



## **FORCED PLACED FLOOD INSURANCE APPLICATION**

APPLICANT NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

LENDER CONTACT: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

YEAR ESTABLISHED: \_\_\_\_\_

CHARTER: State  Federal  National

SPECIFY TYPE OF INSTITUTION: (i.e., Federal/Commercial/National Savings/S&L/Credit Union, Mortgage Company): \_\_\_\_\_

### **LOAN PORTFOLIO INFORMATION**

TOTAL NUMBER OF LOANS SERVICED: \_\_\_\_\_

TOTAL VALUE: \_\_\_\_\_

APPROXIMATE PERCENTAGE RESIDENTIAL: \_\_\_\_\_

AVERAGE RESIDENTIAL LOAN VALUE: \_\_\_\_\_

HIGHEST RESIDENTIAL LOAN VALUE: \_\_\_\_\_

APPROXIMATE PERCENTAGE COMMERCIAL: \_\_\_\_\_

AVERAGE COMMERCIAL LOAN VALUE: \_\_\_\_\_

HIGHEST COMMERCIAL LOAN VALUE: \_\_\_\_\_

MONTHLY ORIGINATION VOLUME: \_\_\_\_\_

### **LOAN SPLIT**

PLEASE ATTACH APPROXIMATE SPLIT OF LOANS BY STATE AND PROVIDE DETAILS OF ANY MAJOR CONCENTRATIONS IN CITIES OR COUNTIES.

INSURANCE INFORMATION

ARE LOANS CURRENTLY BEING TRACKED FOR FLOOD INSURANCE? \_\_\_\_\_  
IF YES, PLEASE PROVIDE METHOD FOR TRACKING.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WILL NOTIFICATION/LETTER CYCLE BE PERFORMED BY AmRisc? \_\_\_\_\_  
IF NO, PLEASE PROVIDE DETAILS. IF YES WE REQUIRE BANKS SAMPLE LETTERS AND  
LETTERHEAD TO PERFORM SERVICE.

ESTIMATED PERCENTAGE OF MOBILE HOME EXPOSURE \_\_\_\_\_  
ESTIMATED PERCENTAGE OF PROPERTIES IN A SPECIAL FLOOD HAZARD AREA? \_\_\_\_\_  
NAME OF CURRENT DETERMINATION COMPANY: \_\_\_\_\_  
WILL AN AUDIT BE PERFORMED ON EXISTING LOAN PORTFOLIO? \_\_\_\_\_  
IS BLANKET COVERAGE REQUIRED? \_\_\_\_\_  
(BLANKET COVERAGE ONLY AVAILABLE WITH AN AUDIT)

SYSTEMS DATA

Name of Lender's computer automation system which handles loans:

\_\_\_\_\_

BROKER/AGENT

BROKER/AGENT: \_\_\_\_\_

DATE: \_\_\_\_\_

BROKER/AGENT ADDRESS: \_\_\_\_\_

BROKER/AGENT PHONE #: \_\_\_\_\_ FAX: \_\_\_\_\_

Email Application to: [dgainey@amrisc.com](mailto:dgainey@amrisc.com)

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