

# Swett & Crawford

## DIC EARTHQUAKE and FLOOD COVERAGE APPLICATION

PLEASE READ CAREFULLY AND COMPLETE ALL SECTIONS

### APPLICANT:

Insured \_\_\_\_\_  
Mailing Address (If different from loc. Address) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Coverage:  Earthquake  Flood

### ADDITIONAL RISK INFORMATION:

Location 1 Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

#### CONSTRUCTION (Check One)

- Wood Frame
- Metal Non-Combustible (Steel Frame)
- Masonry Non-Combustible (HCB, Brick)
- Fire-Resistive (Protected Steel Frame or Rein. Conc.)
- Joisted Tilt-up
- Joisted Reinforced Masonry (Rein. Hollow Conc. Blk)

#### PARKING (Check One)

- None
- Separate
- Attached
- Tuckunder
- Subterranean
- Under-Building

SOFT STORY  Yes  No YEAR BUILT \_\_\_\_\_ # OF UNITS \_\_\_\_\_ # OF BLDGS \_\_\_\_\_  
(Ground Floor Mostly Parking)

#### OCCUPANCY (Check One)

- Commercial Property
- Manufacturing
- Habitational
- Agricultural/Food Processing

#### INSURED INTEREST

- Owner/Occupant
- Lessor
- Tenant

#### COVERAGE (Must be 100% of replacement cost)

Building ..... \$ \_\_\_\_\_  
Contents ..... \$ \_\_\_\_\_  
Rental Value ..... \$ \_\_\_\_\_  
Business Interruption . . . \$ \_\_\_\_\_

NUMBER OF STORIES \_\_\_\_\_

On Firm, Natural Soil?  Yes  No

If Wood Frame, Is Building Bolted to Foundation?  Yes  No

SQUARE FOOTAGE \_\_\_\_\_

Sprinkler System?  Yes  No

EQ Sprinkler Leak?  Yes  No

Inspection Contact Person: Name \_\_\_\_\_ Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

Enter Requested Effective Date: \_\_\_\_\_

**NOTICE TO PRODUCER/INSURED:** Any person who knowingly and with intent to defraud an insurance company or other person, files an application for insurance containing false information or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act which is a crime.

\_\_\_\_\_  
Producer Signature

\_\_\_\_\_  
Insured Signature