

FLORIDA WINDSTORM UNDERWRITING ASSOCIATION

RESIDENTIAL-DWELLING

FWUA 01-R (7/2000)

PREVIOUSLY FAXED (DATE): _____

FWUA APPLICATION FAX #: (904) 281-5090

SEE MANUAL FOR GUIDE TO COMPLETE APPLICATION.

(1) NEW ENDORSEMENT TITLE TRANSFER PREVIOUS OR CURRENT POLICY #:

(2) LICENSED FLORIDA PRODUCER NAME, MAILING ADDRESS AND TELEPHONE #

 PRODUCER LICENSE # (REQUIRED): _____

(3) AGENCY CODE #

(4) APPLICANT'S NAME AND MAILING ADDRESS
 LAST FIRST MI

(5) MORTGAGEE/LOSS PAYEE (NAME AND ADDRESS) TO ITEM #:

(6) PAYOR: MORTGAGEE INSURED PRODUCER
 OR OTHER PAYOR: _____

LOAN #: _____

(7) # STORIES: ONE TWO THREE

(8) CONSTRUCTION: FRAME MASONRY REINFORCED MASONRY* OTHER

(9) OCCUPANCY: SEE MANUAL FOR OCCUPANCY CODES

(10) ADDITIONAL INFO: UNDER CONSTRUCTION ON STILTS/PILINGS RISK(S) INSURED BY ASSOCIATION OF PROPERTY OWNERS

(11) IS PROPERTY SECONDARY RESIDENCE: YES NO

(12) IS PROPERTY OCCUPIED BY: OWNER TENANT

(13) TENANT CONTENTS: YES NO

(14) BCEGS GRADE: RESIDENTIAL RATE TABLE

(15) TERR CODE: _____

(16) ROOF TYPE: GABLE HIP FLAT OTHER

(17) ROOF COVERING: SHINGLES CLAY TILE CONCRETE TILE SLATE REINFORCED CONCRETE* OTHER

(18) ROOF SHEATHING ATTACHMENT: STANDARD (6D NAILS) SUPERIOR (8D OR LARGER NAILS)* ADHESIVE*

(19) OPENINGS: GARAGE ATTACHED TO DWELLING: NONE SINGLE-WIDE DOUBLE/MULTIPLE

(20) OPENINGS: SLIDING GLASS DOORS: (EXITS TO PORCH, PATIO OR EXTERIOR OF DWELLING): NONE 1 DOOR 2 DOORS 3 OR MORE DOORS

(21) ATTACHED PORCHES/CARPORTS: NONE PORCH CARPORT PORCH & CARPORT

(22) BUILDING INFORMATION* SECONDARY WATER RESISTANCE: YES NO
 IF YES, WHICH TYPE: EXTERIOR INTERIOR

(23/24) BUILDING INFORMATION* (25) IF CONDO/APT/TWHS/MOTEL

NAME OF COMPLEX: _____

TOTAL # OF UNITS IN BLDG: _____ SPECIFIC UNIT #: _____ ABOVE GROUND FLOOR: YES NO

BUILDING #/PHASE #: _____

(26) IF MOBILE HOME COMPLIES WITH ANSI/ANCE CODE #7-88: YES NO
 MODEL YEAR/NAME: _____

DIMENSIONS: _____ MOBILE HOME ID #: _____

LOT # & MOBILE HOME PARK: _____

(27) PROPERTY LOCATION

STREET # _____ STREET NAME _____ CITY _____ COUNTY _____ ZIP CODE _____

FWUA SUPPLEMENT APPLICATION SCHEDULE ATTACHED FOR ADDITIONAL ITEMS: YES NO

(28) AMOUNT OF COVERAGE

AMOUNT REQUESTED: BUILDING \$ _____

AMOUNT REQUESTED: CONTENTS (INC ADDITIONS & ALTERATIONS) LIMITED TO 50% OF BUILDING \$ _____

AMOUNT REQUESTED: OTHER \$ _____

(29) UNDERWRITING INFORMATION

100% REPLACEMENT COST: BLDG (N/A TO MOBILE HOMES) \$ _____

ACTUAL CASH VALUE: BUILDING \$ _____

ACTUAL CASH VALUE: CONTENTS \$ _____

(30) THIS BUILDING WAS CONSTRUCTED (YEAR) _____ TOTAL FLOOR AREA OF BUILDING (SQUARE FEET) _____

FLOOD INSURANCE CARRIER (FLOOD POLICY MANDATORY IN ZONES A & V) _____

FLOOD POLICY # _____ FLOOD ZONE _____

(31) HOMEOWNERS/FIRE INSURANCE CARRIER _____

HOMEOWNERS/FIRE POLICY # _____

INSURING LIMIT ON HO POLICY (IF KNOWN) \$ _____

(33) DEDUCTIBLE

HURRI- CANE	OTHER WIND	
2%		2%
3%		3%
4%		4%
5% \$500 FLAT		5% \$500 FLAT

(30) IS THERE UNREPAIRED PHYSICAL DAMAGE TO THE PROPERTY? YES NO
 ARE THERE LOSSES WITHIN THE LAST 2 YEARS? YES NO IF YES, INDICATE ON PAGE 2

(32) WINDSTORM PROTECTIVE DEVICE CREDIT
 NO
 YES (ATTACH CERTIFICATE)

(34) TOTAL PREMIUM \$ _____ (ATTACH CHECK)

(35) ATTACH ORIGINAL PHOTO(S) TO REVERSE (IF REQUIRED)

(36) EFFECTIVE DATE REQUESTED _____

*AFFIDAVIT/CERTIFICATE REQUIRED

(37) I HEREBY CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I FURTHER UNDERSTAND AND AGREE TO THE TERMS AS SET FORTH ON PAGE 2.

FWUA USE ONLY

CLASS	AIBL CODE
TYPE	BLDG CODE
OP-RATE	OTHER
PARTY WALLS? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN	

 SIGNATURE OF APPLICANT AND DATE SIGNATURE OF PRODUCER OF RECORD TELEPHONE # FAX #

