

DEPARTMENT OF HOMELAND SECURITY
 FEDERAL EMERGENCY MANAGEMENT AGENCY
NOTICE OF LOSS

NATIONAL FLOOD
 INSURANCE PROGRAM

*O.M.B. No. 1660-0005
 Expires September 30, 2010*

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

1. NAME OF SERVICING OFFICE		7. POLICY NUMBER		8. POLICY PERIOD (From, To)	
2. AGENCY NAME AND MAILING ADDRESS (Rubber stamp or type)		9. DATE OF LOSS		10. KIND OF LOSS <input type="checkbox"/> Flood <input type="checkbox"/> Mudslide	
		11. Probable Amount of Loss-All Perils \$ _____		12. Estimate of Loss-this Policy \$ _____	
		10. KIND OF LOSS <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Buildings <input type="checkbox"/> Contents			
3. INSURED		14. REMARKS; BRIEF DESCRIPTION OF DAMAGE (If emergency handling required, explain why)			
4. PROPERTY	PHONE NUMBER				
5. MAIL ADDRESS	PHONE NUMBER				
6. LOCATION OF PROPERTY IF REMOVED FOR PROTECTION					
15. DESCRIPTION OF PROPERTY COVERED					
ITEM NO.	AMOUNT INSURANCE	DESCRIPTION		16. MORTGAGE (Building)	
1 Bldg.	\$ _____	on the _____ Family _____ Story building of _____ Construction. Basement <input type="checkbox"/> Yes <input type="checkbox"/> No			
2 Conts.	\$ _____	On the contents in the Building described above <input type="checkbox"/> or in the _____ Family _____ Story Building of _____ Construction. Basement <input type="checkbox"/> Yes <input type="checkbox"/> No		17. LOSS PAYEE (Contents)	
18. List any other insurance applicable to the property 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				CATASTROPHE SERIAL NO.	CAT. ZONE NO.
20. Name of Adjuster To Whom this Notice Has Been Forwarded		21. Name of Adjuster Handling E/C or Other Insurance Loss			

THIS SPACE FOR USE BY SERVICING OFFICE

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 Services 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 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 in processing or denial of this claim and/or application.

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for the collection of information titled Claims for National Flood Insurance Program (NFIP) is estimated to average 6 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting these forms. 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 these forms. Send comments regarding the accuracy of the burden estimate and suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, S.W., Washington, DC 20472, Paperwork Reduction Project (1660-0005). **NOTE: Do not send your completed form to this address.**

FEMA Form No.	Title	Burden Hours
086-0-6	Worksheet-Contents-Personal Property	2.5 Hours
086-0-7	Worksheet-Building	2.5 Hours
086-0-8	Worksheet-Building (Continued)	1.0 Hours
086-0-9	Proof of Loss	.08 Hours
086-0-10	Increased Cost of Compliance	2.0 Hours
086-0-11	Notice of Loss	.07 Hours
086-0-12	Statement as to Full Cost to Repair or Replacement Cost Coverage, Subject to the Terms and Conditions of this Policy	.10 Hours
086-0-13	National Flood Insurance Program Preliminary Report	.07 Hours
086-0-14	National Flood Insurance Program Final Report	.07 Hours
086-0-15	National Flood Insurance Program Narrative Report	.08 Hours
086-0-16	Cause of Loss and Subrogation Report	1 Hour
086-0-17	Manufactured (Mobile) Home/Travel Trailer Worksheet	.50 Hours
086-0-18	Mobile Home/Travel Trailer Worksheet (Continued)	.25 Hours
086-0-19	Increased Cost of Compliance (ICC) Adjuster Report	.42 Hours
086-0-20	Adjuster Preliminary Damage Assessment	.25 Hours
086-0-21	Adjuster Certification Application	.25 Hours
