<u>ACOF</u>	$\mathbf{R}\mathbf{D}_{TM}$														E	DATE
P	AGE _ of _	APP	PLICANT'S N	NAME									☐ NE	W	<u>'</u>	
	EM NO													IDORS	EMENT	
	LIII 140												POLIC	Y NO.		
(8) # STORIES	(9) CONSTRUCTION	ON (10) OCCU	PANCY (1		ITIONAL INDER ONSTR			`—	PERTY OCC			) BCEG		TERRITOR	Y CODE	
TWO	MASONRY	Y SEE MAN	JUAL FOR		ONSTR ON STILT				VNER	TENAI	NT					
THREE	SEMI-WIN RESISTIVE WIND-RES	D OCCUPANO E		R A	ISK(S) I SSOCI <i>P</i> ROPER	NSUR ATION	ED BY OF	YE						RATE TAB	LE	
(15) IF CONDO/AF				P			LE HOM	COM	PLIES				YES	NO	(47) DESCRI	TION OF OCCUPANCY
NAME OF COMPL							R/NAME	******	ANSI/ANCE	CODE	#7-88		TES	INO	(17) DESCRI	FIION OF OCCUPANCT
TOTAL # OF UNITS IN BLDG	SPECIFIC UNIT	# ABOVE GROUND F	FLOOR		DIMEN	ISION	8		MOBILE H	IOME II	D#					
		YES	NO				=									
BUILDING #/PHAS	5E#				LOI#	& MOE	SILE HO	MEPARK								
(18) PROPERTY L	OCATION														EWIIA	SUPPLEMENT APPLICATION
STREET#	STREET NAME		CIT	Y				cc	UNTY				ZIP CODE		SCHEE	OULE ATTACHED FOR ONAL ITEMS
																YES NO
(19) AMOUNT OF	COVERAGE			(20)	СОММЕ	FRCIA	1.									
AMOUNT REQUE	STED: BUILDING				SIDENTI			LE								
\$ AMOUNT REQUE	STED: CONTENTS				HURRI-	OTHE									FWUAU	SE ONLY
(INC ADDITIONS &	& ALTERATIONS)				CANE	WIND	ĸ	(21) COI	MMERCIAL	(22)	CO-INSU	RANCE	<u>.</u>	CLASS		AIBL CODE
AMOUNT REQUE	STED: OTHER			3%			3%	DEDUC	٦	COI	MMERCIA	LONL		TYPE		BLDG CODE
e AMOONI KEQUE	STED. OTHER			5%			1% \$1000 FLAT		3%		80%		100% WAIVED-1ST	-		BEDGCODE
्र (23) UNDERWRIT	ING INFORMATION			10%	· []		FLAT		5%		90%	Ш	LOSS TABLE	OP-RAT	E	OTHER
	IENT COST: BLDG	THIS BUILDIN	IG WAS ED (YEAR)	TOTAL BUILD	FLOOF	R ARE	A OF FEET)	HOMEO	WNERS/FIR	E INSU	RANCE C	ARRIE	₹			
\$	,	El 000 111011												PARTY	WALLS?	
ACTUAL CASH V	ALUE: BUILDING	(FLOOD POL	ICY MANDA	TORY II	ZONES	S A & \	/)	HOMEO	WNERS/FIR	E POLI	CY#			YE	S NO	UNKNOWN
\$ ACTUAL CASH V	ALUE: CONTENTS	FLOOD POLIC	CY#			FLO		BUILDIN	NG LIMIT ON	но ро	LICY (IF K	NOWN	)			
\$						ZON	E	\$			•		,			
(24) WINDSTORM	PROTECTIVE (25	5) ENDORSEMEI	NT FORMS	REQUES	STED											
NO NO	Ĺ	FWUA 04 2	21 WINDSTO	ORM PR	OTECTI	VE DE	VICES									
YES	CERTIFICATE)	FWUA 04 7	75 ACV LOS	S SETTI	EMENT	Γ										
	_		19 BUILDER													
	ASS A ASS B		20 BUILDER		ou no											
	ASS C		98 COMMER 99 COMMER			SSOC	IATION									
IS THERE UNREP	AIRED PHYSICAL D				$\neg$		_									
	SES WITHIN THE LAS	ST 2 YEARS?			YES YES		NO NO									
IF YES, INDICATE	ON PAGE 2					, <u> </u>										
FWUAOI-CR/C-S	5 (7/2000)															

ITEM NO.\_\_\_

DATE OF LOSS	AMOUNT	attach a separate sheet of paper)  DESCRIPTION OF LOSS
DATE OF LOSS	AWOUNT	DESCRIF HOW OF LOSS
	1	
REMARKS		
ITEM NO		
ITEM NO PRIOR LOSS HIS	STORY (If more,	attach a separate sheet of paper)
PRIOR LOSS HIS		
ITEM NOPRIOR LOSS HIS	TORY (If more,	attach a separate sheet of paper)  DESCRIPTION OF LOSS
PRIOR LOSS HIS		
DATE OF LOSS		
DATE OF LOSS		
DATE OF LOSS		
DATE OF LOSS		
PRIOR LOSS HIS  DATE OF LOSS		
PRIOR LOSS HIS  DATE OF LOSS		