

FLOOD INSURANCE PROCESSING CENTER

P.O. Box 2057 Kalispell, MT 59903-2057
 TEL 800-637-3846 FAX 406-257-2008

FLOOD INSURANCE
GENERAL CHANGE ENDORSEMENT

PLEASE PRINT OR TYPE THIS FORM

POLICY #	POLICY EFFECTIVE DATE	ENDORSEMENT EFFECTIVE DATE	ENDORSEMENT EFFECTIVE DATE (TO INCREASE COVERAGE) <input type="checkbox"/> Standard 30 - Day <input type="checkbox"/> Loan Closing - No Wait <input type="checkbox"/> Map Revision - One Day
	POLICY EXPIRATION DATE		
REASON FOR CHANGE	INSURED'S NAME (As it appears on Policy)		
Prior Insured must sign this form to assign policy to new owner.			

PRODUCER INFORMATION <input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> DELETE	
Agency Name	Phone #
Agent/Producer's Name	Agent/Producer #
Mailing Address	
City, State, Zip +4	

INSURED INFORMATION <input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> DELETE	
Insured's Name	
Additional Insured's Name	
Mailing Address	
City, State, Zip +4	

FIRST MORTGAGEE <input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> DELETE	
1st Mortgage Loan #	
1st Mortgage Name	
Mailing Address	
City, State, Zip +4	

SECOND MORTGAGEE <input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> DELETE	
2nd Mortgage Loan #	
2nd Mortgage Name	
Mailing Address	
City, State, Zip +4	

COVERAGE

Important: Additional premium due to increase coverage MUST accompany this form.

	PREVIOUS BUILDING COVERAGE	PREVIOUS CONTENTS COVERAGE	NEW BUILDING COVERAGE	NEW CONTENTS COVERAGE
BASIC COVERAGE	.00	.00	.00	.00
ADDITIONAL COVERAGE	.00	.00	.00	.00
TOTAL COVERAGE	.00	.00	.00	.00
BUILDING RATES USED	_____ / _____		NEW PREMIUM	.00
CONTENTS RATES USED	_____ / _____		OLD PREMIUM	.00
	Refer to NFIP Manual for additional instructions, if needed.		PREMIUM DIFFERENCE	.00
DEDUCTIBLE	\$ _____ <input type="checkbox"/> Building <input type="checkbox"/> Contents		X PRORATA FACTOR	
ESTIMATED BUILDING REPLACEMENT COST	\$ _____		PRORATA PREMIUM	.00

GENERAL CHANGES/SPECIAL INSTRUCTIONS

THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.

_____ SIGNATURE OF AGENT / PRODUCER	_____ DATE	_____ SIGNATURE OF INSURED	_____ DATE
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A check or money order made out to the appropriate WYO Company must accompany this form if an increase in coverage is requested.

- ◆ Coverage may be increased, but not decreased during a policy term. If a decrease in coverage is desired, send a written request at policy renewal time.
- ◆ Deductibles may be increased, but not decreased during a policy term. Mortgage companies quite often will not accept deductibles higher than \$1,000. Please have the insured confirm requests for higher deductibles with their mortgagee before the deductible is increased.
- ◆ The named insured on a flood policy cannot be changed without the signature of the person being deleted or a copy of the title transfer. If the policy is being assigned from one party to another, the same rule applies.
- ◆ If you are changing the mortgagee, please provide the loan number. Quite often the Declarations Page sent to the mortgage company is returned if the loan number does not appear on that Declaration.

MAXIMUM AMOUNTS OF INSURANCE AVAILABLE

EMERGENCY PROGRAM

BUILDING COVERAGE		CONTENTS COVERAGE (Per Unit)	
Single Family	\$ 35,000 +	Residential	\$ 10,000
Other Residential	\$100,000 ++	Non-Residential	\$100,000
Non-Residential	\$100,000		

+ In Alaska, Guam, Hawaii, and the U.S. Virgin Islands, the amount available is \$50,000.

++ In Alaska, Guam, Hawaii, and the U.S. Virgin Islands, the amount available is \$150,000.

REGULAR PROGRAM

	BUILDING COVERAGE				CONTENTS COVERAGE		
	Basic Limits	Additional Limits	Total Available		Basic Limits	Additional Limits	Total Available
Single Family	\$ 50,000	\$200,000	\$250,000	Residential	\$ 20,000	\$ 80,000	\$100,000
2-4 Family	\$ 50,000	\$200,000	\$250,000	Non-Residential	\$130,000	\$370,000	\$500,000
Other-Residential	\$150,000	\$100,000	\$250,000				
Non-Residential	\$150,000	\$350,000	\$500,000				

DO NOT FORGET TO SIGN AND DATE THE ENDORSEMENT FORM.