National Disaster Program Residential Application RICFOT



Perils requested to be covered (check all that apply):

☐ Earthquake ☐	Flood	□Landsl	ide							
Requested Effective	e Date		Named Ins	ured						
Mailing Address										
City			County			State		Zip	code	
Phone Number			Email					•		
Location Informa										
Insured Property A	ddress <i>(if (</i>	different f	rom mailing	address	5)					
City				Count	У		State		Zipcode	9
Year built	No. of st	ories (incl.	basement)	Total S	Square Footage	Constr	uction	n Type	•	
Dwellings over 30 y	ears old n	eed upda	ted informat	tion on v	when the following	ng syste	ms we	ere repla	ced/renc	vated:
Electrical (year per	formed)	Heating ((year perforr	med)	Plumbing (year	perform	ned)	Roof (y	ear perfo	rmed)
Location Type ☐ Single Family Ho ☐ Mobile Home	_	· -	/Apartment		Condominium		/lanufa	actured	Home	-
Is the home occupi	ed by owr	ner or fami	ily member ((if no, pled	ase complete the com	mercial a _l	oplicati	on)	Yes □	No 🗆
Do you maintain at	least an H	10-3 (HO-6	6 for condos) insura	nce policy on you	ır home	?		Yes □	No □
Does the home hav									Yes □	No □
If yes, ans		Ü								
			erty in the b	asemen	t area: \$				—	—
		ide stairw							Yes □	No 🗆
i. 			overed by a			2			Yes □	No 🗆
ii.			_	t the bo	ottom of the stair	S !			Yes □	No 🗆
			dow wells?	lo nan-	ว				Yes □	No □
i.	ii yes, i	are tile Wi	ndows doub	ne hatte	:				Yes 🗌	No 🗆

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Mortgagee Information

Mortgage Company			
Street Address			Suite No.
City		State	Zipcode
Should mortgage company be billed a Yes □ No □	at renewal?	Loan Nu	mber
2) 10% of dwelling amount for3) 10% of dwelling amount for alternative accommodations	automatically receive coverage for building contents, but not to excess appurtenant structures (i.e. gara living expenses, but not to excees if your home is rendered uninha	eed \$75,0 0 ge, shed), d \$25,000 bitable by	but not to exceed \$50,000 . This would pay the cost of
•	welling Coverage Amount Requires dwelling coverage to be 100		ement cost)
If the percentage amounts stated abo coverage. This coverage will be for th			coverage types, choose Specified
☐ Specified Coverage D	welling Coverage Amount	\$	
C	ontents Coverage Amount	\$	
А	ppurtenant Structures:	\$	
Deductibles			
Earthquake:	Flood: ☐ \$1,000 ☐ \$5,000 ☐ 5% of dwelling ☐ 10% of dwelling		andslide: □ 5% of dwelling □ 10% of dwelling
Contents are valued at actual cash va	lue. Replacement cost can be pu	rchased fo	r an

additional premium. Do you wish to have replacement cost valuation on contents?

Yes □ No □

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Earthquake/Landslide Underwriting Questions (if requesting flood only, skip to next page)

Is the home in or at the mouth of a gully, gorge, ra	wine, canyon, or the like?	Yes □	No □
If yes, explain:			
Is the home in the path of a potential landslide or	mud flow?	Yes □	No \square
If yes, explain:			
Is the home on or at the base of a steep slope?		Yes □	No \square
If yes, explain:			
Is the home 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 expos	ses the home, any appurtenant structure, or		
personal property to loss by flood or landslide?		Yes □	No □
If yes, explain:			
Have there been any landslides within $rac{1}{2}$ mile of yo	our home?	Yes □	No □
If yes, explain:			
Have there been any forest/ brush fires within 5 m	niles of your home in the last 5 years?	Yes □	No □
If yes, distance from your property and a	pproximate date of the fire:		
Does the home have elevated portions not directly	y in contact with the ground?	Yes □	No 🗆
If yes, is it one of the following:			
☐ Deck or patio	Square footage		
\square Extension of main dwelling	Rooms (den, living, etc.)		
	Square footage		
□Other	Describe:		
	Square footage		
How are they supported (pilings, slab fou	ndation, perimeter wall)? Please describe:		
Does home have gutters & drains that carry water	away from hillsides or banks below		
or surrounding the structure?	,	Yes □	No □
If yes, explain:			
	to the ground or \square into a collection system		
Does the home have retaining walls attached to th	ne structure?	Yes □	No □
Does the home have retaining walls above or belo	w the home?	Yes □	No \square
Any cracking, crumbling, shifting, tipping or other	signed or failure or movement?	Yes □	No □
If yes, explain:			

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Was retaining wall de	esigned/built by firm licens	ed for such special	ized work or			
General contractor who built home or development?						
Does home have any	special design features spe	ecifically incorpora	ted to resist land			
movement?				Yes □	No □	
If yes, explai	in (or include copy of any re	eports or specs tha	t describe):			
How many feet does list in feet:	flat ground extend from th	ne home before eit	her upward or downward s	oping occur	s? Please	
North	□Up □Down	South	□Up □Down			
East	□Up □Down	West	□Up □Down			
Regarding slope, ban	ks, hillsides, and/or ravines	s, are there any sig	ns of the following (check a	ll that apply):	
☐ Raw or ne	w gullies					
☐Recent slu	umping, creeping, or mud f	lows				
☐Recent sli	des or crumbling of hill or l	bank				
☐Bulging in	any portion of hillside indi	icating movement	from pressure			
If any of the above ar	e checked, please describe	2:				
Flood Underwriting	g Questions (if requestin	ng EQ/landslide o	only, skip to next page)	Yes □	No □	
	e specify which zone.			163	140 🗀	
	ke, reservoir, pond, river, s			Yes □	No □	
If yes, answe	er the following:		i, or other body or water:			
			below the water?			
			below the water.			
			rain or snowmelt?		No □	
If yes, explai		01				
		ay from the home	and stairwells or other entr	ies		
at time of rain or sno		,		Yes □	No □	
	n:					
•			owmelt and rainwater from	1		
	away from window wells,			Yes □	No □	
	n:					
•			Ocean, Puget Sound, etc.)?	Yes □	No □	
	u wish to nurchase Tsunam		,	Yes 🗆	No □	

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Has the home, appurtenant structure	(s), or personal prop	erty previously	received damage		
from a peril being requested?				Yes □ No	
If yes, please explain indication	ng the dollar amoun	t of damage, wh	nen it occurred, and		
what has been done to preve	ent future damage				
	_				
	NOTICE – PLEASE	READ CAREFU	ILLY		
To the best of my knowledge, the abo				t any contract issu	ued
will be in full reliance upon statement	s & representations	made in this ap	plication. This appli	cation will be mad	
part of the policy. False or misleading acknowledge that there is no coverage					nd
that there are waiting periods, before		_	•	epiesentative an	IG
Products and services are offered thro	ough Safehold Specia	al Risk. Coverage	e is provided by una	ffiliated insurance	е
companies.					
Signature of Applicant			Date		
•					
Producing Agent					
Name of Agency		Agent Name			
				1	
Street Address				Suite No.	
City			State	Zipcode	
city			State	Zipeoue	
Office Telephone Number	Agent's Email Add	ress		<u>I</u>	