

[Insured's Name, Address – Pre-printed [to be added by NFIP Bureau]

Date, 20XX

ACKNOWLEDGEMENT OF RECEIPT

By signing, dating and returning this document in the pre-stamped, enclosed envelope, you acknowledge that:

- You have received your Declarations Page, and a Summary of Coverage from your insurance company.
- We have provided you with your property's loss history and the NFIP Flood Insurance Claims Handbook.
- You understand that you have the option to purchase **BOTH** building and contents coverage as part of your policy or;
- You may purchase building or contents coverage separately.

The person(s) listed on the policy as the Named Insured(s) should sign and date this form. If a legal representative of the Named Insured signs, you must explain the nature of the representation and provide legal authority.

An additional copy of this form has been provided for you to keep with the other documents you received. Return the original signed and dated form in the envelope provided.

Thank you for your cooperation—and for protecting your property with the National Flood Insurance Program.

Signature of Named Insured: _____ **Date:** _____

Printed Full Name: _____

Signature of Named Insured: _____ **Date:** _____

Printed Full Name: _____