

DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
**NFIP CUSTOMER EXPERIENCE SURVEY**

OMB Control Number 1660-NW98

Expiration: XX/XX/XXXX

**PAPERWORK BURDEN DISCLOSURE NOTICE**

Public reporting burden for this survey is estimated to average 10 minutes 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 the survey. This collection of information is voluntary to obtain or retain benefits. You are not required to respond to this collection of information unless it displays a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington DC 20472-3100, Paperwork Reduction Project (1660-NW98) NOTE: Do not send your completed form to this address.

**INTRODUCTION SCREEN**

Thank you for participating in this survey. First, the questions will determine whether you qualify and meet the criteria we are looking for in this particular survey. Next, we would like to understand your experience with some products and services you buy and the companies you buy them from. The entire survey should take 10 to 15 minutes to complete.

Once you've answered all questions on the screen, click on the [>>] arrow at the bottom of the screen to advance to the next screen in the survey. You may need to scroll down to see these navigation buttons.

Please:

DO NOT use the "enter" key to submit your responses, and

DO NOT use the forward and back buttons on your browser's navigation bar to move forward and back in the survey.

**SCREENER & BACKGROUND SECTION**

*[PN: PRESERVE ALL SCREENER DATA. TERMINATE RESPONDENTS WHO DO NOT QUALIFY ONLY AFTER THEY HAVE COMPLETED ENTIRE SCREENER (UNLESS OTHERWISE NOTED). DO NOT DISPLAY SECTION HEADERS]*

S1. What is your age?

*[PN: SHOW NUMERIC TEXTBOX AND CHECKBOX FOR 'PREFER NOT TO ANSWER'; TERMINATE IMMEDIATELY IF UNDER 18 OR 'PREFER NOT TO ANSWER'.]*

999. Prefer not to answer

S2a. How would you describe your racial background?

*[Please select all that apply.]*

1. American Indian or Alaska Native
  2. Asian
  3. Black or African American
  4. Native Hawaiian or Other Pacific Islander
  5. White
99. Prefer not to answer

S2b. How would you describe your ethnicity?

*[Please select one response.]*

1. Hispanic or Latino
  2. Not Hispanic or Latino
99. Prefer not to answer

S3. Which category best describes your total annual household income before taxes (i.e., the income of all wage earners in your household)?

1. Less than \$25,000
2. \$25,000 to \$74,999
3. \$75,000 to \$99,999

- 4. More than \$100,000
- 99. Prefer not to answer

S4. What is your 5-digit zip code? For example, 12345

|\_|\_|\_|\_|

**[REGIONS CODED FROM ZIP CODE]**

- 1. WEST
- 2. SOUTH
- 3. MIDWEST
- 4. NORTHEAST

**[PN: INSERT HIDDEN VARIABLE FOR ALL STATES AND WASHINGTON, DC. INSERT HIDDEN VARIABLE FOR REGION.]**

S5. Are you, or is anyone in your household or immediate family, employed by any of the following types of companies?

*[Please select all that apply.]*

**[PN: RANDOMIZE OPTIONS; ANCHOR 'NONE']**

- 1. Insurance company /provider
- 2. Magazine or newspaper
- 3. Cell phone service provider
- 4. Internet service provider
- 5. Advertising / Marketing agency or department
- 6. Market research company or department
- 99. None of the above

**[PN: TERMINATE IMMEDIATELY IF S7 = 1,5,6]**

S6. Do you rent or own your primary residence?

*[Please select one response.]*

**[PN: RANDOMIZE 1-2, ANCHOR 3]**

- 1. Rent
- 2. Own
- 3. Other

S7a. What type of residence is your primary residence?

*[Please select one response.]*

**[PN: RANDOMIZE 1-5, ANCHOR 6]**

- 1. Single-family home
- 2. Condo or townhouse
- 3. Mobile home (e.g., trailer)
- 4. Other

S7b. Which, if any, of the following financial products do you currently have or have had in the past two years for your **primary residence**? *Select one response for each item*

**[PN: RANDOMIZE ROWS]**

- 1. Mortgage
- 2. Life insurance
- 3. Homeowners insurance
- 4. Flood insurance (supplemental insurance (not homeowners) that covers flood damage from natural events such as storms)
- 5. Renters insurance
- 6. Earthquake insurance

S8a **[PN: DISPLAY IF S7B\_4 = E, D]** Do you have a secondary residence? If yes, what type of residence is your secondary residence?

*[Please select one response.]*

**[PN: RANDOMIZE 1-5, ANCHOR 6,7]**

- 1. Single-family home
- 2. Condo or townhouse
- 3. Mobile home (e.g., trailer)
- 4. Other
- 7. I do not have a secondary residence

S8b *[PN: DISPLAY IF S7B\_4 = E, D]* Which, if any, of the following financial products do you currently have or have had in the past two years for your **secondary** residence? *Select one response for each item*

*[PN: RANDOMIZE ROWS]*

1. Mortgage
2. Life insurance
3. Homeowners insurance
4. Flood insurance (supplemental insurance, not homeowners, that covers flood damage from natural events such as storms)
5. Renters insurance
6. Earthquake insurance

S9. Which of the following statements best describes your role in making financial decisions for your household (which financial products to buy, which banks, lenders, or investment firms to do business with, etc.)?

*[Please select one response for each product.]*

*[PN: DISPLAY OPTIONS FOR WHICH A,B,C,D IS SELECTED IN S10a/S10b, RANDOMIZE ORDER]*

*[PN: DISPLAY RESPONSE OPTIONS IN ORDER SHOWN]*

1. I am the primary decision maker
2. I share equally in the decision making with someone else
3. I influence the decisions, but am not a primary decision maker myself
4. I am not involved in making financial decisions for my household

*[PN: TERMINATE AT THE END OF SCREENER IF S11\_FLOOD\_INSURANCE= 3,4]*

S10. *[PN: DISPLAY IF S8a\_4 /S8b\_4= A, B, C]* Who is/was the provider of your **flood insurance coverage** for your *[PN: INSERT: "primary residence" [IF S8a\_4= A, B, C] / "secondary residence" [IF S8b\_4= A, B, C]* ? If you have had multiple insurers, please select the one with whom you most recently had coverage.

<INSERT LIST OF PROVIDERS>

S11. *[PN: DISPLAY IF S8a\_4/S8b\_4 =B, C, D]* Why did you decide not to renew your flood insurance coverage?

1. I repaid my mortgage and it was no longer required
2. The flood maps were redrawn so it was not mandatory for me anymore
3. I did not feel that I needed flood insurance coverage any more
4. It was too expensive
5. The amount I received in claims payment was too small
6. The process of making a claim is very cumbersome
7. Others (please specify)\_\_\_\_\_

*[PN: CONTINUE TO MAIN SURVEY ONLY IF:*

- *Age: 18 yrs+*
- *S2≠99 (not disclosed)*
- *S3≠99 (not answered)*
- *S5 ≠ 1,5,6 (sensitive industry)*
- *S8a\_4 /S8b\_4= A, B, C (had flood insurance in the last 2 years for primary or secondary residence)*
- *S9\_FLOOD\_INSURANCE= 1,2 (Sole, joint decision maker)*

*[PN: "FLOOD INSURER" FOR THE REST OF THE SURVEY IS THE NAME SELECTED IN S10]*

## MAIN SURVEY

*[PN: DO NOT DISPLAY SECTION HEADINGS]*

### SATISFACTION AND BRAND LOYALTY

In this section, we will ask you questions about your experience and satisfaction with your **flood insurance** policy with *[PN: INSERT FLOOD INSURER]*.

SAT1. Please rate how satisfied you are with the following aspects of your flood insurance:  
*[Please select one response.]*

*[PN: SHOW SATISFACTION RATING SCALE ACROSS WITH ANCHOR LABELS]*

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
- 5 – Extremely Satisfied
99. Don't know

- A. Your experience having flood insurance
- B. Your satisfaction with *[PN: INSERT FLOOD INSURER]* as a provider of your **flood insurance** policy
- C. Your overall satisfaction with NFIP (National Flood Insurance Program)

SAT2. Please indicate how strongly you agree or disagree with each of the following statements:

*[PN: SHOW SCALE OPTIONS ACROSS WITH ANCHOR LABELS]*

1. 1 – Strongly Disagree
2. 2
3. 3
4. 4
5. 5 – Strongly Agree

*[PN: RANDOMIZE ROWS]*

1. *[PN: INSERT FLOOD INSURER]* is the best provider of flood insurance
2. *[PN: INSERT FLOOD INSURER]* is a company that always lives up to my expectations
3. I would purchase flood insurance from *[PN: INSERT FLOOD INSURER]* even if it cost more than buying it from other companies
4. I would go out of my way to buy flood insurance from *[PN: INSERT FLOOD INSURER]*
5. I am sure that *[PN: INSERT FLOOD INSURER]* will pay me what I am due if I ever had a claim

### BEHAVIORAL INTENTIONS

C1. How likely are you to make the following changes with regard to your flood insurance policy with *[PN: INSERT FLOOD INSURER]* in the **next year**?

*[Please select one response for each row]*

*[PN: LIKELIHOOD SCALE OPTIONS ACROSS WITH ANCHOR LABELS]*

1. 1 – Extremely unlikely
2. 2
3. 3
4. 4
5. 5 – Extremely likely

*[PN: RANDOMIZE ROWS]*

1. Cancel my policy with *[PN: INSERT FLOOD INSURER]*
2. Switch my existing policy with *[PN: INSERT FLOOD INSURER]* to another insurer
3. Renew my flood insurance policy with *[PN: INSERT FLOOD INSURER]*
4. Select a more basic flood insurance policy (e.g., reduce coverage or deductible) from *[PN: INSERT FLOOD INSURER]*
5. Select a more comprehensive flood insurance policy (e.g., add contents coverage) from *[PN: INSERT FLOOD INSURER]*
6. Purchase other types of insurance (e.g. home owners insurance) from *[PN: INSERT FLOOD INSURER]*

**PRODUCT VALUE & SERVICE SATISFACTION**

C2a. Please rate how satisfied you are with the following aspects of your flood insurance policy with [PN: INSERT FLOOD INSURER].

[Please select one response for each row]

[PN: SHOW RATING SCALE ACROSS WITH ANCHOR LABELS]

- 1. 1 – Extremely Dissatisfied
- 2. 2
- 3. 3
- 4. 4
- 5. 5 – Extremely Satisfied

[PN: RANDOMIZE ROWS]

- A. The amount that you pay for your flood insurance
- B. The value you receive for your money
- C. The quality of your insurance policy, including the coverage provided and benefits covered (e.g., coverage on building and foundation, electrical and plumbing system, built-in appliances)
- D. The quality of the customer service you have received, including when you signed-up for insurance, made premium payments, submitted claims, or had any other interactions with the insurer
- E. [PN: INSERT FLOOD INSURER] offers you the right level of flood insurance coverage to manage your flood risk
- F. [PN: INSERT FLOOD INSURER]'s willingness to cover your damage in case of a claim

C2b. How much do you currently pay for your flood insurance policy (annually)?

- 1. Less than \$1,000
- 2. \$1,000 to \$5,000
- 3. \$5,000 or more
- 98. Unsure
- 99. Prefer not to answer

C2c. Do you have contents coverage as part of your flood insurance policy?

- 1. Yes
- 2. No
- 98. Unsure

C2d. How much is the deductible for your flood insurance policy?

- 3. Less than \$1000
- 4. \$1000 to \$5000
- 5. \$5000 or more
- 98. Unsure

**TOUCHPOINT SATISFACTION**

C3a. Which of the following have you done or experienced in the **past year** regarding your flood insurance with [PN: INSERT FLOOD INSURER]?

[Please select all that apply]

[PN: RANDOMIZE FOR EACH RESPONDENT]

- A. Called [PN: INSERT FLOOD INSURER]'s 1-800 customer service number or a local office
- B. Visited [PN: INSERT FLOOD INSURER]'s website
- C. Emailed, texted or web-chatted with a [PN: INSERT FLOOD INSURER] representative
- D. Spoke with a [PN: INSERT FLOOD INSURER] representative in person
- E. Faxed or sent a letter(s) to [PN: INSERT FLOOD INSURER]

F. None of the above *(PN: SINGLE SELECT. ANCHOR)*

C3b. *[PN: ASK C3b IF C3a=A-F]* Please rate how satisfied you are with each of the following experiences you had with your flood insurance provider *[PN: INSERT FLOOD INSURER]* in the **past year**.

*[Please select one response for each row]*

*[PN: SHOW RATING SCALE ACROSS WITH ANCHOR LABELS]*

1. 1 Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 Extremely Satisfied

*[PN: RANDOMIZE ROWS FOR EACH RESPONDENT. SHOW ONLY ROWS SELECTED IN C3a.]*

- A. Calling *[PN: INSERT FLOOD INSURER]*'s 1-800 customer service number or a local office
- B. Visiting *[PN: INSERT FLOOD INSURER]*'s website
- C. Emailing, texting or web-chatting with a *[PN: INSERT FLOOD INSURER]* representative
- D. Speaking with a *[PN: INSERT FLOOD INSURER]* representative in person
- E. Faxing or sending a letter(s) to *[PN: INSERT FLOOD INSURER]*
- F. None of the above *(PN: SINGLE SELECT. ANCHOR)*

C4a. *[PN: DISPLAY IF SAT1\_C#99]* Which of the following have you done or experienced in the **past year**?

*[Please select all that apply]*

*[PN: RANDOMIZE FOR EACH RESPONDENT.]*

- A. Called FEMA's customer service number or a local office
- B. Visited Floodsmart or fema.gov website
- C. Emailed or web-chatted with a FEMA representative
- D. Spoke with a FEMA representative in person
- E. Faxed or sent a letter(s) to FEMA
- F. Contacted a floodplain manager or other community official
- G. None of the above *(PN: SINGLE SELECT. ANCHOR)*

C4b. *[PN: ASK C4b IF C4a=A-F]* Please rate how satisfied you are with each of the following experiences you had in the **past year**.

*[Please select one response for each row]*

*[PN: SHOW RATING SCALE ACROSS WITH ANCHOR LABELS]*

1. 1 Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 Extremely Satisfied

*[PN: RANDOMIZE ROWS FOR EACH RESPONDENT. SHOW ONLY ROWS SELECTED IN C4a.]*

- A. Calling FEMA's customer service number or a local office
- B. Visiting Floodsmart or fema.gov website
- C. Emailing or web-chatting a FEMA representative
- D. Speaking with a FEMA representative in person
- E. Faxing or sending a letter(s) to FEMA
- F. Contacting a floodplain manager or other community official
- G. None of the above *(PN: SINGLE SELECT. ANCHOR)*

## JOURNEY QUALIFICATION

C5. How long ago did you sign up for your **flood insurance policy** with *[PN: INSERT FLOOD INSURER]*? If you were a customer in the past, cancelled coverage with the insurer, then re-

enrolled at a later date, please indicate how long ago you **most recently** signed up for a policy. Your best estimate is fine.

1. In the last year
2. Between 1 and 2 years ago
3. Between 2 and 5 years ago
4. More than 5 years ago

C6. In the **past year**, have you contacted **[PN: INSERT FLOOD INSURER]** about any of the following matters regarding your flood insurance policy?

**[PN: ANSWER OPTIONS ACROSS]**

1. Yes
2. No

**[PN: ROWS]**

1. To make coverage changes to your policy (e.g., increase or decrease coverage, add contents coverage)
2. To make an administrative change to your policy (e.g., adding or removing members)
3. To clarify a question you had regarding your policy

C7. When did you last make a claim against your flood insurance policy with **[PN: INSERT FLOOD INSURER]**?

**[PN: DISPLAY RESPONSE OPTIONS IN ORDER SHOWN]**

1. Had a claim within the last 2 years
2. Had a claim within 2-5 years
3. Had claim more than 5 years ago
4. Have never had a claim

C8. Why did you initially buy flood insurance coverage? (Choose one)

**[PN: RANDOMIZE FOR EACH RESPONDENT.]**

1. Purchased a new home and flood insurance was required **[PN: HIDDEN VARIABLE= MANDATORY]**
2. Wanted to refinance my mortgage and flood insurance was required **[PN: HIDDEN VARIABLE= MANDATORY]**
3. Got a new flood map, i.e. revisions and amendments to flood maps, which required me to obtain coverage **[PN: HIDDEN VARIABLE= MANDATORY]**
4. Required for another reason **[PN: HIDDEN VARIABLE= MANDATORY]**
5. Purchased flood insurance voluntarily to cover my flood risk **[PN: HIDDEN VARIABLE= VOLUNTARY]**

C9. Have your coverage or rates changed during your time as a policyholder for reasons outside of your control (e.g. maps revised or amended, legislative change)?

1. Yes
2. No

C10. Do you receive a discount on your flood insurance?

1. Yes
2. No
3. Don't Know

C11. **[PN: DISPLAY IF S8A\_4 =A OR S8B\_4=A]** Have you renewed your flood insurance policy with **[PN: INSERT FLOOD INSURER]** in the last year?

1. Yes
2. No

**[PN: RESPONDENT QUALIFIES FOR FOLLOWING JOURNEYS]**

**(1) SHOPPING AND SIGN UP: IF SUBSCRIBED IN THE LAST TWO YEARS (CODES 1-2 IN QUESTION C5)**

**(2) STEADY STATE: ALL**

**(3) ASK QUERY: CONTACTED INSURER FOR QUERY ("YES" IN QUESTION C6\_3)**

- (4) CUSTOMER INITIATED CHANGE: CONTACTED INSURER FOR CHANGE/QUERY (“YES” IN QUESTION C6\_1 OR C6\_2)
- (5) THIRD PARTY INITIATED CHANGE: IF COVERAGE/RATE HAS CHANGED (“YES” IN QUESTION C10 FOR “COVERAGE/RATE CHANGE”)
- (6) MAKE CLAIMS: IF MADE A CLAIM AT LEAST ONCE IN LAST 3 YEARS (IF C7=1 OR C7=2)
- (7) CANCEL POLICY: HAD A POLICY IN LAST 2 YEARS BUT DO NOT CURRENTLY HOLD IT ( S8A\_4 =B OR S8B\_4=B)
- (8) RENEW POLICY: HOLDS A POLICY FOR MORE THAN A YEAR (S8A\_4 |S8B\_4=A AND C5=4,5,6,7)

**JOURNEY SATISFACTION**

C9. We'd like to understand your overall experience as a flood insurance policyholder with [PN: INSERT FLOOD INSURER]. How would you rate your satisfaction in the following areas?

[Please select one response for each row]

[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]

- 1. 1 – Extremely dissatisfied
- 2. 2
- 3. 3
- 4. 4
- 5. 5 – Extremely satisfied
- 99. Don't know / Not Applicable

	[PN: ASK FOR ALL JOURNEYS EVEN IF RESPONDENT DOES NOT QUALIFY]	
1.	Shopping and signing up for your flood insurance	
2.	Ongoing communication you receive from [PN: INSERT FLOOD INSURER] or FEMA to keep you informed of flood risks and your ability to mitigate them (e.g. emails, calls, letters)	
3.	The help you received in response to question(s) or problem regarding your flood insurance policy	
4.	The process of making changes or adjustments to your policy (e.g., increase or decrease coverage, add contents coverage, adding or removing members)	
5.	The changes in your coverage or rates as a result of map changes, legislative changes, or other circumstances outside your control	
6.	The claims submission and approval process	
7.	The process of canceling your flood insurance policy	
8.	The process of renewing your flood insurance policy	

**SHOPPING & SIGN UP JOURNEY**

[PN: DISPLAY IF QUALIFIED FOR SHOPPING & SIGN-UP JOURNEY, ELSE SKIP TO STEADY STATE JOURNEY]

We would like to understand more about your experience while shopping and signing up for flood insurance with [PN: INSERT FLOOD INSURER]

SS1. When you were selecting flood insurance coverage, what sources did you use to get information about the coverage available from [PN: INSERT FLOOD INSURER]?

[Please select all that apply]

[PN: RANDOMIZE ROWS FOR EACH RESPONDENT.]

- 1. Talked to family, neighbors, friends or acquaintances
- 2. Visited the company's website, mobile site, or social media site (e.g., Facebook)
- 3. Called the company's 1-800 number
- 4. Contacted insurance company representative
- 5. Read articles, reviews, or blogs about the company
- 6. Visited Floodsmart website or www.fema.gov
- 7. Contacted a FEMA representative in person, through email or on the phone
- 8. Contacted realtor
- 9. Other (please specify) \_\_\_\_\_ [PN: ANCHOR]
- 10. None of the above [PN: ANCHOR]

SS2. [PN: DISPLAY SS2 IF SS1= 1-9] How helpful was the information you obtained from each source? [PN: SHOW RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]

- 1. 1 – Not at all Helpful



2. 2
3. 3
4. 4
5. 5 – Extremely Helpful

**[PN: ROWS. SHOW ONLY ITEMS SELECTED IN SS1]**

1. Talking to family, neighbors, friends or acquaintances
2. Visiting the company's website, mobile site, or social media site (e.g., Facebook)
3. Calling the company's 1-800 number
4. Contacting insurance company representative
5. Reading articles, reviews, or blogs about the company
6. Visiting Floodsmart website or www.fema.gov
7. Contacting a FEMA representative in person, through email or on phone
8. Contacting a realtor
9. Other (please specify)\_\_\_\_\_ **[PN: AUTOFILL FROM SS1\_9]**

SS3. How did you sign up for your flood insurance coverage with **[PN: INSERT FLOOD INSURER]?**  
*[Please select one response.]*

1. By calling the company's toll-free (1-800) number or local office
2. On the company's website, mobile site or app
3. Contacted an independent broker/ agent
4. Through my apartment or community association
5. Other (please specify)\_\_\_\_\_ **[PN: ANCHOR]**

SS4. How long did it take for your policy to be approved, from the point when you first decided to purchase flood insurance coverage?

1. About 1 week
2. About 1 month
3. More than 1 month
4. Don't know

SS5a. Did you hire an engineer or surveyor to obtain an elevation certificate for your property?

1. Yes
2. No
3. Don't know

SS5b. **[PN: DISPLAY IF SS5A=1]** How long did it take to obtain your elevation certificate, from the point when you learned that it was required for flood insurance?

1. About 1 week
2. About 1 month
3. More than 1 month
4. Don't know

SS6. Did you apply to have your flood maps changed through a LOMA (letter of map amendment), LOMR (letter of map revision), or LOMC (letter of map change)?

1. Yes
2. No
3. Don't know

SS7. **[PN: DISPLAY IF SS6=1]** Was your property or structure removed from the Special Flood Hazard Area (SFHA) as a result of your application?

1. Yes
2. No
3. Don't know

SS8. How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely satisfied

99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The notification that you needed flood insurance coverage	<b>PN: DISPLAY IF C8=MANDATORY</b>
2.	The process of getting an elevation certificate	<b>PN: DISPLAY IF SS5=1</b>
3.	The process of signing up with <b>[INSERT FLOOD INSURER]</b> including understanding your expected cost, understanding the coverage you purchased and how it would apply to your building and contents if a claim occurred	
4.	The process of filling a LOMA (letter of map amendment), LOMR (letter of map revision), or LOMC (letter of map change)?	<b>PN: DISPLAY IF SS6=1</b>
5.	The initial experience as a new policyholder, including receiving information after signing up for coverage, and receiving your first statements and/or premium bill	

SS9. **[PN: DISPLAY IF C8=MANDATORY]** How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely dissatisfied
  2. 2
  3. 3
  4. 4
  5. 5 – Extremely satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	How the real estate agent explained the importance of flood insurance	
2.	The time you had to purchase flood insurance following notification from the bank	<b>PN: DISPLAY IF C8=MANDATORY</b>
3.	The interaction you had with the flood determination company representative	
4.	How the insurance agent explained the importance of flood insurance	

SS10. **[PN: DISPLAY IF SS5=1]** How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely dissatisfied
  2. 2
  3. 3
  4. 4
  5. 5 – Extremely satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The time it took to get an elevation certificate	
2.	How easy it was get an elevation certificate	
3.	The amount you paid to get an elevation certificate	

SS11. We'd like to understand your experience when signing up for your flood insurance coverage with **[PN: INSERT FLOOD INSURER]**. How would you rate your satisfaction across the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely satisfied

	<b>[RANDOMIZE ROWS]</b>	
1.	The information available to determine the level of coverage you require and choose the right one for you	
2.	How easy it was to reach an insurance company representative to sign up for the policy	<i>PN: DISPLAY IF SS1 =4</i>
3.	The help you received from the insurance company representative to choose the right level of coverage for you	<i>PN: DISPLAY IF SS1 =4</i>
4.	How knowledgeable the insurance company representative was about the coverage options available to you	<i>PN: DISPLAY IF SS1 =4</i>
5.	How easy it was to understand what you would pay, and how your property criteria (elevation, flood zone) affected the premium	
6.	How easy it was to understand what was covered and the terms of your contract	
7.	How easy it was to sign up for a policy online	<i>PN: DISPLAY IF SS3 =2</i>
8.	How clearly the claims process was explained when you were signing up for the plan	

SS12. *[PN: DISPLAY IF SS6=1]* How would you rate your satisfaction in the following areas?

*[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]*

1. 1 – Extremely dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1	How easy it was to understand which flood map was determining your premium rates – the current map or an older one	<i>PN: DISPLAY IF C9=1</i>
2	The time between when you applied and when the coverage went into effect	
3	How easy it was to fill out a letter of map change (LOMC), a letter of map revision (LOMR) or a letter of map amendment (LOMA) application	
4	How easy was it to understand the LOMC, LOMR or LOMA requirements from FEMA	
5	How easy it was to reach FEMA representative with LOMC, LOMR or LOMA questions	
6	How helpful the FEMA representative was when answering your questions regarding the LOMC, LOMR, or LOMA	

SS13. We'd like to understand your experience with *[PN: INSERT FLOOD INSURER]* as a new policy holder. How would you rate your satisfaction in the following areas?

*[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]*

1. 1 – Extremely dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The information you received from the Claims Handbook that you received from FEMA	
2.	The information you received from the summary of coverage booklet	
3.	How easy it was to submit a premium payment	

**STEADY STATE JOURNEY**

**[PN: ASK ALL]**

In this section, we'd like to understand your experience as a flood insurance policy holder with **[PN: INSERT FLOOD INSURER]**.

- SJ1 Does **[PN: INSERT FLOOD INSURER]** cover both your homeowners insurance and flood insurance?
  - 1. Yes
  - 2. No
  
- SJ2. How frequently do you receive a call, mail or email from **[PN: INSERT FLOOD INSURER]** regarding your flood insurance?
  - 1. Once a week
  - 2. Once a month
  - 3. Once a year
  - 4. Less frequently
  - 5. Never
  
- SJ3. **After** you signed up for your flood insurance coverage, which if any of the following did you contact to get more information on coverage, storm preparedness etc.? Select all that apply.

**[PN: RANDOMIZE ROWS 1-8 FOR EACH RESPONDENT.]**

- 1. Visited the company's website, mobile site, or social media site (e.g., Facebook)
- 2. Called the company's 1-800 number
- 3. Contacted insurance company representative
- 4. Read articles, reviews, or blogs about the company
- 5. Read FEMA Claims Handbook
- 6. Visited Floodsmart website/mobile site
- 7. Contacted a FEMA representative in person, through email or on phone
- 8. Contacted floodplain manager or other community official
- 9. Other (please specify) \_\_\_\_\_ **[PN: ANCHOR]**
- 10. None of the above **[PN: ANCHOR]**

- SJ4. How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**
  - 1. 1 – Extremely Dissatisfied
  - 2. 2
  - 3. 3
  - 4. 4
  - 5. 5 – Extremely Satisfied
  - 99. Not Applicable

<b>[RANDOMIZE ROWS]</b>		
1.	The information you received from <b>[PN: INSERT FLOOD INSURER]</b> regarding your policy, storm preparedness and impending risks	
2.	The information you received regarding your coverage from the National Flood Insurance Program (NFIP)	
3.	The information you received regarding storm preparedness from your floodplain manager or other community official	

**ASK QUERY**

**[PN: DISPLAY IF QUALIFIED FOR ASK QUERY JOURNEY, ELSE SKIP TO CUSTOMER INITIATED CHANGES JOURNEY]**

In this section, we'd like to understand your experience with **[PN: INSERT FLOOD INSURER]** while addressing your questions or problems regarding your flood insurance policy.

- AQ1. What type of question did you ask **[PN: INSERT FLOOD INSURER]**?
  - 1. Payment processing
  - 2. Claims process
  - 3. Subscribing or sign-up (e.g. what documents are needed to complete)
  - 4. Policy coverage
  - 5. Other administrative question (e.g. forgot password)

6. Others (specify)\_\_\_\_\_

AQ2. How did you contact **[PN: INSERT FLOOD INSURER]** the **last time** you had a query or problem regarding your policy?

*[Please select one response.]*

**[PN: RANDOMIZE 1-6]**

1. Called **[PN: INSERT FLOOD INSURER]**'s 1-800 customer service number or a local office
2. Visited **[PN: INSERT FLOOD INSURER]**'s website
3. Emailed, texted or web-chatted with a **[PN: INSERT FLOOD INSURER]** representative
4. Spoke with a **[PN: INSERT FLOOD INSURER]** representative in person
5. Faxed or sent a letter(s) to **[PN: INSERT FLOOD INSURER]**
6. None of the above (**PN: SINGLE SELECT. ANCHOR**)

AQ3. We'd like to understand your experience when **making a query/addressing a problem** regarding your coverage/plan. How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied

	<b>[RANDOMIZE ROWS]</b>	
1.	The contact you had with a <b>[PN: INSERT FLOOD INSURER]</b> representative regarding your problem or question	<b>PN: DISPLAY IF AQ2 = 1, 3, 4</b>
2.	The resolution of the question or problem	
3.	How easy was it to identify an insurance company representative who could answer your question	

AQ3. **[PN: DISPLAY IF AQ2 = 1, 3, 4]** we'd like to understand your experience regarding the contact you had with the representative regarding your flood insurance policy. How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied

	<b>[RANDOMIZE ROWS]</b>	
1.	How long it took to reach a representative	
2.	How effectively the representative answered your question	

AQ4. We would like to understand more about how **[PN: INSERT FLOOD INSURER]** addressed your question or problem. How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	How long it took to answer your question / solve your problem	
2.	The follow-up you received from <b>[PN: INSERT FLOOD INSURER]</b> after the question was answered / problem was solved	
3.	The accuracy of the answer / solution given	
4.	The ability to get the answer/ address the problem during your first contact with <b>[INSERT FLOOD INSURER]</b>	

**CUSTOMER INITIATED CHANGE/QUESTION**

[PN: DISPLAY IF QUALIFIED FOR CUST. INITIATED CHANGES JOURNEY, ELSE SKIP TO 3rd PARTY-INITIATED COVERAGE CHANGE JOURNEY]

In this section, we'd like to understand your experience with [PN: INSERT FLOOD INSURER] while making changes to your flood insurance policy.

- CC1. What kind of change did you make to your insurance coverage with [PN: INSERT FLOOD INSURER]?
  - 1. Change coverage limits or deductible
  - 2. Added or removed contents coverage
  - 3. Requested a rate change based on mitigation activities (e.g. raised structure on your property)
  - 4. Added or removed a policyholder on the policy
  - 5. Changed contact information/ address
  - 6. Others (specify)\_\_\_\_\_
  
- CC2. Which of these changes were prompted by your insurance agent?
 

[PN: ROWS. SHOW ONLY ITEMS SELECTED IN CC1]

  - 1. Change coverage limits or deductible
  - 2. Added or removed contents coverage
  - 3. Requested a rate change based on mitigation activities (e.g. raised house)
  - 4. Added or removed a policyholder on the policy
  - 5. Changed contact information/ address
  - 6. Others (specify)\_\_\_\_\_ [PN: AUTOFILL FROM CC1]
  
- CC3. How did you contact [PN: INSERT FLOOD INSURER] the **last time** you made any change in your coverage/ plan?
 

[Please select one response]

[PN: RANDOMIZE 1-6]

  - 1. Called [PN: INSERT FLOOD INSURER]'s 1-800 customer service number or a local office
  - 2. Visited [PN: INSERT FLOOD INSURER]'s website
  - 3. Emailed, texted or web-chatted with a [PN: INSERT FLOOD INSURER] representative
  - 4. Spoke with a [PN: INSERT FLOOD INSURER] representative in person
  - 5. Faxed or sent a letter(s) to [PN: INSERT FLOOD INSURER]
  - 6. None of the above (PN: SINGLE SELECT. ANCHOR)
  - 7. Others (specify)\_\_\_\_\_
  - 8. 98. Don't remember
  
- CC4. We'd like to understand your experience when making changes to your coverage/plan on this **most recent** occasion. How would you rate your satisfaction in the following areas?
 

[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]

  - 1. 1 – Extremely Dissatisfied
  - 2. 2
  - 3. 3
  - 4. 4
  - 5. 5 – Extremely Satisfied
  - 99. Don't know / Not Applicable

	[RANDOMIZE ROWS]	
1.	The contact you had with the representative regarding your change request in person or over the phone	[PN: DISPLAY IF CC3 = 1, 4]
2.	The process of making changes online or through email	[PN: DISPLAY IF CC3 =3]
3.	How long it took to reach a representative	[PN: DISPLAY IF CC3 = 1, 4]
4.	How knowledgeable the representative was about your policy and any potential changes	[PN: DISPLAY IF CC3 = 1, 4]

- CC5. How would you rate your satisfaction in the following areas?
 

[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]

  - 1. 1 – Extremely Dissatisfied

- 2. 2
- 3. 3
- 4. 4
- 5. 5 – Extremely Satisfied
- 99. Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The process of making changes on the insurance company's website	<b>[PN: DISPLAY IF CC3 = 3]</b>
2.	The response you received to your email or letter	<b>[PN: DISPLAY IF CC3 = 3, 5]</b>
3.	How easy it was to find help online and the types of changes you can make online	<b>[PN: DISPLAY IF CC3 = 2,3]</b>

- CC6. How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**
- 1. 1 – Extremely Dissatisfied
  - 2. 2
  - 3. 3
  - 4. 4
  - 5. 5 – Extremely Satisfied
  - 99. Not Applicable

1.	How easy it was to submit any required documentation to make the change	
2.	The number of documents you had to supply to make the change	
3.	How clearly any resulting change to your premium was communicated to you	

- CC7. How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**
- 1. 1 – Extremely Dissatisfied
  - 2. 2
  - 3. 3
  - 4. 4
  - 5. 5 – Extremely Satisfied
  - 99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The fulfillment of your requested changes (i.e., changes were made correctly and fully)	
2.	How long it took to make the change	
3.	The confirmation you received that the change was made	

**FIMA/3<sup>rd</sup> PARTY-INITIATED COVERAGE CHANGE**  
**[PN: DISPLAY IF QUALIFIED FOR THIRD PARTY INITIATED CHANGE JOURNEY ELSE SKIP TO MAKE CLAIMS JOURNEY]**

Now, we'd like to understand more about your experience regarding a change of coverage or rates during your time as a policyholder due to map change or legislative change by the government. If your rates have changed more than once since you purchased flood insurance, please answer with respect to the **most recent change**.

- TP1. How did your coverage or rates change as a result of a map change, legislative change, or community rating system program?
- 1. Increased
  - 2. Decreased
  - 3. Don't know

- TP2. What caused the change in your rates?  
**[PN: RANDOMIZE ORDER]**
- 1. Map change

2. Legislative change
3. Community rating system program
4. Other (please specify)\_\_\_\_\_ **[PN: ANCHOR]**

TP3. How did you learn of the change? *Select all that apply.*

**[PN: RANDOMIZE ORDER]**

1. Call from agent
2. Noticed a change in the bill
3. Received a letter from FEMA
4. Heard /read about legislation or map change (newspaper, internet)
5. Attended a community meeting
6. Other (please specify)\_\_\_\_\_ **[PN: ANCHOR]**

TP4. **[PN: DISPLAY IF TP1=1]** Did you attempt to contest the rate change or the premium change?

1. Yes
2. No

TP5. How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	How easy it was to understand what the change was	
2.	The effectiveness of FEMA's outreach to explain the rate change	<b>PN : DISPLAY IF TP3=3</b>
3.	The process of contesting the rate change or premium change	<b>PN : DISPLAY IF TP4=1</b>
4.	The interaction you had with your insurance agent regarding the rate change	<b>PN : DISPLAY IF TP3=1</b>

TP6. **[PN: DISPLAY IF TP4=1]** How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	How easy it was to fill out the application for a letter of map change (LOMC), a letter of map revision (LOMR) or a letter of map amendment (LOMA) application	
2.	The response you got from FEMA regarding your LOMA, LOMC, or LOMR	
3.	The outcome of the appeal process	

TP7. **[PN: DISPLAY IF TP3=1]** How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	How helpful the insurance agent was at proposing alternatives to a rate	



	change, if any were available	
2.	How effectively the insurance agent explained the change to your policy and underlying reasons	
3.	How helpful the insurance agent was at processing your rate change	

**MAKE CLAIMS JOURNEY**

[PN: DISPLAY IF QUALIFIED FOR MAKE CLAIMS JOURNEY, ELSE SKIP TO CANCEL POLICY JOURNEY]

We'd like to understand more about your experience with [PN: INSERT FLOOD INSURER] while making claims for your flood insurance. If you have had more than one claim in the past, then we would like to know about the **most recent claim**.

MC1. How did you contact [PN: INSERT FLOOD INSURER] to report the claim?

[Please select one response]

1. Called the company's toll-free (1-800) number or local office/agency
2. Called the independent agent
3. Called FEMA
4. Contacted the insurance company via email
5. Other (please specify) \_\_\_\_\_ [PN: ANCHOR]

MC2. Did the claim involve any of the following?

[PN: ANSWER OPTIONS ACROSS]

1. Yes
2. No

[PN: ROWS]

1. An advance payment request
2. An engineer visit (apart from the adjuster) to assess the damage
3. An appeal against the initial claim settlement
4. [PN: DISPLAY IF MC2\_3=YES] Contact with a community outreach specialist regarding increased cost of compliance

MC3. Please answer the following questions regarding the adjuster's assessment of the cost of repairing your building or replacing your structure:

[PN: SCALE OPTIONS ACROSS WITH ANCHOR LABELS]

1. Yes
2. No
99. Not sure

	[RANDOMIZE ROWS]	
1.	My building or contents sustained damage covered by my flood insurance policy	
2.	The cost of repair and replacement was higher than my deductible (i.e., you received money on your claim)	
3.	The cost of repair and replacement was higher than my coverage limits	

MC4. How would you rate your satisfaction in the following processes?

[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	[RANDOMIZE ROWS]	
1.	The contact you had with [PN: INSERT FLOOD INSURER] when you informed them about the incident	

2.	Inspection and claim assessment	
3.	Requesting an advance payment	
4.	Filing the claim	
5.	Filing an appeal	
6.	The final settlement you received for your claim	

MC5. We'd like to understand more about your experience with **[PN: INSERT FLOOD INSURER]** when you informed the company about the incident. How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	How long it took to reach a representative	
2.	How knowledgeable the representative was about the claims process	
3.	How easy it was to understand what support you can get from the insurance company	
4.	The amount of information available online	
5.	How helpfully the representative explained what to do at the scene of the incident	

MC6. Now we'd like to understand more about your experience with **[PN: INSERT FLOOD INSURER]** during the claim adjustment process. How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The time it took for the adjuster to call you, after you informed the insurance representative about the incident	
2.	The ease with which you were able to obtain an advance payment	
3.	The trust you had that your adjuster was able to answer your questions and had your best interests at heart	
4.	The information you received about the damage to your property	
5.	The accuracy of information you received about the damage to your property	
6.	The time it took to get an estimate of the claim assessment	
7.	How regularly the status on the claim assessment was communicated	
8.	How well you understood why you received the claim payment that you did	
9.	The consistency of the information that you received from different sources (e.g. adjuster, engineer, FEMA public assistance) regarding your claim	

MC7. **[PN: DISPLAY IF MC2\_1= YES]** How would you rate your satisfaction in the following areas?

**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**

1. 1 – Extremely Dissatisfied
2. 2
3. 3
4. 4
5. 5 – Extremely Satisfied

99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The amount of documentation required to file the request for advance payment	
2.	The time it took for you to receive your advance payment	
3.	The amount of advance payment you received	
4.	How clearly the conditions of the advance payment were communicated	

- MC8. How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**
1. 1 – Extremely Dissatisfied
  2. 2
  3. 3
  4. 4
  5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The amount of documentation required for filing the claim	
2.	The time it took for you get information about the decision on your claim	
3.	The information you received regarding your claim settlement	
4.	The total payment that you received compared to your claim	
5.	The time it took to receive payment from your claim	

- MC9. **[PN: DISPLAY IF MC2\_3= YES]** Now we'd like to understand more about your experience with FEMA while appealing your claim settlement. How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**
1. 1 – Extremely Dissatisfied
  2. 2
  3. 3
  4. 4
  5. 5 – Extremely Satisfied
99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1	How easy it was to appeal the settlement with <b>[PN: INSERT FLOOD INSURER]</b>	
2	The time it took to get a response to your appeal	
3	How clearly the appeals process was explained to you	
4	The results of your appeal	

**CANCEL POLICY**  
**[PN: DISPLAY IF QUALIFIED FOR CANCEL POLICY JOURNEY, ELSE SKIP TO RENEW POLICY JOURNEY]**

We'd like to understand more about your experience with **[PN: INSERT FLOOD INSURER]** while cancelling your flood insurance plan.

- CP1. Prior to renewal, did you receive any kind of communication from **[PN: INSERT FLOOD INSURER]** insurance or sales agent?
1. Yes
  2. No
- CP2. How did you contact **[PN: INSERT FLOOD INSURER]** regarding the cancellation of your coverage/ plan? Please select one response.  
**[PN: RANDOMIZE 1-5. ANCHOR 6, 7.]**
1. Called **[PN: INSERT FLOOD INSURER]**'s 1-800 customer service number or a local office

2. Visited [PN: INSERT FLOOD INSURER]'s website
3. Emailed, texted or web-chatted with a [PN: INSERT FLOOD INSURER] representative
4. Spoke with a [PN: INSERT FLOOD INSURER] representative in person
5. Faxed or sent a letter(s) to [PN: INSERT FLOOD INSURER]
6. Other (please specify) \_\_\_\_\_ [PN: ANCHOR]
7. I did not contact [PN: INSERT FLOOD INSURER], just stopped paying the premium

- CP3. How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**
1. 1 – Extremely dissatisfied
  2. 2
  3. 3
  4. 4
  5. 5 – Extremely satisfied
  99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	The clarity of communication you received from the insurer regarding your cancellation request	<b>PN: DISPLAY IF CP2=1-4</b>
2.	How easy it was to cancel your insurance plan	
3.	The interaction you had with the <b>[PN: INSERT FLOOD INSURER]</b> representative regarding your cancellation	<b>PN: DISPLAY IF CP2= 1,4</b>
4.	Renewal options that were shared with you at the time of cancellation	<b>PN: DISPLAY IF CP1= 1</b>

**RENEW POLICY**  
**[PN: DISPLAY IF QUALIFIED FOR RENEW POLICY JOURNEY, ELSE SKIP TO OTHERS SECTION]**

- RP1. We'd like to understand more about your experience with **[PN: INSERT FLOOD INSURER]** when renewing your insurance plan. Prior to renewal, did you receive any kind of communication from **[PN: INSERT FLOOD INSURER]**'s representative?
1. Yes
  2. No

- RP2. Has your insurance premium changed since last year?
1. Yes, it increased
  2. Yes, it decreased
  3. No change
  4. Don't know

- RP3. How would you rate your satisfaction in the following areas?  
**[PN: RATING SCALE OPTIONS ACROSS WITH ANCHOR LABELS]**
1. 1 – Extremely dissatisfied
  2. 2
  3. 3
  4. 4
  5. 5 – Extremely satisfied
  99. Don't know / Not Applicable

	<b>[RANDOMIZE ROWS]</b>	
1.	How clearly your insurer communicated with you regarding the renewal	
2.	How much you paid for renewing your policy	
3.	How easy it was to renew your insurance plan	
4.	How easily you could understand if your coverage differed from prior year	
5.	How clearly and convincingly the renewal premium increase or decrease was explained to you	<b>PN: DISPLAY IF RP2=1</b>

**OTHERS [PN: ASK ALL]**

We are almost at the end of the survey. Could you please answer the last few questions?

OT1. What were the most important factors which influenced you to choose the current location of your house? Please rank the top 3 factors.

*[PN: ALLOW RANK 1, 2, 3]*

- 1. Proximity to coast/river
- 2. Good views from property
- 3. Good town services (including schools)
- 4. Good neighborhood
- 5. Proximity to work
- 6. The affordability of the home
- 7. Lower taxes
- 8. Safety
- 9. Good weather

OT3. We'd like to understand more about your likelihood to purchase a flood insurance policy with additional coverage. Would you add the following coverage to your existing policy, keeping in mind that these coverage options will affect your premium?

*[Please select one response for each row.]*

*[PN: LIKELIHOOD SCALE OPTIONS ACROSS WITH ANCHOR LABELS]*

- 1. Yes
- 2. No
- 99. Don't know / Not Applicable

<i>[RANDOMIZE ROWS]</i>		
1.	Increase your coverage maximum beyond \$250,000	
2.	Add basement coverage to your flood policy	
3.	Add earth movement coverage to your flood policy; i.e. damage caused by moving ground as a result of a flood	
4.	Add living expenses of up to \$5,000 to your policy	

**“Thank you for your participation.”**

**END OF QUESTIONNAIRE**