



Texas Windstorm Insurance Association Builders Risk New Business Application





TEXAS WINDSTORM
INSURANCE ASSOCIATION

Texas Windstorm Insurance Association

Builders Risk New Business Application



1. Cover Letter



November 3, 2017

Regulatory Policy Division
Property & Casualty Filings Intake
Texas Department of Insurance
Mail Code 104-3B
P.O. Box 149104
Austin, Texas 78714-9104
Via email: PCFilingsIntake@tdi.texas.gov

Re: Revised TWIA Builders Risk New Business Application

Dear Property & Casualty Filings Intake:

In accordance with Texas Administrative Code 5.4911(g), Texas Windstorm Insurance Association is submitting a revision to its Builders Risk New Business Application for Commissioner approval.

Changes to the application are being made based on the following:

1. TWIA is in the process of implementing a new policy administration system for its commercial business, Policy Center Commercial. The new system offers a new online application process whereby agents submit much the same information as is captured by the current application, but in the new online format. The system walks the agent through several different pages or screens with data fields to enter the information and select from drop-down menus as appropriate. While the information captured by the existing and new systems is substantially similar, the slight differences and overall new format warrant TDI's review.
2. Additionally, as part of the transition to a new policy administration system, TWIA is reviewing and updating all applications, forms, and correspondence that will be communicated utilizing the system. TWIA's review and updates aim to ensure all applications, forms, and correspondence are clear, consistent, and customer-friendly.

Attached to this cover letter please find: (1) a Property and Casualty Filing Transmittal Form; (2) a Form Usage Table; (3) an Explanatory Memorandum; (4) a Comparison Legend which lists the data fields captured by the existing Application side-by-side with the information as it is captured by the revised TWIA Builders Risk New Business Application through Policy Center; (5) the existing Builders Risk New Business Application, numbered in accordance with the Legend; and (6) Policy Center Commercial Screen Captures showing the revised application and numbered in accordance with the Legend. Please note, TWIA does not have record of the filing and approval of the version of the Builders Risk New Business Application that is currently in use and have therefore left the TDI File Number or Link Number field blank on the Property and Casualty Filing Transmittal Form.

Should you have questions or require anything further, please feel free to contact me at 512-637-2944.



Sincerely,

A handwritten signature in blue ink that reads "Jessica M. Crass".

Jessica M. Crass
Legal & Compliance Manager

CC: Ms. Marianne Baker (via email: marianne.baker@tdi.texas.gov)
Property and Casualty, Personal and Commercial Lines
Texas Department of Insurance
P.O. Box 149104
MC 104-PC
Austin, TX 78714-9104



TEXAS WINDSTORM
INSURANCE ASSOCIATION

Texas Windstorm Insurance Association
Builders Risk New Business Application



**2. Property and Casualty Filing Transmittal Form
and Form Usage Table**



TEXAS WINDSTORM
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TEXAS WINDSTORM
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Texas Windstorm Insurance Association
Builders Risk New Business Application



3. Explanatory Memorandum



MEMORANDUM

DATE: November 3, 2017

TO: Marianne Baker, Texas Department of Insurance, Property & Casualty Lines

FROM: Jessica Crass, Manager, Legal & Compliance

RE: Revised TWIA Builders Risk New Business Application

In accordance with Texas Administrative Code 5.4911 and 5.9320, TWIA is submitting revisions to the TWIA Builders Risk New Business Application (application) for approval. This memorandum is submitted pursuant to Texas Administrative Code 5.9320(c)(1)(B)(iii).

Reason for Changes

Changes to the application are being made based on the following:

1. TWIA is in the process of implementing a new policy administration system for its commercial business, Policy Center Commercial. The new system offers a new online application process whereby agents submit much the same information as is captured by the current application, but in the new online format. The system walks the agent through several different pages or screens with data fields to enter the information and select from drop-down menus as appropriate. While the information captured by the existing and new systems is substantially similar, the slight differences and overall new format warrant TDI's review.
2. Additionally, as part of the transition to a new policy administration system, TWIA is reviewing and updating all applications, forms, and correspondence that will be communicated utilizing the system. TWIA's review and updates aim to ensure all applications, forms, and correspondence are clear, consistent, and customer-friendly.

Comparison of Existing and Revised Applications

Pursuant to 5.9320(c)(2)(B)(ii) please find attached, in addition to the preceding Cover Letter, Property and Casualty Filing Transmittal Form, Form Usage Table, and this Explanatory Memorandum (numbered as indicated):

1. A Comparison Legend which lists the data fields captured by the existing Application side-by-side with the information as it is captured by the revised TWIA Builders Risk New Business Application through Policy Center;
2. The existing Application (numbered in accordance with the Legend); and
3. Policy Center Commercial Screen Captures showing the revised application (also numbered in accordance with the Legend).



Texas Windstorm Insurance Association Builders Risk New Business Application



4. Comparison Legend

Compares Data Fields of Existing Builders Risk New Business Application to Data Fields of Revised Policy Center Commercial Builders Risk New Business Application

Comparison Legend Notes

The Comparison Legend lists the data fields present in the existing TWIA Builders Risk New Business Application and presents a side-by-side comparison of the data fields present in the new Policy Center Commercial Builders Risk New Business Application.

Fields

Column A: Item

The first column lists the data field items in sequential order. Item numbers with red borders are present in the existing Application (and potentially the Policy Center Application). Item numbers with green borders are present only in the Policy Center Application.

E.g. Items present in the existing Application (and potentially the Policy Center Application):

1

E.g. Items present only in the Policy Center Application:

49

Column B: Existing Category

The type of information captured in the data field in the existing Application.

Column C: Existing Text

The actual text present in the existing Application.

Column D: Policy Center Location

This column indicates where in the Policy Center Application the applicable text is located by referencing the screen or series of screens and tabs containing the text.

Column E: Policy Center Text

The actual text present in the Policy Center Application.



Notes

Bracketed Text

If text is contained in [brackets] this indicates either the information varies, or the text within the bracket is a note regarding the actual text in the Application.

Sample Information

All information contained in the screen captures was generated for sample Applications and does not relate to any actual policy or application information.

Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
1	Heading	Texas Windstorm Insurance Association	N/A	[No equivalent due to transition from paper to electronic format]
2	Heading	TWIA WEB APPLICATION FOR WINDSTORM & HAIL INSURANCE	N/A	[No equivalent due to transition from paper to electronic format]
3	TWIA Logo	[TWIA Logo]	N/A	[No equivalent due to transition from paper to electronic format]
4	Application Number	Application #	SideBar	Submission T#####
5	Application Type	Commercial Application	New Submission	Policy Type Selection: Available Options: [Drop down options: Residential, Commercial, Manufactured Home]
6	Voiding Application	Any handwritten premium bearing changes will VOID this application and cause it to be returned	N/A	[No equivalent due to transition from paper to electronic format]
7	Early Cancellation	Early cancellation may result in approximately 25% of your premium being retained by Texas Windstorm Insurance Association	N/A	[No equivalent; included in Declarations]
8	Payment	ATTACH CHECK OR MONEY ORDER FOR GROSS PREMIUM + SURCHARGES TO APPLICATION	Submission Acknowledgement	Please print the payment coupon and mail to TWIA with a check for the full amount due. Once payment is received, your application will be processed according to TWIA underwriting guidelines. For additional information, please click here [links to TWIA Instructions and Guidelines Manual] to access the TWIA Instructions and Guidelines manual.
9	Insured Name & Address	NAME OF INSURED AND MAILING ADDRESS	Policy Info	[Primary Named Insured/Mailing Address/Additional Insured Fields include: Individual First Name Last Name Primary Phone [a phone number is required] Home Phone Work Phone Mobile Phone Fax Phone [optional] Primary Email [optional] Secondary Email [optional] Address Country APO/FPO/DPO Address Line 1 Address Line 2 City State Zip Code County]
10	Agent Name & Address	INSURED'S AGENT'S NAME AND MAILING ADDRESS	Policy Info: Agency Details	Agency Name/Agency Location
11	TDI License	TDI Lic	Policy Info: Agency Details	TDI License #
12	Policy Term	POLICY TERM REQUESTED	Policy Info: Policy Details	Policy Details

Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
13	Inception date	[Inception Date]	(1) New Submission: Effective Date; (2) Policy Info: Policy Details	Effective Date [MM/DD/YYYY]
14	Expiration Date	[Expiration Date]	Policy Info: Policy Details	Expiration Date [MM/DD/YYYY]
15	12:01 am Expiration	AT 12:01 A.M. Standard time At The Location of Property	N/A	[No equivalent; included in Declarations]
16	Agency Personnel Contact	Agency Personnel who may be contacted concerning this application	Policy Info: Agency Details	Contact Name/Contact Phone #
17	Agent's Name and Phone Number	[Agent Name / (###) ###-####]	Policy Info: Agency Details	Location Phone #
18	Previous or Reference Number	Previous or Reference #: ##### [category only appears if information provided in E-Quote]	Details: General Information	Prior TWIA Policy #
19	Customer Tracking Number	Customer Tracking Number: [Tracking #] [category only appears if information provided in E-Quote]	(1) New Submission; (2) Status Bar	Account #
20	Perils	WINDSTORM & HAIL ONLY	N/A	[No equivalent; included in Declarations]
21	Premium financing	Is this policy premium financed? If yes, Attach Form 151A	Policy Info: Premium Financier	(Add) [Gives option to add premium financier]
22	Total coverage	TOTAL INSURANCE	Locations and Risk Items (After)	Insurance Amount
23	Premium due	TOTAL AMOUNT DUE	Payment: Amount Due and Payment Summary	Amount Due to TWIA
24	Mortgagee/Loss Payee	MORTGAGEE / LOSS PAYEE [category only appears if information provided in E- Quote]	Additional Interest	Mortgagee/Loss Payee/Contract of Sale [Gives option to add additional interest]
25	Item Number	Item No.	Locations and Risk Items (After)	Item Number [The item number appears after user adds an item]
26	Coverage A or B	Coverage A/B	Locations and Risk Items (After)	[Part of the item number - e.g., 1A - which appears after adding an item]
27	Description	Property and Form Description	Details: Risk Item Type	Commercial and F&R Non-Dwelling - New Construction, Commercial and F&R Non-Dwelling - Additions (> than 10% grade floor area), Commercial and F&R Non-Dwelling - Additions (<= 10% grade floor area), Commercial and F&R Non-Dwelling - Repairs and/or Improvements with No Additions, Dwelling and F&R Dwelling - New Construction, Dwelling and F&R Dwelling - Additions (> 10% grade floor area), Dwelling and F&R Dwelling - Additions (<= 10% grade floor area), Dwelling and F&R Dwelling - Repairs and/or Improvements with No Additions
27.A	Property Description	Property Description	(1) Locations and Risk Items (After); (2) Details	(1) Description [appears after adding an item] (2) Description
27.B	Property Address	[Insured location address entered]	Location Information	Location Address

Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
27.C	Underwriting Details	Stories	N/A	[While this data field is present on the existing application, the information did not impact rating, and we determined it unnecessary for this coverage type]
27.D	Underwriting Details	Roof	N/A	[While this data field is present on the existing application, the information did not impact rating, and we determined it unnecessary for this coverage type]
27.E	Underwriting Details	Construction	Details: Construction Details	Construction Type [Options: Frame, Brick, Brick on Frame]
27.F	Underwriting Details	Occupancy	N/A	[Data field not applicable to this coverage type]
27.G	Underwriting Details	ECV	N/A	[While this data field is present on the existing application, the information did not impact rating, and we determined it unnecessary for this coverage type]
27.H	Underwriting Details	ERC	Details	Estimated Completion Cost
27.I	Underwriting Details	Area	Details	Total Area
27.J	Underwriting Details	Inside City Limits at time of Construction	N/A	[Data field not applicable to this coverage type]
27.M	Underwriting Details	Dates of Construction	Details	Construction Commencement Date/Material Delivery Date [Changes based on question above: If 67 is "Yes", 27.M is "Construction Commencement Date" If 67 is "No", 27.M is "Material Delivery Date"]
27.N	Underwriting Details	Structure: MM/DD/YYYY	N/A	[While this data field is present on the existing application, the information did not impact rating, and we determined it unnecessary for this coverage type]
27.O	Underwriting Details	Additions: MM/DD/YYYY	N/A	[While this data field is present on the existing application, the information did not impact rating, and we determined it unnecessary for this coverage type]
27.P	Underwriting Details	Repairs: [Reroof Date pulled from E-Quote] [Reroof Type pulled from E-Quote, e.g. "complete"]	N/A	[While this data field is present on the existing application, the information did not impact rating, and we determined it unnecessary for this coverage type]
27.R	Underwriting Details	Companion Policy Type [defaults to none]	N/A	[While this data field is present on the existing application, the information did not impact rating, and we determined it unnecessary for this coverage type]
27.S	Underwriting Details	Companion Policy Company	Details: General Information	Companion Policy Company
27.U	Underwriting Details	Builders Risk Form 21/Builders Risk Form 18	Details	Risk Category [Builder's Risk Stated Value - Form 18/Builder's Risk Actual Completed Value - Form 21]
28	Coins%	Coins %	Coverages	Coinsurance [Drop down options: 80%, 100%]
29	Deductible	Deductible [\$]	Coverages	Deductible [Drop down options: 1% (\$1000 min.), 2% (\$1000 min.), 5% (\$1000 min.)]
30	Limit of Liability	Limit of Liability [\$]	Coverages	Insurance Amount
31	Premium	Premium [\$]	Payment: Amount Due and Payment Summary	Actual Premium
32	Footer	5700 South MoPac Expressway, Building A, Austin, Texas 78749	N/A	[No equivalent due to transition from paper to electronic format]
33	Footer	P.O. Box 99090, Austin, Texas, 78709-9090	N/A	[No equivalent due to transition from paper to electronic format]
34	Footer	512-899-4900	N/A	[No equivalent due to transition from paper to electronic format]
35	Footer	Fax 512-899-4950	N/A	[No equivalent due to transition from paper to electronic format]
36	Page Number	Page 1 of 2	N/A	[No equivalent due to transition from paper to electronic format]


Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
37	End of Items Schedule	End of Items Schedule	N/A	[No equivalent due to transition from paper to electronic format]
38	Totals	Total Premium:	Summary	Actual Premium
39	Totals	Total Surcharges:	N/A	[Data field not applicable to this coverage type]
40	Totals	Total Premium + Total Surcharges:	N/A	[Data field not applicable to this coverage type]
41.A	Notice	This application is rated based on information reflected in this document.	N/A	[No equivalent due to transition from paper to electronic format]
41.B	Notice	TWIA assumes no responsibility for errors or omissions by applicant.	N/A	[In Terms of Use https://www.twia.org/agent-portal-terms-conditions-use]
42	Attestation	This application is correct to the best of my knowledge.	Submission Acknowledgement	Yes, I certify that the information provided is correct to the best of my knowledge. [Box is required to be checked before submitting application]
43	Date	Date of Application	Submission Acknowledgement (After Submission)	Submission certification was completed on [Day Mon DD, YYYY] by [Submitter]
44	Signature	Signature of Insured or Insured's Agent	N/A	[No equivalent due to transition from paper to electronic format]
45	Legal Notices	Important Legal Notices	N/A	[The three important notices are still included in the application on two separate screens [see Items 46, 47, and 48]; the "Important Legal Notices" heading was simply removed, not the actual notices]
46	Legal Notices	<p>Evidence of Declination: With the act of submitting this application for property coverage with TWIA, I, the insured's agent, acting on behalf of the applicant, acknowledge I am in possession of the required proof of prior declination for wind and hail property coverage, and it is my intent to keep record of that documentation.</p> <p>NOTE: The declination may either be:</p> <ul style="list-style-type: none"> · a refusal to offer new or renewal wind and hail coverage on the property, or · a refusal to offer basic insurance sought by the applicant that is substantially equivalent to that offered by TWIA. <p>For example, the lowest deductible offered by a standard market company is greater than that which can be obtained from TWIA. (See TWIA Declination Worksheet posted under Documents & Downloads on the TWIA website)</p>	Qualification: Pre-Qualification Questions	<p>Evidence of Declination Requirements [Links to https://www.twia.org/twia-declination-requirements/];</p> <p>Follows newly created Item 52 that asks "Does the applicant meet the evidence of declination requirements?"</p>

Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
47	Legal Notices	Flood Insurance Requirement: With the act of submitting this application for property coverage with TWIA, I, the insured's agent, acting on behalf of the applicant, acknowledge I am in possession of the required evidence of a companion flood insurance policy that provides coverage concurrent with the term of the TWIA policy, and it is my intent to keep record of that documentation. Flood coverage is required for structures constructed, altered, remodeled, or enlarged on or after September 1, 2009 that are located in flood zones V, VE, and V1-V30. The flood insurance requirement does not extend to structures being repaired. The evidence of a companion flood insurance policy must be made available to TWIA, if specifically requested.	Qualification: Pre- Qualification Questions	Flood Insurance Requirements [Links to https://www.twia.org/twia-flood-requirements/ ; Follows newly created Item 53 that asks "Does the applicant meet the flood insurance requirements?"]
48	Legal Notices	90 Day Minimum Retained Premium: If you cancel your policy, the refund will be pro-rata, subject to a minimum retained premium in an amount equal to 90 days or \$100, whichever is applicable. The minimum retained premium is fully earned on the effective date of the policy.	Payment	Please note that cancellation of the policy will result in a pro-rata refund, subject to a policy minimum retained premium in an amount equal to 90 days or \$100, whichever is greater. The minimum retained premium is fully earned on the effective date of the policy. [The word "applicable" was changed to "greater" was changed to more accurately reflect current business processes; TWIA has always kept the greater amount.]
49	N/A	N/A	New Submission: Policy Type Selection	Is this a Builder's Risk Policy?
50	N/A	N/A	Qualification: Pre- Qualification Questions	TWIA Coverage & Eligibility Guidelines [Links to https://www.twia.org/coverage-eligibility/]
51	N/A	N/A	Qualification: Pre- Qualification Questions	Do all the risk items fall in the TWIA coverage area? [Added to help confirm eligibility. We were receiving applications for outside our coverage area (specifically in Harris county)]
52	N/A	N/A	Qualification: Pre- Qualification Questions	Does the applicant meet the evidence of declination requirements? [Precedes the link to the Evidence of Declination Requirements in Item 46]
53	N/A	N/A	Qualification: Pre- Qualification Questions	Does the applicant meet the flood insurance requirements? [Precedes the link to the Flood Insurance Requirements in Item 47]
59	N/A	N/A	Premium Financier - Input Page	Premium Financier Agreement Type [Options to be selected from drop down menu: Premium Finance Agreement Incl Power of Attorney, TWIA-151-A, Wellington Premium Finance, Inc.]

Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
60	N/A	N/A	Premium Financier - Input Page: Contact Detail	Business Business Name [required] Office Phone Fax Primary Email Secondary Email
61	N/A	N/A	Premium Financier - Input Page: Contact Detail	Address Country [required] APO/FPO/DPO Address Line 1 [required] Address Line 2 City [required] State [required] Zip Code [required] County
62	N/A	N/A	Location Information	Is your risk location inside city limits and east of Highway 146? [Yes and No Options] [Only shows for Harris County]
63	N/A	N/A	Locations and Risk Items (Before)	Add Item
64	N/A	N/A	Locations and Risk Items (After)	Item Type [The item type populates after adding an item]
67	N/A	N/A	Details	Have materials been delivered to the site? [Yes and No Options] [Added to help us determine whether the policy should attach Form 18 or 21]
67	N/A	N/A	Details	Have materials been delivered to the site? [Yes and No Options] [Added to help us determine whether the policy should attach Form 18 or 21]
69	N/A	N/A	Details	Type of Construction [Options to be selected from drop down menu: Addition, New, Repair] [Added to help guide agents into selecting the appropriate coverage type]
71	N/A	N/A	Details	Is this a Miscellaneous Structure? [Yes and No Options] [Added to help identify the structure type]
72	N/A	N/A	Details	Amount of Insurance for this item provided by Companion Policy [The amount of the companion policy is applicable to the claims process]
73	N/A	N/A	Details	Flood Insurance Company [Added to help support the flood insurance requirements]
74	N/A	N/A	Details	Amount of Insurance for this item provided by Flood Policy
75	N/A	N/A	Details	A recent photograph of the Builder's Risk item must be provided to TWIA. Please upload a copy of the photograph in order to submit this request. 

Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
76	N/A	N/A	Coverages	TWIA recommends insuring for 100% of the Estimated Completion Cost / TWIA requires insuring for 100% of the Estimated Completed Cost. [Form 18 - Insured can select coverage amount. Form 21 - Insured must insure to ECC]
77	N/A	N/A	Additional Interest - Input Page	Type [Drop down options: Mortgagee, Contract of Sale, Loss Payee]
78	N/A	N/A	Additional Interest - Input Page	Loan Number
79	N/A	N/A	Additional Interest - Input Page: Contact Detail	Business Business Name [required] Office Phone Fax Primary Email Secondary Email
80	N/A	N/A	Additional Interest - Input Page: Contact Detail	Address Country [required] APO/FPO/DPO Address Line 1 [required] Address Line 2 City [required] State [required] Zip Code [required] County
81	N/A	N/A	Summary	Commission [The original process was for agent to send the net premium and keep their commission - we've since started collecting entire premium and dispersing the commission. Added field for agent to be able to easily know the split of how much commission was earned for the transaction.]
82	N/A	N/A	Summary	Commission Amount is 16% of Actual Premium of Issued Policy.
83	N/A	N/A	Payment	Payment Method [Added due to transition from paper to electronic format]

Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
84	N/A	N/A	Documents	<p>If a signed copy of a TWIA form is required, please download it from the following link:</p> <p>Documents and Downloads [Links to the document]</p> <p>If the documentation has not yet been uploaded or if you are unsure as to which documentation you have included, please press 'Cancel/Return' and click on the 'Documents' link in the Tools menu. From there you can view all documentation that is associated with the transaction and make any necessary additions/corrections.</p> <p>Once you confirm the document(s) upload(s), please re-initiate the submission process via the 'Payment' screen. You may be contacted by a TWIA underwriter prior to issuance to provide further documentation.</p> <p>No Required Documentation [Appears if no documentation is required]</p> <p>[Added due to transition from paper to electronic format]</p>
85	N/A	N/A	Submission Acknowledgement	<p>This submission will not be processed until the payment and payment coupon are received. Payment received without an accompanying coupon will be returned. Coverage will be effective for eligible applications on the date payment is received by TWIA, the date mailed if sent by one of the four approved methods, or a later date if requested. If payment and coupon are not received within 14 days, your submission will be voided and the coverage requested in your application will not be issued. It will be necessary for you to resubmit your application if coverage is still desired.</p> <p>After pressing the 'Continue' button, a PDF of the transaction summary and the payment coupon will be available for printing</p> <p>Coverage requests will not be reviewed by TWIA before payment is received.</p>
86	N/A	N/A	Submission Information	<p>Thank You! Your Submission (#####) and Electronic Funds Transfer Transaction have been received by TWIA. We will process the Submission according to TWIA Underwriting Guidelines.</p> <p>To retrieve a PDF copy of the transaction summary, click the "View your submission" link below, and then select Documents from the Tools menu.</p>

Comparison Legend

Item	Existing Category	Existing Text	Policy Center Location	Policy Center Text
87	N/A	N/A	Forms	Additional Forms [Shows which forms/endorsements are attached to each item]
88	N/A	N/A	Details	Should coverage include the existing structure? [Yes and No Options]



TEXAS WINDSTORM
INSURANCE ASSOCIATION

Texas Windstorm Insurance Association

Builders Risk New Business Application



5. Existing Application

Texas Windstorm Insurance Association



TWIA WEB APPLICATION FOR WINDSTORM & HAIL INSURANCE

Application #

Commercial Application

Any handwritten premium bearing changes will VOID this application and cause it to be returned.

Early cancellation may result in approximately 25% of your premium being retained by Texas Windstorm Insurance Association.

ATTACH CHECK OR MONEY ORDER FOR GROSS PREMIUM + SURCHARGES TO APPLICATION

NAME OF INSURED AND MAILING ADDRESS

INSURED'S AGENT'S NAME AND MAILING ADDRESS

[Empty box for Insured's Agent's Name and Mailing Address]

TDI Lic

POLICY TERM REQUESTED _____ TO _____ AT 12:01 A.M. Standard Time At The Location Of Property

Inception

Expiration

Agency Personnel who may be contacted concerning this application

[Empty box for Agency Personnel]

PERILS	Is this policy premium financed? If yes, Attach Form 151A	TOTAL INSURANCE	TOTAL AMOUNT DUE
WINDSTORM & HAIL ONLY			

Item No.	Coverage A/B	Property and Form Description	Coins %	Deductible	Limit Of Liability	Premium
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1 A Property Description: Complex:

N/A, Addition: , Lot: , Block: , Section:
Underwriting Details:
Stories: , Roof: , Construction: ,
ECV: , ERC: \$,
Area: sq. ft., Inside City Limits at time of Construction:

Dates of Construction:
Structure:
Additions:
Repairs:
Companion Policy Type:
Companion Policy Company:
Builders Risk Form 21

End of Items Schedule

Total Premium:

Total Surcharges:

Total Premium + Total Surcharges:

5700 South MoPac Expressway, Building A, Austin, Texas 78749

P.O. Box 99090, Austin, Texas 78709-9090

512-899-4900 / Fax 512-899-4950

Application #



41.A

41.B

This application is rated based on information reflected in this document. TWIA assumes no responsibility for errors or omissions by applicant.

42

This application is correct to the best of my knowledge.

43

Date of Application

44

Signature of Insured or Insured's Agent

45

IMPORTANT LEGAL NOTICES:

46

Evidence of Declination:

With the act of submitting this application for property coverage with TWIA, I, the insured's agent, acting on behalf of the applicant, acknowledge I am in possession of the required proof of prior declination for wind and hail property coverage, and it is my intent to keep record of that documentation.

NOTE: The declination may either be:

- a refusal to offer new or renewal wind and hail coverage on the property, or
- a refusal to offer basic insurance sought by the applicant that is substantially equivalent to that offered by TWIA.

For example, the lowest deductible offered by a standard market company is greater than that which can be obtained from TWIA. (See TWIA Declination Worksheet posted under Documents & Downloads on the TWIA website)

47

Flood Insurance Requirement:

With the act of submitting this application for property coverage with TWIA, I, the insured's agent, acting on behalf of the applicant, acknowledge I am in possession of the required evidence of a companion flood insurance policy that provides coverage concurrent with the term of the TWIA policy, and it is my intent to keep record of that documentation. Flood coverage is required for structures constructed, altered, remodeled, or enlarged on or after September 1, 2009 that are located in flood zones V, VE, and V1-V30. The flood insurance requirement does not extend to structures being repaired. The evidence of a companion flood insurance policy must be made available to TWIA, if specifically requested.

48

90 Day Minimum Retained Premium:

If you cancel your policy, the refund will be pro-rata, subject to a minimum retained premium in an amount equal to 90 days or \$100, whichever is applicable. The minimum retained premium is fully earned on the effective date of the policy.

32

5700 South MoPac Expressway, Building A, Austin, Texas 78749

33

P.O. Box 99090, Austin, Texas 78709-9090

512-899-4900 / Fax 512-899-4950

34

36

Page 2 of 2

4

Application #:

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TEXAS WINDSTORM
INSURANCE ASSOCIATION

Texas Windstorm Insurance Association
Builders Risk New Business Application
Commercial Filing



6. New Policy Center Application



Policy Center Screen Captures

1. New Submission
2. Side Bar
3. Status Bar
4. Qualification
5. Policy Info
6. Primary Insured Input Page
7. Additional Insured Input Page
8. Premium Financier – Input Page
9. Location Information
10. Location and Risk Items (Before)
11. Location and Risk Items (After)
12. Details
13. Coverages
14. Additional Interest
15. Additional Interest – Input Page
16. Summary
17. Payment
18. Documents
19. Submission Acknowledgement
20. Submission Acknowledgement (After Submission)
21. Submission Information
22. Forms



New Submission

New Submission

Create new submission for Test Example (Account #: A000494001) 19

Please choose the desired effective date:

Effective Date 13 *

Please choose the desired submission type and press 'Continue':

Submission Type * Quick Quote Full Application

Policy Type Selection

5 Available Options *

49 Is this a Builder's Risk Policy? * Yes No

Select the desired agency location.

Agency Location *



TEXAS WINDSTORM
INSURANCE ASSOCIATION

Side Bar

Submission
T001077597 4
Submitted

[Qualification](#)

Policy Contract

● [Policy Info](#)

[Locations and Risk
Items](#)

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Status Bar

★ Submission (Submitted) | 📄 Commercial/Full Application | Eff. 09/07/2017 | **Test example** | Account # **A000494** | 19



Qualification

Qualification

Next ≥ Calculate Premium Save Draft Withdraw

Pre-Qualification Questions

51	Do all the risk items fall in the TWIA coverage area?	* <input checked="" type="radio"/> Yes <input type="radio"/> No	TWIA Coverage & Eligibility Guidelines	50
52	Does the applicant meet the evidence of declination requirements?	* <input checked="" type="radio"/> Yes <input type="radio"/> No	Evidence of Declination Requirements	46
53	Does the applicant meet the flood insurance requirements?	* <input checked="" type="radio"/> Yes <input type="radio"/> No	Flood Insurance Requirements	47

Next ≥ Calculate Premium Save Draft Withdraw

Policy Info

Policy Info

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Next >
Calculate Premium
Save Draft
Withdraw

You have indicated that this is a Builder's Risk policy. Please confirm the expiration date and update as necessary.

<p>Primary Named Insured Change To: <input type="button" value="v"/></p> <p>Name 9 Test Example</p> <p>Mailing Address Change To: <input type="button" value="v"/></p> <p>123 fake st Galveston, TX 11111</p>	<p>Policy Details 12</p> <p>Effective Date * <input type="text" value="07/01/2017"/> <input type="button" value="calendar"/> 13</p> <p>Expiration Date * <input type="text" value="09/01/2017"/> <input type="button" value="calendar"/> 14</p>	<p>Agency Details 10</p> <p>Agency Name WEB TESTING AGENCY</p> <p>11 TDI License # 1111 WEB TESTING AGENCY</p> <p>Agency Location * <input type="text" value="16823 - Web Testing Agency, PO Box 99090, Austin - Eligible"/> <input type="button" value="v"/></p> <p>17 Location Phone # 000-000-0000</p> <p>16 Contact Name Matthew Nothing</p> <p>Contact Phone # 512-444-4444</p>
---	--	---

Additional Named Insureds 9

Add | Remove

Name	Relationship to Primary Named Insured

Premium Financier 21

Add | Remove

Name	Type

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Next >
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Withdraw



Primary Insured Input Page

Primary Named Insured Test example ([Return to Policy Info](#))


OK Cancel

Contact Detail **9**

Individual

First Name	* Test
Last Name	* example
Primary Phone	* Work <input type="button" value="v"/>
Home Phone	<input type="text"/>
Work Phone	* 123-123-1234
Mobile Phone	<input type="text"/>
Fax Phone	<input type="text"/>
Does the primary insured have an email address?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Primary Email	<input type="text"/>
Secondary Email	<input type="text"/>

Address **9**

Country	*  United States of America <input type="button" value="v"/>
APO/FPO/DPO	<input type="checkbox"/>
Address Line 1	* 123 fake st
Address Line 2	<input type="text"/>
City	* Galveston
State	* Texas <input type="button" value="v"/>
ZIP Code	* 78681-.....
County	<input type="text"/>



Additional Insured Input Page

New Additional Named Insured ([Return to Policy Info](#))

OK Cancel

Any address entered on this screen will not be used by TWIA for mailing purposes to the named insured. It should be used strictly for your own records.

Contact Detail

9

Individual

First Name	*	<input type="text"/>
Last Name	*	<input type="text"/>
Primary Phone		<none selected> v
Home Phone		<input type="text"/>
Work Phone		<input type="text"/>
Mobile Phone		<input type="text"/>
Fax Phone		<input type="text"/>
Primary Email		<input type="text"/>
Secondary Email		<input type="text"/>

Address

9

Country		United States of America v
APO/FPO/DPO		<input type="checkbox"/>
Address Line 1		<input type="text"/>
Address Line 2		<input type="text"/>
City		<input type="text"/>
State		<none selected> v
ZIP Code	-.....
County		<input type="text"/>
<input type="button" value="Validate Address"/>		

To validate this address, Address Line 1 and either City and State, or ZIP Code are required



Premium Financier – Input Page

New Premium Financier ([Return to Policy Info](#))

OK Cancel

Premium Financier Agreement Type * <none selected> 59

Contact Detail 60

Business

Business Name *


Office Phone

Fax

Primary Email

Secondary Email

Address 61

 Country * United States of America

APO/FPO/DPO

Address Line 1 *

Address Line 2

City *

State * <none selected>

ZIP Code *-.....

County

Validate Address

To validate this address, Address Line 1 and either City and State, or ZIP Code are required



Location Information

Location Information ([Return to Locations and Risk Items](#))

OK Cancel

Street Address Yes No

If you do not have a street address, click 'No' and enter a valid legal description.

Enter any Unit #, Apt #, or Suite # in the Unit # field on the Risk Item page, not on the Location Address.

Location Address **27.8**

County	* Harris
Address Line 1	* 123 fake st
City	* Seabrook
State	Texas
ZIP Code	* 77586

Validate Address

Name of Complex	<input type="text"/>
Legal Description	
Lot	<input type="text"/>
Block	<input type="text"/>
Section	<input type="text"/>

To validate this address, Address Line 1 and either City and State, or ZIP Code are required

Is your risk location inside city limits and east of Highway 146? Yes No **62**

Locations and Risk Items (Before)

Locations and Risk Items				
<input type="button" value="≤ Back"/> <input type="button" value="Calculate Premium"/> <input type="button" value="Save Draft"/> <input type="button" value="Withdraw"/>				
<input type="button" value="Add Location"/> <input type="button" value="Remove Item(s)"/>				
Actions	Item Number	Description	Item Type	Insurance Amount
63				
<input type="button" value="Add Item"/>	Harris: 123 fake Street, Seabrook, TX, 77586 (Primary)			
<input type="button" value="≤ Back"/> <input type="button" value="Calculate Premium"/> <input type="button" value="Save Draft"/> <input type="button" value="Withdraw"/>				

Locations and Risk Items (After)

Locations and Risk Items						
<input type="button" value="≤ Back"/> <input type="button" value="Calculate Premium"/> <input type="button" value="Save Draft"/> <input type="button" value="Withdraw"/>						
<input type="button" value="Add Location"/> <input type="button" value="Remove Item(s)"/>						
<input type="checkbox"/>	25					
63	Item Number	Description	27.A	64	Item Type	Insurance Amount
Add Item <input type="button" value="Add Item"/>						
Harris: 123 fake Street, Seabrook, TX, 77586 (Primary)						
<input type="checkbox"/>	26	1A	TDI filing		Structure	\$150,000.00
						\$150,000.00
<input type="button" value="≤ Back"/> <input type="button" value="Calculate Premium"/> <input type="button" value="Save Draft"/> <input type="button" value="Withdraw"/>						

Details

Details	Coverages	Additional Interests		
Location Harris: 123 Fake Street, Seabrook, TX, 77586				
Building #	27.A	<input type="text"/>		
Unit #	27.A	<input type="text"/>		
Description	27.A *	TDI filing		
Note: Description appears on both the application summary and the printed declarations page				
Have materials been delivered to the site?	*	<input checked="" type="radio"/> Yes <input type="radio"/> No 67		
Material Delivery Date	27.M *	09/05/2017		
Should coverage include the existing structure?	*	<input type="radio"/> Yes <input checked="" type="radio"/> No 27.L		
Estimated Completion Cost	27.H *	\$ 150000.00		
Type of Structure	68 *	Dwelling		
Type of Construction	69 *	Addition		
Total Area of existing structure	*	1500		
Total Area of addition	*	100		
Total Area	27.I	1600		
Risk Category	70	Builder's Risk Stated Value- Form 18		
Risk Item Type		Dwelling and F&R Dwelling - Additions (<= 10% grade floor area) 27		
Is this a Miscellaneous Structure?	71 *	<input type="radio"/> Yes <input checked="" type="radio"/> No		
General Information				
Companion Policy Company	27.S *	Affiliated Fm Insurance Company		
Amount of Insurance for this item provided by Companion Policy		\$ 150000.00 72		
Flood Insurance Company	73 *	Affiliated Fm Insurance Company		
Amount of Insurance for this item provided by Flood Policy	74 *	\$ 150000.00		
Prior TWIA Policy #		<input type="text"/> 18		
Construction Details				
Construction Type	27.E *	Frame		
A recent photograph of the Builder's Risk item must be provided to TWIA. Please upload a copy of the photograph in order to submit this request. 75				
Photograph	<input type="button" value="Upload Photograph"/>			
<input type="checkbox"/>	Name	Type	Date	Delete
<input type="checkbox"/>	MH photo	Photograph	09/07/2017	<input type="button" value="Delete"/>

Coverages

[Details](#)

Coverages

[Additional Interests](#)

Structure Coverage

Insurance Amount 30 \$150,000.00

TWIA requires insuring for 100% of the Estimated Completed Cost. 76

Structure Valuation

Cost / Sq. Foot \$100.00

The deductible selection will automatically be applied to all other risk items.

Deductible 29 * 2% (\$1000 min.) ▼

Coinsurance 28 * 100% ▼

Attached Structures

Additional Interest

Mortgagee/Loss Payee/Contract of Sale

|

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<input type="checkbox"/>	<u>Name</u>	* <u>Interest Type</u>	<u>Loan #</u>
<input type="checkbox"/>	<u>example</u>	Mortgagee <input type="button" value="v"/>	1243



Additional Interest – Input Page

New Additional Interest - TDI Filing (Harris: 123 Fake st, Seabrook, TX, 77586) ([Return to 1A: TDI Filing](#))

OK Cancel

Type * <none selected>

Loan Number

Contact Detail

Business

Business Name *

Office Phone

Fax

Primary Email

Secondary Email

Address

Country *

APO/FPO/DPO

Address Line 1 *

Address Line 2

City *

State * <none selected>

ZIP Code *-.....

County

Validate Address

To validate this address, Address Line 1 and either City and State, or ZIP Code are required



Summary

Summary

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This transaction requires underwriting review prior to issuance

The premium calculated is only good until the end of today. Any changes desired or submissions after today must be re-calculated prior to submitting to TWIA.

Submission #	001076239	Transaction Effective Date	09/01/2017
Policy Period	09/01/2017 - 09/02/2017	Actual Premium	38 \$100.00
Primary Named Insured	Test Example	Commission	81 \$16.00
Mailing Address	123 fake st Galveston, TX 11111	Commission Amount is 16% of Actual Premium of Issued Policy. 82	

Premiums

Policy Premiums

Item #	Description	Coverage Detail	Cost Amount	Premiums
Harris: 123 fake st, Seabrook, TX, 77586				
1A	TDI filing	\$150,000.00	\$101.00	\$100.00
	Deductible 2% (\$1000 min.)	-	(\$1.00)	-

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Payment

Payment

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Amount Due and Payment Summary

Actual Premium 31 \$100.00

Amount Due to TWIA 23 \$100.00

Payments

Total Payment Amount	\$100.00 83
Payment Method	* <input type="text" value="Check/Money Order"/> ?

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Please note that cancellation of the policy will result in a pro-rata refund, subject to a policy minimum retained premium in an amount equal to 90 days or \$100, whichever is greater. The minimum retained premium is fully earned on the effective date of the policy.

DO NOT press 'Submit to TWIA' more than once. Please contact Agent Services at 800-788-8247, option 7, Monday through Friday between 8 AM and 5 PM if you need assistance completing this transaction.

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Documents

Documents 84

Part 1 - Before Submitting Transaction To TWIA

If a signed copy of a TWIA form is required, please download it from the following link:

[Documents and Downloads](#)

If the documentation has not yet been uploaded or if you are unsure as to which documentation you have included, please press 'Cancel/Return' and click on the 'Documents' link in the Tools menu. From there you can view all documentation that is associated with the transaction and make any necessary additions/corrections.

Once you confirm the document(s) upload(s), please re-initiate the submission process via the 'Payment' screen.

You may be contacted by a TWIA underwriter prior to issuance to provide further documentation.

Risk Item Documents		
Item #	Description	Documentation required includes, but is not limited to:
Harris: 123 fake st, Seabrook, TX, 77586		
1	TDI filing	Photograph

Part 2 - After Submitting Transaction to TWIA

Documents To Mail
Check/Money Order for \$100
Payment Coupon
<input type="button" value="Continue"/>
<input type="button" value="Cancel/Return"/>



Submission Acknowledgement

Submission Acknowledgement

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Please print the payment coupon and mail to TWIA with a check for the full amount due. Once payment is received, your application will be processed according to TWIA underwriting guidelines. For additional information, please [click here](#) to access the TWIA Instructions and Guidelines manual.

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This submission will not be processed until the payment and payment coupon are received. Payment received without an accompanying coupon will be returned. Coverage will be effective for eligible applications on the date payment is received by TWIA, the date mailed if sent by one of the four approved methods, or a later date if requested. If payment and coupon are not received within 14 days, your submission will be voided and the coverage requested in your application will not be issued. It will be necessary for you to resubmit your application if coverage is still desired.

After pressing the 'Continue' button, a PDF of the transaction summary and the payment coupon will be available for printing.

Coverage requests will not be reviewed by TWIA before payment is received.

Submission Certification



Yes, I certify that the information provided is correct to the best of my knowledge.

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Continue

Cancel/Return



Submission Acknowledgement (After Submission)

Please print the payment coupon and mail to TWIA with a check for the full amount due. Once payment is received, your application will be processed according to TWIA underwriting guidelines. For additional information, please [click here](#) to access the TWIA Instructions and Guidelines manual.

This submission will not be processed until the payment and payment coupon are received. Payment received without an accompanying coupon will be returned. Coverage will be effective for eligible applications on the date payment is received by TWIA, the date mailed if sent by one of the four approved methods, or a later date if requested. If payment and coupon are not received within 14 days, your submission will be voided and the coverage requested in your application will not be issued. It will be necessary for you to resubmit your application if coverage is still desired.

A PDF of the transaction summary including the payment coupon is available via the Documents link in the Tools menu.

Coverage requests will not be reviewed by TWIA before payment is received.

Submission Certification

Yes, I certify that the information provided is correct to the best of my knowledge.

Submission certification was completed on Fri Sep 01, 2017 by Matthew Nothing (sample.aor@twia.org)



Submission Information

Submission Information

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Thank you! Your Submission (#T001077597) and Electronic Funds Transfer transaction have been received by TWIA. We will process the Submission according to TWIA Underwriting guidelines.

To retrieve a PDF copy of the transaction summary, click the "View your submission" link below, and then select Documents from the Tools menu.

Name of Insured	Test Example
Payment Amount	\$100.00
Payment Confirmation #	FAKE171019090303021
Date Payment Initiated	9/1/2017

- [View your submission \(#T001077597\)](#)
- [Go to the submission manager for this account](#)
- [Go to your desktop](#)



Forms

Forms

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Additional Forms

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Form # ▲	Description	Items#
TWIA-21	Builders Risk - Actual Completed Value Form	1A

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