No

No

No

Nο

No

Yes

Yes

## **Sinkhole Loss Coverage Endorsement Request**

Completion of this form and its submission to Trusted Resource Underwriters Exchange (TRUE) is required to request the addition of Sinkhole Loss Coverage.

| Insured:    | Policy #: |  |
|-------------|-----------|--|
| Agent Name: | Date:     |  |

## **Sinkhole Loss Coverage Underwriting Information**

- Have you ever made a claim for or have you ever been advised that Yes No I don't know your house or property was damaged because of a sinkhole or sinkhole activity?
- 2. To the best of your knowledge has the insured location ever Yes experienced damage or loss resulting from sinkhole activity or collapse or been the subject of any ground movement investigation?

3. Have you ever made a claim for or have you noticed any cracking, shifting, sinking, bulging, rising, sloping, or sagging of any roofs, floors, ceiling, walls or exterior stucco in your house including your garage, driveway or in any lanai, patio, screened enclosure, porch, Florida Room or similar structure or room on your property?

4. Are you aware of any current or prior damage to your home resulting from cracking, shifting, sinking, bulging, rising, sloping, or sagging of any roofs, floors, ceiling, wall or exterior stucco in your house including your garage, driveway or any lanai, patio, porch or similar structure on your property?

- a. If yes, have repairs been made for these conditions?
- b. If yes, describe the repairs made (i.e. patching or painting).

5. Are you aware of any current or prior depressions, slopes, holes or Yes openings in your property including your yard, driveway or in the soil or foundation below any lanai, patio, screened enclosure, porch, Florida room, garage or similar structure or room?

- a. If yes, have repairs been made for these conditions?
- b. If yes, describe the repairs made.

6. Are you aware of any doors or windows in your home that are difficult Yes to open or close due to the misalignment with the frame?

a. If yes, have repairs been made for these conditions?

b. If yes, describe the repairs made.

Yes No

Yes No

Yes No None needed

None needed

TRUE FL 221 06 20 Page 1 of 3

HOMEOWNERS TRUE FL 221 06 20

Date of Loss:

7. Are you aware of any sinkholes, sinkhole activity, claims, Yes No investigations, ground studies, soil testing, soil sampling or any inspections for sagging of roofs or cracking, shifting, sinking, bulging, sloping, depressions in other properties or houses that are located in the area of the residence premises? 8. Do you have any reason to suspect that your house or property is Yes No experiencing cracking, shifting, sinking, bulging, sloping or sagging of any roofs, floors, ceilings or walls in your home or in any driveway, lanai, patio, screened enclosure, porch, Florida room, garage or similar structure or room? 9. If you have a swimming pool, does the pool have any cracks in the No Yes pool or around the pool or decking? 10. If you are a new home buyer who has purchased this house and Yes No Not a new buy property, are you aware of any statement, remark, notice, writing, seller's disclosure, closing statement, photograph, real estate listing or any other representation from any source that your house has been inspected, tested, repaired including the patching or painting of any roof, ceilings, floors or walls of any part of the house or property for cracking, shifting, sinking, bulging, sloping or sagging of any roof, floors, ceiling or walls or that any part of the foundation or the soil below the house foundation has been repaired, remediated or stabilized through the use of grouting, piles, piers or other supports? If you are a new home buyer who has purchased this house and Yes No Not a new buy 11. property within the last 2 years, are you aware of any statement, remark, notice, writing, seller's disclosure, closing statement, photograph, real estate listing, engineering report or any other representation from any source that your house has been inspected, tested or repaired because of any sinkhole or sinkhole activity? Was your house or property listed or advertised for sale as a Yes No 12. foreclosure or short sale, or was it disclosed that the house had unrepaired damage caused by a sinkhole or sinkhole activity? Do you have any knowledge of any prior repairs made to any 13. Yes No structures on the insured location for cracking damage? If you are aware of any prior sinkhole losses at this location, provide following details:

Amount of Damage (whether or not paid by insurance):

Description:

TRUE FL 221 06 20 Page 2 of 3

## PROPERTY INSPECTION:

In conjunction with this request, the applicant authorizes TRUE and their agents, employees or authorized vendors, access to the applicant's/insured's residence premises for the limited purpose of obtaining underwriting data. An inspection will require access to the dwelling and will be scheduled in advance with the applicant. The inspection will document existing damage, evaluate the structural integrity of the dwelling, and verify that there is no current or proximate sinkhole activity that has not been disclosed. The policyholder will be responsible for paying for the inspection fee. The fee will not be refundable no matter how the underwriting decision is reached. Also, both parties will receive a copy of the inspection. TRUE is under no obligation to inspect the property and if an inspection is made, TRUE and the inspection company in no way implies, warrants or guarantees the property is safe, structurally sound or meets any building codes or requirements.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

I understand that this request is being submitted Unbound and is subject to Underwriting Approval. The endorsement will not become effective until TRUE has reviewed this application, together with any other information which TRUE may require in reviewing my request for Sinkhole Loss Coverage, and has approved the adjustment of my policy. There are no warranties, promises, agreements (whether oral or written) or any other representation made by TRUE or any of its agents or employees which shall change or modify the requirement that no coverage shall become effective under this application without the issuance of an endorsement by TRUE.

## Insured's Initials

| Named Insured(s) Signature(s)   | Date Signed |
|---------------------------------|-------------|
| Named Insured(s) Signature(s)   | Date Signed |
| Agency Representative Signature | Date Signed |

TRUE FL 221 06 20 Page 3 of 3