## FEDERAL EMERGENCY MANAGEMENT AGENCY FEDERAL INSURANCE ADMINISTRATION NATIONAL FLOOD INSURANCE PROGRAM

# **NOTICE OF LOSS**

(See reverse side for Privacy Act Statement and Paperwork Burden Disclosure Notice)

1. NAME OF SERVICING OFFICE							7. POLICY NUMBER FL			8. (POLICY PERIOD (FROM, TO))		
2. AGENCY NAME AND MAILING ADDRESS (RUBBER STAMP OR TYPE)							9. DATE OF LOSS			10. KIND OF LOSS  □ Flood □ Mudslide		
							11. PROBABLE AMOUNT OF LOSS-ALL PERILS 12. ESTIMATE OF LOSS-THIS POLICY \$					
							OTHER INSUR	ANCE (SEE ITEM 18)				
							□ Yes	□ No	☐ Build	dings 🗆 (	Contents	
3. (NSURED)							REMARKS: BR	IEF DESCRIPTION OF DAMAG	E (if eme	ergency handling required	, explain why).	
4. PROPERTY ADDRESS PHONE NO.												
5. MAIL ADDRESS (IF DIFFERENT) PHONE NO.												
					! !	]						
6. LOCATION OF PROPERTY IF REMOVED FOR PROTECTION												
15. DESCRIPTION OF PROPERTY COVERED						]						
ITEM NO.	AMOUNT DESCRIPTION INSURANCE											
1 BLDG.	\$		On theFamilyStory Building of			16.	MORTGAGEE (E	BUILDING)				
2 CONTS.			On the contents in the Building described above			17.	LOSS PAYEE (C	ONTENTS)				
18. LIST ANY <b>OTHER</b> INSURANCE APPLICABLE TO THE PROPERY DESCRIBED IN ITEM 15 ABOVE INCLUDING: HOMEOWNERS, WIND, AND/OR EXCESS POLICY; COVERAGE ON SPECIFICALLY DESCRIBED ARTICLES, E.G., FURS, JEWELRY, ETC. PLEASE PROVIDE POLICY NUMBERS AS APPLICABLE.												
19. COPIES SENT TO							CATASTROPH	IE SERIAL NO.		CAT. ZONE NO.	DATED	
20. NAME OF ADJUSTER TO WHOM THIS NOTICE HAS BEEN FORWARDED 21.								STER HANDLING E/C OR OTH	IER INSU	JRANCE LOSS		
				1	THIS SPACE FOR USE	BY S	ERVICING OFFI	CE				
The Standard Flood Insurance Policy is subject to the National Flood Insurance Act of 1968, and any Acts Amendatory thereof, and Regulations issued by the Federal Insurance Administration pursuant to such statute(s).												

### INSTRUCTIONS FOR AGENTS OR BROKERS:

- 1. Complete this Notice of Loss in its entirety. DO NOT OMIT ANY INFORMATION.
- 2. Forward the completed notice to NFIP shown on the Declarations Sheet of the Policy.
- 3. All losses under Flood Policies will be assigned to adjusters by NFIP.
- 4. Agents and Brokers are not permitted to adjust losses under Flood Policies.
- 5. Additional Flood Notices of Loss may be obtained from:

FEMA/MAP Service Center P.O. Box 1038 Jessup, MD 20794-1038 1-800-358-9616

#### **INSTRUCTIONS FOR ADJUSTERS:**

- 1. Obtain necessary forms for the adjustment of Flood Losses from NFIP assigning the loss.
- 2. Preliminary reports and estimates must be submitted to NFIP not later than ten working days from the date of assignment.
- 3. Preliminary reports must indicate the height of the water, to the nearest foot, above or below the first floor level of the risk involved.

## **Privacy Act Statement**

The information requested is necessary to process the subject loss. The authority to collect the information is Title 42, U.S. Code, Section 4001 to 4028. It is voluntary on your part to furnish the information. However, omission of an item may preclude processing of the form. The information will not be disclosed outside of the Federal Emergency Management Agency, except to the servicing agent, acting as the government's fiscal agent; to claims adjusters to enable them to confirm coverage and the location of insured property; to certain Federal, State and Local Government agencies for determining eligibility for benefits and for verification of nonduplication of benefits; to the Department of Justice for purposes of litigation or as required by law; and to State and Local agencies for acquisition and relocation-related projects, consistent with the National Flood Insurance Program and consistent with the routine uses described in the program's system of record. Failure by you to provide some or all of the information may result in delay of processing or denial of this claim and/or application.

#### **Paperwork Reduction Act Notice**

Public Reporting burden for the collection of information titled "Claims for National Flood Insurance Program (NFIP)" is estimated to average 4 hours per claim. This estimate includes the time, effort, or financial resources expended by persons to generate, maintain, retain, disclose, or provide information to the Federal Insurance Administration or its agent. The reporting burden for this form as part of the collection of information is highlighted below. Your response to this collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a currently valid OMB control number and expiration date is displayed in the upper right corner of the highlighted form. You may send comments regarding the accuracy of the burden estimate and suggestions for reducing the burden to Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (3067-0021). Do not send the completed form to the above address.

Title	Burden Hours
Worksheet-Contents-Personal Property	2.5 Hours
Worksheet-Building	2.5 Hours
Worksheet-Building (Cont'd)	1.0 Hours
Proof of Loss	5 Minutes
Increased Cost of Compliance	2.0 Hours
Notice of Loss	4 Minutes
Statement as to Full Cost to Repair or Replacement Cost Coverage, Subject to the Terms and Conditions of this Policy	6 Minutes
National Flood Insurance Program Preliminary Report	4 Minutes
National Flood Insurance Program Final Report	4 Minutes
National Flood Insurance Program Narrative Report	5 Minutes
Cause of Loss and Subrogation Report	1 Hour
Mobile Home Worksheet	30 Minutes
Increased Cost of Compliance (ICC) Adjuster Report	25 Minutes
	Worksheet-Contents-Personal Property Worksheet-Building Worksheet-Building (Cont'd) Proof of Loss Increased Cost of Compliance Notice of Loss Statement as to Full Cost to Repair or Replacement Cost Coverage, Subject to the Terms and Conditions of this Policy National Flood Insurance Program Preliminary Report National Flood Insurance Program Final Report National Flood Insurance Program Narrative Report Cause of Loss and Subrogation Report Mobile Home Worksheet