

COBRA FLOOD APPLICATION

Effective Dates:			
Producer's Name: SFI Group, Inc			
Address: 13500-105 NC Hwy 50/210			
City: Surf City		State: NC	Zip: 28445
Phone: (910) 329-4443			Fax: (910)329-4449
Email: scottw@sfigroup.biz			
Insured Names:		Phone:	
Mailing Address:			
City:		State:	Zip:
Risk Location Address:			
City:		State:	Zip:
Mortgagee Name:			
Address:			
City:		State:	Zip:
Loan Number:			
Year Constructed:	Construction	n Type:	Frame
Number of Stories:			Masonry
Square Feet:			Brick Veneer
Flood Zone: Base Flood Elevation:		Building Diagra	ım:
Enclosures: Yes	Square Foo	tage of Enclosu	re:
No	Use of Encl	osures:	
Elevation Lowest Exposed Floor:		Frontal Dune:	Yes
			No
Distance to Water:		Nearest Body of	of Water:
Replacement Cost of Dwelling Only:			
Coverage Amount Requested:			
Deductible:			
Any Losses in Last 5 Years: Yes			
No			
If Yes, Please Explain:			
Applicant's Statement: I have read the above application and declare that to t	-	-	
true and that these stateents are offered as an inducement to the company to			
of routine underwriting, an investigative consumer report or credit report may being requested. I understand that there is no coverage for property located be			
policy.	below pase flood e	rievation. Taiso unuers	ianu inai inis is a fully earneu
policy.			
Anlicantle signature.		Data	
Aplicant's signature:		Date:	
Producer's Signature:		Doto	,
Producer's Signature:		Date:	