EXCESS WIND APPLICATION

4408 Arendell Street, Morehead City, NC 28557 T: 877-284-4900

PRODUCER'S Name & Address: _____

_____

_____

Phone #: ( ) Fax #: ( )

INSURED's Name & Address: _____ **EFFECTIVE DATE:**

_____

UNDERWRITING Please answer the following questions:

Property Street Address _____

City _____ State _____ Zip _____

Year Built: _____ Effis or Dryvit (Y/N): _____ Flood Zone: _____ Construction Type: _____

Age of Roof: _____ Type of Roof (Flat, Hip, Gable): _____ Number of Stories: _____

Roof Covering (Metal, Tile, Shingles): _____ Distance to Water: _____ Body of Water: _____

Protective Devices: Hurricane Straps: _____ Windstorm Shutters: _____ Strapped: _____

Square Footage: _____ Building currently under construction or renovation? (Y/N) _____

COVERAGE (Attach SOV for multi-building locations)

	Total Replacement Cost:		**Underlying:**		**Limit of Coverage**
Building:	$_____	-	$_____	=	$_____
Contents:	$_____	-	$_____	=	$_____

WIND LOSSES (Type, Year, Amount, Details describing losses)

MORTGAGEE(S):

Street Address _____

City _____ State _____ Zip _____ Loan # _____

Street Address _____

City _____ State _____ Zip _____ Loan # _____

APPLICANT'S STATEMENT

I HAVE READ THE ABOVE APPLICATION AND DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL OF THE FOREGOING STATEMENTS ARE TRUE AND THAT THESE STATEMENTS ARE OFFERED AS AN INDUCEMENT TO THE COMPANY TO ISSUE THE POLICY FOR WHICH I AM APPLYING. I UNDERSTAND THAT AS A PART OF ROUTINE UNDERWRITING, AN INVESTIGATIVE CONSUMER REPORT OR CREDIT REPORT MAY BE OBTAINED AS WELL AS INSPECTION OF THE PROPERTY FOR WHICH COVERAGE IS BEING REQUESTED. **I ALSO UNDERSTAND THAT THIS IS A FULLY EARNED POLICY.**

APPLICANT _____ **DATE:** _____

PRODUCER _____ **DATE:** _____

(To bind, BOTH Signatures must be on application)