



Wright National Flood Insurance Company
A Stock Company
P.O. Box 33003
St. Petersburg, FL 33733-8003
Customer Service: 1-800-820-3242
Claims: 1-800-725-9472

Policy Number

Date of Notice

STATEMENT OF PRIMARY RESIDENCE STATUS FOR NFIP POLICY RATING

Insured Name:

Property Address:

Date Residency Status Changed:

In the section above, please provide the date when the primary residence status for the policy and property address above changed.

Check one:

- The above address is my primary residence, and I and/or my spouse will live at this location for more than 50 percent of the 365 days following the policy effective date.**
- FOR ACTIVE-DUTY MILITARY PERSONNEL:** The above address is my primary residence, and I and/or my spouse will live at this location for more than 50 percent of the 365 days following the policy effective date unless I am on extended active duty military deployment. I will not rent or use as income property this dwelling anytime during the policy term, and I will notify my insurer when my status changes.

PURSUANT TO 28 U.S.C. § 1746 I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT THE FOREGOING IS TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY CAUSE MY POLICY TO BE VOID, AND MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.

SIGNATURE OF INSURED

DATE

IMPORTANT: Please return completed form to your **Agent of Record**.