





**Total Values at 100% Replacement Cost** (subject to 80% co-insurance clause)

If more than one building, please schedule the building on page six of the application and enter totals below.

Building(s) Amount \$ \_\_\_\_\_

Contents Amount \$ \_\_\_\_\_

Business Income w/Extra Expense: \$ \_\_\_\_\_

Total Amount of Insurance \$ \_\_\_\_\_

**Deductibles**

<p><b>Earthquake:</b></p> <input type="checkbox"/> 5% of dwelling <input type="checkbox"/> 10% of dwelling <input type="checkbox"/> 15% of dwelling <input type="checkbox"/> 20% of dwelling	<p><b>Flood:</b></p> <input type="checkbox"/> \$5,000 <input type="checkbox"/> \$25,000 <input type="checkbox"/> \$50,000 <input type="checkbox"/> 5% of dwelling <input type="checkbox"/> 10% of dwelling	<p><b>Landslide:</b></p> <input type="checkbox"/> 5% of dwelling <input type="checkbox"/> 10% of dwelling
---	--	--

Contents are valued at actual cash value. Replacement cost can be purchased for an additional premium. Do you wish to have replacement cost valuation on contents? Yes  No

**Earthquake/Landslide Underwriting Questions**

Is the building in or at the mouth of a gully, gorge, ravine, canyon, or the like? Yes  No

If yes, explain: \_\_\_\_\_

Is the building in the path of a potential landslide or mud flow? Yes  No

If yes, explain: \_\_\_\_\_

Is the building on or at the base of a steep slope? Yes  No

If yes, explain: \_\_\_\_\_

Is the building built upon a landfill? Yes  No

If yes, explain: \_\_\_\_\_

Is there existing cracking of walls or foundations? Yes  No

If yes, explain: \_\_\_\_\_

Are you aware of any other condition which exposes the building or contents to loss by flood or landslide? Yes  No

If yes, explain: \_\_\_\_\_



Have there been any landslides within 1/2 mile of the building? Yes  No

If yes, explain: \_\_\_\_\_

Have there been any forest/ brush fires within 5 miles of the building in the last 5 years? Yes  No

If yes, distance from the property and approximate date of the fire: \_\_\_\_\_

Does the building have elevated portions not directly in contact with the ground? Yes  No

If yes, is it one of the following:

Deck or patio Square footage \_\_\_\_\_

Other Describe: \_\_\_\_\_

Square footage \_\_\_\_\_

How are they supported (pilings, slab foundation, perimeter wall)? Please describe: \_\_\_\_\_

Does the building have gutters & drains that carry water away from hillsides or banks below or surrounding the structure? Yes  No

If yes, explain: \_\_\_\_\_

Do rain gutters and roof drains empty  on to the ground or  into a collection system

Does the building have retaining walls attached to the structure? Yes  No

Does the building have retaining walls above or below the home? Yes  No

Any cracking, crumbling, shifting, tipping or other signed or failure or movement? Yes  No

If yes, explain: \_\_\_\_\_

Was retaining wall designed/built by firm licensed for such specialized work or General contractor who built home or development?  Specialized  General Contractor

Does building have any special design features specifically incorporated to resist land movement? Yes  No

If yes, explain (or include copy of any reports or specs that describe): \_\_\_\_\_

How many feet does flat ground extend from the building before either upward or downward sloping occurs? Please list in feet:

North \_\_\_\_\_  Up  Down South \_\_\_\_\_  Up  Down

East \_\_\_\_\_  Up  Down West \_\_\_\_\_  Up  Down

Regarding slope, banks, hillsides, and/or ravines, are there any signs of the following (check all that apply):

- Raw or new gullies
- Recent slumping, creeping, or mud flows
- Recent slides or crumbling of hill or bank
- Bulging in any portion of hillside indicating movement from pressure

If any of the above are checked, please describe: \_\_\_\_\_



**Flood Underwriting Questions**

Is your property in a flood zone? Yes  No   
If yes, please specify which zone. \_\_\_\_\_

Do you carry flood insurance through the NFIP? Yes  No   
If yes, what limits? \_\_\_\_\_

Is the building near a lake, reservoir, pond, river, stream, creek, canal, or other body of water? Yes  No   
If yes, answer the following:  
How many horizontal feet is the building from the water? \_\_\_\_\_  
How many vertical feet does the building lie  above or  below the water? \_\_\_\_\_  
What is the name of the river, creek, stream, lake, etc.? \_\_\_\_\_

Does the building lie on a lot where water collects during periods of rain or snowmelt? Yes  No   
If yes, explain: \_\_\_\_\_

Is the lot graded so that surface water flows away from the building and stairwells or other entries at time of rain or snowmelt? Yes  No   
If no, explain: \_\_\_\_\_

Is the building provided with rain gutters and downspouts so that snowmelt and rainwater from the roof are directed away from window wells, stairwells, or other entries: Yes  No   
If no, explain: \_\_\_\_\_

Is the property less than 1 mile to a coastal body of water (Pacific Ocean, Puget Sound, etc.)? Yes  No   
If yes, do you wish to purchase Tsunami coverage for an additional 25% surcharge? Yes  No

Has the building or contents previously received damage from a peril being requested? Yes  No   
If yes, please explain indicating the dollar amount of damage, when it occurred, and what has been done to prevent future damage. \_\_\_\_\_

---

National Disaster Program  
Commercial Application

**BIGFOOT**  
i n s u r a n c e

**Commercial**  
Insurance Group, LLC  
855-900-2960



If more than one Commercial building, please schedule the buildings below:

Bldg No.	Stories	Construction Type	Year Built	Building Limit (RCV)	Contents Limit	BI/EE Limit

**NOTICE – PLEASE READ CAREFULLY**

It is understood and agreed that the information above is for underwriting purposes only. Solicitation and receipt is not, in and of itself, a promise to offer a quotation not issue a policy until acceptance has been made by correspondents authorized to do so hereunder.

The applicant acknowledges that any contract issued will be full reliance upon statements and representations made in this application. False or misleading answers could result in the policy being null and void.

Products and services are offered through Safehold Special Risk. Coverage is provided by unaffiliated insurance companies.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Producing Agent/Broker**

Name of Agency		Agent Name	
Street Address			Suite No.
City		State	Zipcode
Agency Telephone Number	Agent's Email Address		