Homeowners Catastrophe Insurance Trust

COLORADO

Application (Underwritten by Certain Underwriters at Lloyd's, London)

GENERAL INFORMATION

Name: _____ DOB: _____

Name: _____ DOB: _____

Street: _____

City: _____ State: _____ Zip: _____ - _____

Home: ( ) _____ Cell: ( ) _____

Mailing Address (if different than Property Address listed above)

Street: _____

City: _____ State: _____ Zip: _____ - _____

Mortgagee (ONLY if requiring this insurance)

1st Mortgagee: _____

Loan #: _____

Street: _____

City: _____ State: _____ Zip: _____ - _____

2nd Mortgagee: _____

Loan #: _____

Street: _____

City: _____ State: _____ Zip: _____ - _____

COVERAGE AMOUNT AND PREMIUM SELECTION ($70,000 to $1,000,000*) *[5% Deductible]*

***Note: The coverage amount selected below should be at least 100% of the building replacement cost of the home.**

√	COVERAGE	PREMIUM	√	COVERAGE	PREMIUM	√	COVERAGE	PREMIUM	√	COVERAGE	PREMIUM
❑	$70,000	$279	❑	$210,000	$711	❑	$450,000	$1,453	❑	$730,000	$2,318
❑	$75,000	$294	❑	$215,000	$727	❑	$460,000	$1,484	❑	$740,000	$2,349
❑	$80,000	$309	❑	$220,000	$742	❑	$470,000	$1,515	❑	$750,000	$2,380
❑	$85,000	$325	❑	$225,000	$758	❑	$480,000	$1,545	❑	$760,000	$2,411
❑	$90,000	$340	❑	$230,000	$773	❑	$490,000	$1,576	❑	$770,000	$2,442
❑	$95,000	$356	❑	$235,000	$788	❑	$500,000	$1,607	❑	$780,000	$2,472
❑	$100,000	$371	❑	$240,000	$804	❑	$510,000	$1,638	❑	$790,000	$2,503
❑	$105,000	$387	❑	$245,000	$819	❑	$520,000	$1,669	❑	$800,000	$2,534
❑	$110,000	$402	❑	$250,000	$835	❑	$530,000	$1,700	❑	$810,000	$2,565
❑	$115,000	$418	❑	$260,000	$866	❑	$540,000	$1,731	❑	$820,000	$2,596
❑	$120,000	$433	❑	$270,000	$897	❑	$550,000	$1,762	❑	$830,000	$2,627
❑	$125,000	$449	❑	$280,000	$927	❑	$560,000	$1,793	❑	$840,000	$2,658
❑	$130,000	$464	❑	$290,000	$958	❑	$570,000	$1,824	❑	$850,000	$2,689
❑	$135,000	$479	❑	$300,000	$989	❑	$580,000	$1,854	❑	$860,000	$2,720
❑	$140,000	$495	❑	$310,000	$1,020	❑	$590,000	$1,885	❑	$870,000	$2,751
❑	$145,000	$510	❑	$320,000	$1,051	❑	$600,000	$1,916	❑	$880,000	$2,781
❑	$150,000	$526	❑	$330,000	$1,082	❑	$610,000	$1,947	❑	$890,000	$2,812
❑	$155,000	$541	❑	$340,000	$1,113	❑	$620,000	$1,978	❑	$900,000	$2,843
❑	$160,000	$557	❑	$350,000	$1,144	❑	$630,000	$2,009	❑	$910,000	$2,874
❑	$165,000	$572	❑	$360,000	$1,175	❑	$640,000	$2,040	❑	$920,000	$2,905
❑	$170,000	$588	❑	$370,000	$1,206	❑	$650,000	$2,071	❑	$930,000	$2,936
❑	$175,000	$603	❑	$380,000	$1,236	❑	$660,000	$2,102	❑	$940,000	$2,967
❑	$180,000	$618	❑	$390,000	$1,267	❑	$670,000	$2,133	❑	$950,000	$2,998
❑	$185,000	$634	❑	$400,000	$1,298	❑	$680,000	$2,163	❑	$960,000	$3,029
❑	$190,000	$649	❑	$410,000	$1,329	❑	$690,000	$2,194	❑	$970,000	$3,060
❑	$195,000	$665	❑	$420,000	$1,360	❑	$700,000	$2,225	❑	$980,000	$3,090
❑	$200,000	$680	❑	$430,000	$1,391	❑	$710,000	$2,256	❑	$990,000	$3,121
❑	$205,000	$696	❑	$440,000	$1,422	❑	$720,000	$2,287	❑	$1,000,000	$3,152

The premium table above includes all applicable policy and state surplus line taxes and fees.

Premium Payment Must Accompany Application – Make Check Payable to HCIT

❑ **Charge $**_____.____ **Credit Card:** ❑ VISA or ❑ MasterCard #_____ _____ _____ _____ **Exp:** _____/_____

Print Full Name as it Appears on Card/ACH: _____

Cardholder Billing Address: _____ City: _____ State: _____ Zip: _____

ACH Bank Name: _____ **Routing No.:** _____ **Account No.:** _____

Cardholder/ACH Signature: _____

I hereby authorize HCIT to charge my credit card or process an ACH for the insurance premium amount noted in the rate grid above.

APPLICANT MUST ALSO COMPLETE, SIGN AND DATE THE REVERSE SIDE OF THIS APPLICATION FORM.

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HOMEOWNERS CATASTROPHE INSURANCE TRUST – APPLICATION CONT.

1) Building replacement cost of the home: $_____
2) Year the home was built: _____
3) Dwelling: ☐ One Family ☐ Two Family
4) Dwelling Type: ☐ One-Story ☐ Two-Story ☐ Bi-Level ☐ Split-Level ☐ Other _____*
5) Is the home Owner Occupied? ❑ Yes ❑ No
   ***Note:** If "No" please explain why _____
6) As the applicant, how many years have you lived in the home?
7) Construction: ☐ Masonry ☐ Masonry Veneer ☐ Frame ☐ Other _____
   ***Note:** Mobile homes and Condos are not eligible for this coverage.
8) Does the home have a basement? ❑ Yes ❑ No
9) Does the basement have a sump pump or similar equipment? ❑ Yes ❑ No
10) Is the house within **one** mile of a waterway, river, stream, creek, canal, ditch, lake, reservoir, pond, arroyo, wash, or in the potential path of seasonal runoff, or any other source of water that could flow above ground? ❑ Yes ❑ No
    ***Note:** If the answer is "Yes", please answer the following:
    a) What is the name of the body or flow of water? _____
    b) How many feet is the structure away from the water? _____ft.
    c) How many vertical feet does the structure lie above or below the water? _____ft. (above) _____ft. (below)
11) Is the home situated or built:
    a) In the path of a potential landslide, avalanche, or mud flow? ❑ Yes ❑ No
    b) At the top of, on, or at the base of a steep slope? ❑ Yes ❑ No
    c) Upon a landfill? ❑ Yes ❑ No
    d) Within **one** mile of a forest, brush, or grass fire area? ❑ Yes ❑ No
    Please include month & year of fire if answered yes
    ***Note:** If answered "Yes"to any above, please describe and explain in full:
    _____
12) Is there any existing damage to the house such as cracking or settling of walls or foundations? ❑ Yes ❑ No
    ***Note:** If answered "Yes", please describe and explain in full:
    _____
    _____
13) Please advise if the home, appurtenant structure, or nearby home has suffered damage from any of the following perils in the past (include any such losses that you are aware of within at least the past five years):
    a) Flood ❑ Yes ❑ No
    b) Surface Water ❑ Yes ❑ No
    c) Landslide or Earth Movement ❑ Yes ❑ No
    ***Note:** If answered "Yes" to any above, please describe and explain in full:
    _____
    _____
14) Is your mortgage requiring the purchase of flood insurance on your home? ❑ Yes ❑ No
    ***Note:** If answered "Yes", please explain and include a full description of the floodplain surrounding your property: _____
    _____
15) Has any similar coverage being applied for been declined, cancelled, or non-renewed for this home previously? ❑ Yes ❑ No
    ***Note:** If answered "Yes", please describe and explain in full:
    _____
16) Is similar coverage being applied for in effect now or has been at any time in the past for this home? ❑ Yes ❑ No
    ***Note:** If answered "Yes", please describe and explain in full:
    _____
    _____

PROPOSED EFFECTIVE DATE AND APPLICANT SIGNATURE

Proposed Effective Date: _____ Is this date being requested to meet closing requirements on a new mortgage loan?* ❑ Yes ❑ No

PLEASE NOTE this application is subject to Underwriter approval (after annual premium is paid in full) before coverage will be bound and issued by HCIT. If approved there will be a 10-day waiting period before coverage will be bound. (*Note: the waiting period may, at the discretion of the Underwriter, be reduced to five (5) days to meet the requirements of a bona fide closing date for a new mortgage). The only evidence of insurance will be issued by HCIT, acting under the authority of Certain Underwriters at Lloyd's, London.

The Applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated.

SIGNING THIS APPLICATION DOES NOT BIND THE UNDERWRITERS/COMPANY TO COMPLETE THIS INSURANCE.

Signature of Applicant(s):_____ / _____ Date: _____

PRODUCING AGENT:

Agent/Producer: _____

Name of Agency: _____

Address: _____

City/State/Zip: _____ / _____ / _____

Phone No.: ( ) _____

Email: _____

SPONSORING ASSOCIATION:

PROFESSIONAL INDEPENDENT INSURANCE AGENTS OF COLORADO
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LLOYD'S COVERHOLDER

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