

**Flood Processing Center**  
**PO Box 2057**  
**Kalispell, MT 59901**  
**Phone: 888-389-8659      Fax: 406-257-1409**

Policy Number: \_\_\_\_\_  
Insured Name: \_\_\_\_\_  
Property Address: \_\_\_\_\_

**VE AND V1-V30 ENCLOSURE INFORMATION WORKSHEET**

**Message:**

National Flood Insurance Program guidelines require that for all elevated buildings in VE and V1-V30 zones where there is an enclosure and/or attached garage indicated, the following information must be provided.

**Enclosure Information:**

Enclosure Size \_\_\_\_\_ (in square feet)

Is the enclosure (please mark one choice):

Finished      Or       Unfinished

Enclosure Wall Material (please mark one choice):

Breakaway Walls

Solid Walls

Lattice

Other (please list) \_\_\_\_\_

Is there any Machinery, Equipment or Appliances in Enclosure?     No     Yes

If YES- please list the items below:

(Example: furnace, washer/dryer, air conditioner, food freezer, or hot water heater)

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**Attached Garage Information:**

Is there an attached garage?     Yes       No

If Yes, please complete the following questions:

Garage Size \_\_\_\_\_ (in square feet)

Is the garage (please mark one choice):

Finished      Or       Unfinished

Garage Wall Material (please mark one choice):

Breakaway Walls

Solid Walls

Lattice

Other (please list) \_\_\_\_\_

Is there any Machinery, Equipment or Appliances in the Garage?     No     Yes

If YES- please list the items below:

(Example: furnace, washer/dryer, air conditioner, food freezer, or hot water heater)

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Current Replacement Cost of the Building: \_\_\_\_\_

Agent Signature: \_\_\_\_\_

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