Discount: N/A
8. Subtotal: $546
9. Add Reserve Fund Assessment: $98 (18%)
10. Subtotal: $644
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $25
13. Add Federal Policy Fee: $50
14. Total Amount Due: $719
3. How to Write

### 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: 1/8/2020
- 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 AND CONTENTS COVERAGE COMBINATION**

<table>
<thead>
<tr>
<th>REQUESTED COVERAGE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>BUILDING COVERAGE</td>
<td>$200,000</td>
</tr>
<tr>
<td>CONTENTS COVERAGE / CONTENTS ONLY</td>
<td>$80,000</td>
</tr>
</tbody>
</table>

**PREMIUM CALCULATION:**

1. Enter the coverage amounts:
   - Building: $200,000 / Contents: $80,000
2. Select Base Premium: $362
3. Apply the Multiplier: 1.000
4. Adjusted Premium: $362
5. Add ICC Premium: $8
6. Subtotal: $370
7. Enter Reserve Fund Assessment Percentage: 15%
8. Add Reserve Fund Assessment Amount: $56
9. Subtotal: $426
10. HFIAA Surcharge: $25
11. Add Federal Policy Fee: $25
12. Total Prepaid Amount: $476

**FEES AND SURCHARGES**
- HFIAA SURCHARGE: $25
- PROBATION SURCHARGE: $0
- FEDERAL POLICY FEE: $25
- TOTAL AMOUNT DUE: $476

Indicate the rate table used for the base premium: 3A
Risk Rating Method: □ 7 - PRP □ R - NEWLY MAPPED
NEWLY MAPPED RATING EXAMPLE
ZONE X, NEWLY MAPPED INTO SFHA ON 8/1/2019, $1,250/$1,250 DEDUCTIBLE, PRIMARY RESIDENCE

Essential Data to Determine Appropriate Rates and Premium:

REGULAR PROGRAM:

- Flood Zone: X
- Policy Effective Date: 1/3/2020
- 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: $50
- 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

<table>
<thead>
<tr>
<th>REQUESTED COVERAGE</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>BUILDING COVERAGE</td>
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<tr>
<td>CONTENTS COVERAGE / CONTENTS ONLY</td>
<td>$60,000</td>
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</table>

PREMIUM CALCULATION:

1. Enter the coverage amounts:
   - Building: $150,000 / Contents: $60,000
2. Select Base Premium: $328
3. Apply the Multiplier: 1.000
4. Adjusted Premium: $328
5. Add ICC Premium: $8
6. Subtotal: $336
7. Enter Reserve Fund Assessment Percentage: 15%
8. Add Reserve Fund Assessment Amount: $50
9. Subtotal: $386
10. HFIAA Surcharge: $25
11. Add Federal Policy Fee: $50
12. Total Prepaid Amount: $461

FEES AND SURCHARGES

<table>
<thead>
<tr>
<th>SURCHARGE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
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<td>HFIAA SURCHARGE</td>
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<tr>
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<tr>
<td>FEDERAL POLICY FEE</td>
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<tr>
<td>TOTAL AMOUNT DUE</td>
<td>$461</td>
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</table>

INDICATE THE RATE TABLE USED FOR THE BASE PREMIUM: 3
RISK RATING METHOD: ☐ 7 – PRP ☐ R – NEWLY MAPPED
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: $655
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee: $400

DETERMINED RATES:

Building: 1.20 / 1.57  
Contents: 1.52 / 2.03

<table>
<thead>
<tr>
<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
<th>ANNUAL PREMIUM</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
<th>ANNUAL PREMIUM</th>
<th>PREMIUM REDUCTION/INCREASE</th>
<th>TOTAL PREMIUM</th>
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<td>$0</td>
<td>1.57</td>
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<td>$1,680</td>
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<tr>
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<td>$380</td>
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<td>2.03</td>
<td>$1,523</td>
<td>$0</td>
<td>$1,903</td>
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</table>

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

PAYMENT METHOD:  
- CHECK  
- CREDIT CARD  
- OTHER: ___

ANNUAL SUBTOTAL: $3,583  
ICC PREMIUM: $56

SUBTOTAL: $3,639  
CRS PREMIUM DISCOUNT: ___%  
RESERVE FUND: ___%  
$655

SUBTOTAL: $4,294  
PROBATION SURCHARGE: $0

SUBTOTAL: $4,294  
HFIAA SURCHARGE: $250

FEDERAL POLICY FEE: $400  
TOTAL AMOUNT DUE: $4,944

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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PREMIUM CALCULATION:

1. Multiply Rate × $100 of Coverage:  
   - Building: $1,680 / Contents: $1,903
2. Apply Deductible Factor:  
   - Building: 1.000 × $1,680 = $1,680 / Contents: 1.000 × $1,903 = $1,903
3. Premium Reduction/Increase:  
   - Building: $0 / Contents: $0
4. Annual Subtotal:  
   - $3,583
5. Add ICC Premium:  
   - $56
6. Subtotal:  
   - $3,639
7. Subtract CRS Discount:  
   - N/A
8. Subtotal:  
   - $3,639
9. Add Reserve Fund Assessment:  
   - $655 (18%)
10. Subtotal:  
    - $4,294
11. Add Probation Surcharge:  
    - N/A
12. Add HFIAA Surcharge:  
    - $250
13. Add Federal Policy Fee:  
    - $400
14. Total Amount Due:  
    - $4,944

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:

Claim Payment is determined as follows:

(Insurance Carried) $140,000 × (Amount of Loss) $100,000 = (Limit of Recovery) $29,167 – 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: $1,110
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee: $400

#### Determined Rates:

<table>
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<tr>
<th></th>
<th>Building: 1.09 / 1.08</th>
<th>Contents: 1.52 / 2.03</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated Building Replacement Cost (Including Foundation): $600,000</td>
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</tbody>
</table>

#### Premium Calculation:

1. Multiply Rate × $100 of Coverage: Building: $5,220 / Contents: $888
2. Apply Deductible: Building: 1.00 × $5,220 = $5,220 / Contents: 1.00 × $888 = $888
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $6,108
5. Add ICC Premium: $56
6. Subtotal: $6,164
7. Subtract CRS Discount: N/A
8. Subtotal: $6,164
9. Add Reserve Fund Assessment: $1,110 (18%)
10. Subtotal: $7,274
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $400
14. Total Amount Due: $7,924

#### Claims Adjustment with Coinsurance Provision:

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

---

**Note:** Building coverage benefits – except for a residential condominium building – are not available if other NFIP building coverage has been purchased by the applicant or any other party for the same building.

The above statements are correct to the best of my knowledge. I understand that any false statements may be punishable by fine and/or imprisonment under applicable federal law. See reverse side of copies.

---

**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: $5,220 / Contents: $888
2. Apply Deductible: Building: 1.00 × $5,220 = $5,220 / Contents: 1.00 × $888 = $888
3. Premium Reduction/Increase: Building: $0 / Contents: $0
4. Annual Subtotal: $6,108
5. Add ICC Premium: $56
6. Subtotal: $6,164
7. Subtract CRS Discount: N/A
8. Subtotal: $6,164
9. Add Reserve Fund Assessment: $1,110 (18%)
10. Subtotal: $7,274
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $400
14. Total Amount Due: $7,924

---

**CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:**

Coinsurance Penalty does not apply since minimum insurance amount of 80% was met.
CONDO 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 $4,937
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee $150

DETERMINED RATES:
Building: 2.62 / 2.56  Contents: 3.61 / 4.84

ESTIMATED BUILDING REPLACEMENT COST (INCLUDING FOUNDATION): $1,200,000

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<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>BASIC LIMITS</th>
<th>ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)</th>
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<th>CONTENTS $2,000</th>
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<td>2.56 $19,456</td>
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<td>CONTENTS</td>
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<td>$25,000</td>
<td>3.61 $903</td>
<td>$15,000</td>
<td>4.84 $726</td>
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</tbody>
</table>

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

PAYMENT METHOD:
- CHECK
- CREDIT CARD
- OTHER:

PREMIUM CALCULATION:
1. Multiply Rate × $100 of Coverage: Building: $25,744 / Contents: $1,629
2. Apply Deductible Factor: Building: 1.000 × $25,744 = $25,744 / Contents: 1.000 × $1,629 = $1,629
3. Premium Reduction: Building: $0 / Contents: $0
4. Annual Subtotal: $27,373
5. Add ICC Premium: $56
6. Subtotal: $27,429
7. Subtract CRS Discount: N/A
8. Subtotal: $27,429
9. Add Reserve Fund Assessment: $4,937 (18%)
10. Subtotal: $32,366
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $150
14. Total Amount Due: $32,766

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
- **Contents Location:** Lowest Floor Above Ground Level & Higher
- **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:** $1,067
- **Probation Surcharge:** N/A
- **HFIAA Surcharge:** $250
- **Federal Policy Fee:** $800

#### DETERMINED RATES:

**Building:** .77 / .08  
**Contents:** .45 / .12  

<table>
<thead>
<tr>
<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
<th>ANNUAL PREMIUM</th>
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<tbody>
<tr>
<td><strong>BUILDING</strong></td>
<td>$750,000</td>
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<td>.77</td>
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<td><strong>CONTENTS</strong></td>
<td>$100,000</td>
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<table>
<thead>
<tr>
<th>BASIC LIMITS</th>
<th>ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)</th>
<th>DEDUCTIBLE</th>
<th>TOTAL PREMIUM</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>BUILDING $1,500</td>
<td>CONTENTS $1,500</td>
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<tr>
<td>AMOUNT OF INSURANCE</td>
<td>PREMIUM REDUCTION/INCREASE</td>
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<tr>
<td>Building</td>
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<tr>
<td>Contents</td>
<td>$25,000</td>
<td>$113</td>
<td>$2</td>
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</table>

#### PREMIUM CALCULATION:
1. Multiply Rate × $100 of Coverage:  
   - **Building:** $5,775 / Contents: $203
2. Apply Deductible Factor:  
   - **Building:** .990 × $5,775 = $5,717 / Contents: .990 × $203 = $201
3. Premium Reduction:  
   - **Building:** $5,775 – $5,717 = $58 / Contents: $203 – $201 = $2
4. Annual Subtotal: $5,918
5. Add ICC Premium: $8
6. Subtotal: $5,926
7. Subtract CRS Discount: N/A
8. Subtotal: $5,926
9. Add Reserve Fund Assessment: $1,067 (18%)
10. Subtotal: $6,993
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $800
14. Total Amount Due: $8,043

#### CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:
Claim Payment is determined as follows:

\[
\text{Claim Payment} = \frac{(\text{Insurance Carried} \times \text{Amount of Loss}) - \text{Deductible}}{\text{(Insurance Required)}} 
\]

\[
\text{Claim Payment} = \frac{750,000 \times 300,000 - 896,000}{896,000} = \frac{251,116 - 896,000}{896,000} = \frac{146,884}{896,000} = 0.163 
\]

(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
- **Contents Location:** Lowest Floor Above Ground Level and Higher.
- **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:** $316
- **Probation Surcharge:** N/A
- **HFIAA Surcharge:** RCBAP $250
- **Federal Policy Fee:** $400

**Determined Rates:**

Building: .43 / .08  
Contents: .34 / .12

**Estimated Building Replacement Cost**

<table>
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<tr>
<th>Insurance Coverage</th>
<th>Total Amount of Insurance</th>
<th>Basic Limits</th>
<th>Additional Limits (Regular Program Only)</th>
<th>Deductible</th>
<th>Total Premium</th>
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<tr>
<td>Building</td>
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<td>.43</td>
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<td>Contents</td>
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<td>.51</td>
<td>$50</td>
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</table>

**Premium Calculation:**

1. Multiply Rate x $100 of Coverage: Building: $1,740 / Contents: $51
2. Apply Deductible Factor: Building: .975 x $1,740 = $1,697 / Contents: .975 x $51 = $50
4. Annual Subtotal: $1,747
5. Add ICC Premium: $8
6. Subtotal: $1,755
7. Subtract CRS Discount: N/A
8. Subtotal: $1,755
9. Add Reserve Fund Assessment: $316 (18%)
10. Subtotal: $2,071
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $400
14. Total Amount Due: $2,721

**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
- **Contents Location:** Lowest Floor Above Ground Level Only
- **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:** $1,053
- **Probation Surcharge:** N/A
- **HFIAA Surcharge:** RCBAP $250
- **Federal Policy Fee:** $2,000

### DETERMINED RATES:
- **Estimate Building Replacement Cost:**
  - Basic Limits: $1,110,000
  - Annual Premium: $2,345
- **Contents:**
  - Basic Limits: $100,000
  - Annual Premium: $370

### Premium Calculation:
1. **Multiply Rate × $100 of Coverage:**
   - Building: $5,926 / Contents: $1,818
2. **Apply Deductible Factor:**
   - Building: $5,926 / Contents: $1,818
3. **Premium Reduction/Increase:**
   - Building: $0 / Contents: $0
4. **Annual Subtotal:** $7,744
5. **Add ICC Premium:** $56
6. **Subtotal:** $7,800
7. **Subtract CRS Discount:** $1,950 (25%)
8. **Subtotal:** $5,850
9. **Add Reserve Fund Assessment:** $1,053 (18%)
10. **Subtotal:** $6,903
11. **Add Probation Surcharge:** $0
12. **Add HFIAA Surcharge:** $250
13. **Add Federal Policy Fee:** $2,000
14. **Total Amount Due:** $9,153

### Claims Adjustment with Coinsurance Provision:
Claim Payment is determined as follows:

\[
\text{Claim Payment} = (\text{Insurance Carried}) \times (\text{Amount of Loss}) - \text{Less Deductible}
\]

\[
\text{Claim Payment} = (1,110,000) \times (200,000) = ($185,000 - $200,000) = ($1,950)
\]

(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: $2,981
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee: $2,000

DETERMINED RATES:
Building: 1.45 / .511  Contents: 1.48 / 1.63

<table>
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<tr>
<th>INSURANCE COVERAGE</th>
<th>AMOUNT OF INSURANCE</th>
<th>RATE</th>
<th>ANNUAL PREMIUM</th>
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<tbody>
<tr>
<td>BUILDING</td>
<td>$3,000,000</td>
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<td>$2,538</td>
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<table>
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<tr>
<th>BASIC LIMITS</th>
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<th>RATE</th>
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<td>BUILDING</td>
<td>$3,000,000</td>
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<tr>
<td>CONTENTS</td>
<td>$100,000</td>
<td>1.48</td>
<td>$1,223</td>
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<table>
<thead>
<tr>
<th>ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)</th>
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<tbody>
<tr>
<td>BUILDING</td>
<td>$16,753</td>
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RATE CATEGORY: □ MANUAL □ SUBMIT FOR RATE □ PROVISIONAL RATING
PAYMENT METHOD: □ CHECK □ CREDIT CARD

ANNUAL SUBTOTAL: $18,346
ICC PREMIUM: $56
SUBTOTAL: $18,402
CRS PREMIUM DISCOUNT: – $1,840
SUBTOTAL: $16,562
RESERVE FUND: $2,981
SUBTOTAL: $19,543
PROBATION SURCHARGE: N/A
HFIAA SURCHARGE: $250
FEDERAL POLICY FEE: $2,000
TOTAL AMOUNT DUE: $21,793

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)
- Contents Location: Lowest Floor Above Ground Level and Higher
- 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: $2,274
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee: $2,000

DETERMINED RATES:

Building: 2.36 / .077  Contents: .75 / .12

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<th>INSURANCE COVERAGE</th>
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<th>BASIC LIMITS</th>
<th>ADDITIONAL LIMITS (REGULAR PROGRAM ONLY)</th>
<th>DEDUCTIBLE</th>
<th>TOTAL PREMIUM</th>
</tr>
</thead>
<tbody>
<tr>
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<td>.077 $9,105</td>
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<tr>
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<td>$25,000</td>
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<td>$75,000</td>
<td>.12 $90</td>
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</table>

RATE CATEGORY:

- MANUAL
- SUBMIT FOR RATE
- PROVISIONAL RATING

PAYMENT METHOD:

- CHECK
- CREDIT CARD
- OTHER

ANNUAL SUBTOTAL: $13,292
SUBTOTAL: $13,300
CRS PREMIUM DISCOUNT: $665
SUBTOTAL: $12,635
RESERVE FUND: $2,274
SUBTOTAL: $14,909
PROBATION SURCHARGE: $0
HFIAA SURCHARGE: $250
FEDERAL POLICY FEE: $2,000
TOTAL AMOUNT DUE: $17,159

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)
- Reserve Fund Assessment: $3,411
- Probation Surcharge: N/A
- HFIAA Surcharge: RCBAP $250
- Federal Policy Fee: $2,000

DETERMINED RATES:
Building: 1.45 / .383  Contents: 1.48 / 1.93

<table>
<thead>
<tr>
<th>INSURANCE COVERAGE</th>
<th>TOTAL AMOUNT OF INSURANCE</th>
<th>AMOUNT OF INSURANCE/ANNUAL PREMIUM</th>
<th>AMOUNT OF INSURANCE/ANNUAL PREMIUM</th>
<th>PREMIUM REDUCTION/INCREASE</th>
<th>TOTAL PREMIUM</th>
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<tbody>
<tr>
<td>BUILDING $4,000,000</td>
<td>$175,000 / 1.45 $2,538</td>
<td>$3,825,000 / .383 $14,650</td>
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<td>$17,077</td>
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<tr>
<td>CONTENTS $100,000</td>
<td>$25,000 / 1.48 $370</td>
<td>$75,000 / 1.93 $1,448</td>
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<td>$1,818</td>
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</table>

RATE CATEGORY: MANUAL  SUBMIT FOR RATE  PROVISIONAL RATE  PAYMENT METHOD: CHECK  CREDIT CARD

NOTICE: BUILDING COVERAGE BENEFITS — EXCEPT FOR A RESIDENTIAL CONDOMINIUM BUILDING — ARE NOT AVAILABLE IF OTHER NFIP BUILDING COVERAGE HAS BEEN PURCHASED BY THE APPLICANT OR ANY OTHER PARTY FOR THE SAME BUILDING.

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

PREMIUM CALCULATION:
1. Multiply Rate × $100 of Coverage: Building: $17,188 / Contents: $1,818
2. Apply Deductible Factor: Building: .980 × $17,188 = $17,077 / Maximum Total Discount of $111 applies
3. Premium Reduction: Building: $17,188 − $17,077 = $111 / Contents: $0
4. Annual Subtotal: $18,895
5. Add ICC Premium: $56
6. Subtotal: $18,951
7. Subtract CRS Discount: $0
8. Subtotal: $18,951
9. Add Reserve Fund Assessment: $3,411 (18%)
10. Subtotal: $22,362
11. Add Probation Surcharge: N/A
12. Add HFIAA Surcharge: $250
13. Add Federal Policy Fee: $2,000
14. Total Amount Due: $24,612

CLAIMS ADJUSTMENT WITH COINSURANCE PROVISION:
Claim Payment is determined as follows:
(Insurance Carried) $4,000,000 × (Amount of Loss) $1,000,000 = (Limit of Recovery) $277,778 – Less Deductible
(Coinsurance Penalty applies because minimum insurance amount of $14,400,000 was not met.)