SFIP Coverage Limits

COVERAGE TYPE	MAXIMUM LIMITS OF OCCUPANCY			
	1-4 Family	Other Residential	Non-Residential	
Combined Building/	\$250,000/	\$250,000/	\$500,000/	
Contents	\$100,000	\$100,000	\$500,000	
Contents Only	\$100,000	\$100,000	\$500,000	

Deductibles

FLOOD SERVICES

A separate deductible applies to building & contents coverage. With the SFP, the insured may select the desired deductible amount.

	Flood Zones
All flood zones.	

1. Contact Information & Property Address

Name, phone number, email & property address.

ONTACT	Insured Name 👻	First name			
		Field required.	PROPERTY ADDRESS		
				Street -	Street address
	Phone			City	City
				54.4.4.	
	Email			State	State 👻
				Postal code	Postal code

2. Enter Building Information

Construction data, property purchase date, number of floors, estimated replacement cost, construction date, occupancy type & percentage of the year at residence.

BUILDING TYPE	Construction Date	MM/DD/YYYY				
		Manufactured Machile Manufacture	BUILDING TYPE	Construction Date	10/10/2010	
	Building is a	Manufactured (Mobile) Home		The Building is a	O Manufactured (Mobile) Home	
	Type of Occupancy					
				Type of Occupancy	Not selected	
	Form of ownership	O Condominium		Primary Residence	Not selected	
				Form of Ownership	Condominium	

3. Elevation Certificate

Elevation certificates can easily be uploaded or dragged & dropped into the quote. Select the elevation certificate form expiration date to align questions. The elevation certificate appears side by side with the required elevation certificate questions.

	Elevation Certificate.pdf	- +	
	U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.	Contracts Version Nevember 11, 2022 According to Accor	
	Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance SECTION A – PROPERTY INFORMATION A1. Building Owner's Name	agent/company, and (3) building owner. FOR INSURANCE COMPANY USE Policy Number:	See Field A2 8208 CONSTELLATION BLVD TAMPA FL 33621-1409
	Anne Shirley A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 8208 Constellation Bivd	Company NAIC Number:	Do Addresses Match? Yes A7 Building Diagram Number
	City State Tampia Florida III A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	ZIP Code 33621	A8 For a building with a crawlspace or enclosure(s): a) sq footage of crawlspace is of ft
	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residence A5. Latituder.ongitude: Lat. Long. Horizontal Date		or enclosure (t) (t) number of perment flood opening in the creating or enclosure(t) within 10 foot shove adjacent grade
	A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood ins A7. Building Diagram Number 6 A8. Eres hulding utility a grandmark or grandmark is a second sec	urance.	() total net area of flood openings in ABb A9 For a building with an attached garage:
ELEVATION CERTIFICATE () Drag Certifica Allowed file type	e here to upload Choose file	ve adjecent grade 8	a) up hotige of elasted againgte b) hotine of permanent finded specifies and the final sector of the sector of th

4. Enter Additional Foundation Information

How the lowest elevated floor is raised above ground, enclosures, wall material, any machinery or equipment located in the enclosure, appliances below elevated floor, attached garage location, attached garage wall material (if finished), permanent openings & elevator (if applicable).

FOUNDATION	Foundation type	Elevated with Enclosure 🖉 Override			
floor is ra	Lowest elevated floor is raised	Not selected 🔻	GARAGE	Attached Garage	Yes 🖉 Override
	above the ground by			Location	Not selected V
ENCLOSURE	Wall Material	Not selected 🔻		Purpose	 Area is used for any purpose other than building access (stainwells, elevators, etc.), parking, or storage
				Walls	Walls are finished
	Equipment	Machinery/Equipment servicing the building below the elevate (living) floor		Wall Material	Not selected V ()
		(Size	230 Ø Override
	Other Appliances	Washers/Dryers/Food Freezers are located below the elevate (living) floor	PERMANENT	Flood openings are	O Engineered
FOUND	FOUNDATION & Please provide information about Foundation and Garage. It is			Number of Vents w/i 1 ft above	0 – +
GARAGE needed to calculate the Premium.				ground Total Area of Vents	0 square inches
				Total Aced of Vents	o square increa
		Add Data		Equipment	Machinery/Equipment servicing the building in the garage

5. The Quoting Process is Complete: Save or Continue to the Application

The quote can be downloaded and printed or email to the customer. The quote will automatically be saved in Trident. Click continue if you wish to proceed to the application.