

National Flood Insurance Program

Elevated Building Determination

ZONES V, V1-V30, VE

Policy Number:

Property Address:

To: Insurance Company

My building located at the above property address, in Zone _____, was constructed to have the lowest elevated floor elevated off the ground by means of piles, posts, piers, columns, solid perimeter walls, or parallel shear walls.

My building has an enclosure, crawlspace, or attached garage below the lowest elevated floor with an area of _____ square feet.

I understand that my Standard Flood Insurance Policy (SFIP) is being issued based on your reliance upon the accuracy of information and statements that I have furnished to you herein, as part of my application for the SFIP. I understand that my building is being classified as an elevated building subject to the restriction and limitations of coverage and under the terms and conditions of the SFIP, found in Section III, Property Covered, A.8 and B.3 based upon these representations by me. I also understand that in consideration of the reduced premium rate that will apply to my policy based upon it being an elevated building, coverage limitations in the SFIP (referenced above) will apply to the enclosed area below the lowest elevated floor of my building and to the contents and personal property located in this enclosed area. I understand and agree that this Elevated Building Determination is a part of my flood insurance application, and that the statements herein are subject to the provisions of Sections VII(B) and VII(G)(3) of the SFIP, which could result in certain consequences, including, but not limited to, the SFIP being void and any claim I may make as a result of a flood loss being denied, if the statements by me are false or materially misrepresent any fact.

Signature of Insured

Date