

Submission: _____

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

PROOF OF LOSS

Policyholder-Prepared

BUILDING AND CONTENTS

Policyholders use this form to provide a Proof of Loss to their insurer, which is the policyholder's statement of the amount of money being requested, signed and sworn to by the policyholder, with documentation to support the amount requested, as required by the [Standard Flood Insurance Policy](#) (SFIP) in section VII.J.4.

POLICYHOLDER: _____	POLICY NO.: _____
PROPERTY ADDRESS: _____	CLAIM/FILE NO.: _____
CITY: _____ STATE: _____ ZIP: _____	DATE OF LOSS: _____
MAILING ADDRESS: _____ Same as property	TIME OF LOSS: _____
CITY: _____ STATE: _____ ZIP: _____	PHONE NO.: _____
EMAIL #1: _____	EMAIL #2: _____

How flood loss happened: _____

Interest:	Mortgagee(s): _____	None: <input type="checkbox"/>
	Others with interest in or liens, charges or claims against property: _____	None: <input type="checkbox"/>
	Other insurance that may insure this loss: _____	Type: _____

Title and Occupancy:	Building type: _____	Ownership/use: _____
	Contents type/ownership/use: _____	

COVERAGE / BENEFIT TYPE	AMOUNT OF COVERAGE	DEDUCTIBLE	AMOUNT CLAIMED
COVERAGE A – BUILDING PROPERTY	\$ _____	\$ _____	\$ _____
COVERAGE B – PERSONAL PROPERTY	\$ _____	\$ _____	\$ _____
NET AMOUNT CLAIMED:			\$ _____

Requirements for submitting a complete Proof of Loss (check all that apply):	<input type="checkbox"/> In completing this Proof of Loss, I have used my own judgment concerning the amount of my loss
	<input type="checkbox"/> I have justified the amount of my loss by attaching the following:
	<input type="checkbox"/> Specifications of damaged buildings and detailed repair estimates (for building claims)
	<input type="checkbox"/> A detailed inventory of damaged personal property (for contents claims)
	<input type="checkbox"/> All bills, invoices, receipts and related documents (for all claims)

I understand that I must submit a Proof of Loss within 60 days of the date of the loss or within any extension of that deadline made in writing by FEMA's Federal Insurance Administrator. The flood event identified above damaged or destroyed the property claimed on this Proof of Loss. I understand that my SFIP is issued pursuant to federal law, the [National Flood Insurance Act of 1968, as amended](#), and applicable federal regulations in [Title 44 of the Code of Federal Regulations, Chapter 1, Subchapter B](#).

I understand that I may still request additional payment for other flood damages if I believe that not all damages were addressed in this estimate. In the event a third party is responsible for the damage, I hereby authorize my insurer to bring suit in my name against any third party who may be responsible for the damages.

I have not knowingly and willfully falsified or concealed a material fact, made a false or fraudulent representation, or presented any false document in connection with this claim, and acknowledge that any such action may be punishable by fine of imprisonment under applicable United State Codes.

By signing and dating this form, I declare under penalty of perjury that the foregoing is true and correct.

POLICYHOLDER SIGNATURE: _____	DATE SIGNED: _____
OWNER NAME: _____	OWNER TITLE: _____