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COMMON DEFINITIONS

Private Flood Insurance is coverage that insures commercial and residential property against the peril of flood, not offered through the National Flood Insurance Program. This includes creditor-placed/lender-placed/force-placed policies.

Standalone Policy: private flood coverage sold as an individual policy or as a policy bundled with other policies.

Endorsement: private flood coverage sold as an endorsement to another policy. If a rider, endorsement or floater acts like a separate policy with separate premium, deductible and limit, then it is to be recorded on the same annual statement line as if it were a stand-alone policy regardless of whether it is referred to as a rider, endorsement or floater. If there is no additional premium, separate deductible or limit, the rider, endorsement or floater should be reported on the same annual statement line as the base policy.

Creditor-placed (also known as lender-placed and force-placed insurance): insurance that is placed by the lender subsequent to the date of the credit transaction, providing coverage against loss, expense or damage to collateralized property as a result of fire, theft, collision or other risks of loss that would either impair a creditor's interest or adversely affect the value of collateral covered by limited dual-interest insurance. It is purchased by the lender according to the terms of the credit agreement as a result of the borrower's failure to provide required insurance, with the cost of the coverage being charged to the borrower. It may be either single-interest insurance or limited dual-interest insurance.¹

For Residential Policies, Standalone and Endorsements, First Dollar and Excess, please include flood policies covering the following property types:

- Mobile/manufactured homes intended for use as a dwelling
- Individual unit condo coverage
- Single family homes
- Residential structures including four or fewer family units

Exclude:

- NFIP policies
- Sewer/water backup coverage issued as an endorsement to a homeowners or residential policy.
- Private flood written on a surplus lines basis (subject to the separate flood data collection conducted through[2-2 (va)1 Tf .ohe on

For Commercial Policies, Standalone and Endorsements, First Dollar and Excess, please include flood policies covering the following property types:

- Non-residential coverage
- Commercial coverage including, but not limited to;
 - Allied lines

DATA ELEMENTS CONTAINED IN PARTS 2 THROUGH 6

Direct Written Premium

Written premium is defined as the contractually determined amount charged by the reporting entity to the policyholder for the effective period of the contract based on the expectation of risk, policy benefits, and expenses associated with the coverage provided by the terms of the insurance contract.² Amounts should be consistent with the amount reported on the NAIC Annual Financial Statement Exhibit of Premiums and Losses. This includes direct premium written during the calendar year specified (2018 for the first reporting year). Premiums reported should be gross, including policy and membership fees, less return premiums and premiums on policies not taken. Premiums may include new and renewal policies. If premium is refunded or additional premium is written during the reporting period (regardless of the applicable policy effective date) the net effect should be reported. Reporting shall not include premiums received from or losses paid to other carriers on account of reinsurance assumed by the reporting carrier, nor, shall any deductions be made by the reporting carrier for premiums added to or for losses recovered from other carriers on account of reinsurance ceded. Decimals are allowed, no symbols such as dollar signs please.

Statement Exhibit of Premiums and Losses. Policies may include per-occurrence or claims-made. Decimals are allowed, no symbols such as dollar signs please.

include defense, litigation, and cost containment expenses, whether internal or external. DCC include, but are not limited to, the following items:

- Surveillance expenses
- Litigation management expenses
- Fees or salaries for appraisers, private investigators, hearing representatives, reinspectors and fraud investigators, if working in defense of a claim;
- Attorney fees incurred owing to a duty to defend, even when other coverage does not exist; and
- The cost of engaging experts⁵

Decimals are allowed, no symbols such as dollar signs please.

Defense and Cost Containment Expense Unpaid

Amounts should include liability for DCC of reported losses. Reported losses are expected payments for losses relating to insured events that have occurred and have been reported to, but

Number of Claims Open Beginning of Current Year

Number of claims open as of Jan.1 of the current reporting year. Only whole numbers will be accepted, no decimals please.

Number of Claims Opened During the Reporting Year

Number of claims opened at any time during the current reporting year. This number includes claims opened throughout the year regardless of whether they were closed. Only whole numbers will be accepted, no decimals please.

Number of Claims Open End of Current Year

Number of claims open as of 12/31 of the data reporting year. Only whole numbers will be accepted, no decimals please.

Number of Claims Closed with Payment

Amounts should include claims closed with payment where the claim was closed during the reporting period (calendar year 2018 or 2019 depending on data year included in the submission) regardless of the date of loss or when the claim was received. For claims where the net payment is \$0 due to subrogation recoveries, report the number of claims in which any amount was paid to the insured; do not net the payment with subrogation recoveries when counting the number of paid claims. Please EXCLUDE:

- If a claim is reopened for the sole purpose of refunding the insured's deductible, do not count it as a paid claim.
- If claims were paid for company loss adjustment expenses and no payment is made to the insured/claimant, do not count it as a paid claim.
- If claims are closed because the amount claimed is below the insured's deductible, do not count it as a paid claim.

Only whole numbers will be accepted, no decimals please.