

# CONDO RATING WORKSHEET

## LOW-RISE

**\*\*\*\*LESS THAN 5 UNITS AND/OR LESS THAN 3 FLOORS INCLUDING TOWNHOUSE/ROWHOUSE REGARDLESS OF # OF FLOORS AND SINGLE FAMILY DETACHED UNITS\*\*\*\***

Date: \_\_\_\_\_

### BUILDING INFORMATION

Occupancy Type: _____	<b>Property Address</b>
Building Type: _____	_____
Basement: _____	_____
FIRM Zone: _____	_____
Base Flood Elevation: _____	_____
Lowest Floor Elevation: _____	_____
<b>Difference:</b> _____	<b>DOC:</b> _____
Lowest Adjacent Grade: _____	

**# of Units:** \_\_\_\_\_

### RATE CALCULATIONS

#### BUILDING

*Maximum Coverage Available (# of Units x \$250,000)*

Basic Limit		Rate			
(# of Units x \$50,000)	_____	x	_____	=	_____
Additional Limit	_____	x	_____	=	_____
Deductible Discount (determine % from Chart)				=	_____
ICC Premium				=	_____
Federal Policy Fee (determined by number of units)				=	_____
Total Premium Due				=	_____

**Check to make sure these are included:**

Replacement Cost: \_\_\_\_\_

# of photos attached: \_\_\_\_\_

Lowest Adjacent Grade: \_\_\_\_\_

Replacement Cost Documentation \_\_\_\_\_