Today's Date: _____

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

OMB Control Number: 1660-0005
Expiration: 05-31-2026

CLAIM APPEAL

A policyholder may appeal a denial by an NFIP insurer directly to FEMA. The policyholder must: (a) submit the appeal within 60 days of the date of the denial letter for the item(s) denied, (b) include a copy of the denial letter, and (c) include this completed form, along with documentation that supports the appeal. The policyholder may submit the appeal to FEMA either: (1) by email to: FEMA-NFIP-Appeals@fema.dhs.gov, or (2) by mail to: FEMA, 400 C Street SW, 6th Floor, Washington, DC 20472-3010. **Please note**: FEMA calculates the 60-day time period to appeal as follows: the 60-day window begins on the day after the date on the denial letter and includes every calendar day, including Saturdays, Sundays and legal holidays. If the 60th day falls on a weekend day (i.e., Saturday or Sunday) or a legal holiday, FEMA extends the period to the next day that is not a weekend day or legal holiday. The appeal submission date, determined by reference to the electronic time stamp of the email, or the postmark date or express carrier's acceptance date of the physical mail, must fall within this 60-day time period. During the appeal process, the policyholder may continue to work with the insurer and the flood adjuster to resolve any outstanding issues, including the denied item(s) subject to appeal. Filing an appeal does not waive any of the requirements within the policy, nor will it extend the proof of loss submission period or the one-year time frame to file suit against the insurer.

Insurer-Policy-Loss Information

INSURER: _____

Days since date of denial: Today

POLICY TYPE:
- ☐ Dwelling Form
- ☐ General Property Form
- ☐ Residential Condominium Building Association Policy

POLICY NO.: _____

DATE OF LOSS: _____

DATE OF DENIAL: _____

Timely submission must occur by: Enter a valid date

Policyholder Contact Information ☐ Select to add additional policyholder or spouse (if any) ☐ Select to add third-party representative (if any)

POLICYHOLDER: _____ PHONE #1: _____ PHONE #2: _____

POLICYHOLDER EMAIL #1: _____ EMAIL #2: _____

Policyholder Address Information ☐ Select to add mailing address (if different than property address)

POLICYHOLDER PROPERTY ADDRESS: _____

POLICYHOLDER PROPERTY CITY: _____ STATE: _____ ZIP: _____

Appeal Issue # 1	Issue:	Is this issue denied in denial letter: ☐ Yes ☐ No
Filename: supporting documentation # 1 :		☐ Document ☐ Photo + - Click to add/remove

In space below, provide basis for your appeal and explain how your documentation supports your appeal. Text will flow to additional pages:

PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement serves to inform you of why the Federal Emergency Management Agency (FEMA) is requesting the information on this form.

AUTHORITY

FEMA is authorized to collect the information requested on this form pursuant to the National Flood Insurance Act of 1968, as amended, 42 U. S.C. § 4001, et seq., and the Bunning-Bereuter-Blumenauer Flood Insurance Reform Act (FIRA) of 2004, Pub. L. No. 108-264 § 205.

PURPOSE

FEMA is requesting this information to manage and account for the National Flood Insurance Program's (NFIP) claims and claims appeal processing. FEMA and Write Your Own (WYO) companies underwriting NFIP policies will use this information to access flood-related damages to properties covered by NFIP policies, process payments against flood claims against property in accordance to NFIP policy terms and coverage, and to review claims for damaged property to ensure appropriate processing such claims.

ROUTINE USES

The information requested on this form may be shared externally as a "routine use" to, the Army Corps of Engineers, other Federal agencies, state government agencies, local government agencies, tribal government agencies, property loss reporting bureaus, state insurance departments, insurance companies, reinsurance companies and capital marketing firms, to assist the Department of Homeland Security in investigating fraud or potential fraud in connection with claims; to review NFIP policy and claims information for properties within its jurisdiction in order to assist in hazard mitigation and floodplain management activities, and in monitoring compliance with the floodplain management measures adopted by the community; to conduct research, analysis, and feasibility studies of policies and claims within its jurisdiction; and to implement the NFIP Reinsurance Program. A complete list of the routine uses can be found in the system of records notice associated with this form, "Department of Homeland Security/FEMA – 003 National Flood Insurance Program Files System of Records (79 Fed. Reg. 28,747, May 19, 2014)." The Department's full list of system of records notices can be found on the Department's website at **http://www.dhs.gov/system-records-notices-sorns**.

CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION

Providing this information to is voluntary. However, failure to provide this information may result in FEMA, your insurance agency, or agent from properly processing NFIP policy claims or claims appeals and issuing the proper payout for flood related damages to the property related to the NFIP policy. Individuals who do not provide this information may contact your NFIP policy agent, or access the NFIP support page at **https://www.fema.gov/national-flood-insurance-program-technical-support-hotline** and follow the instruction for submitting written concerns to the NFIP.

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for the collection of information titled "FEMA Inspection and Claims Forms" is estimated to average 7.5 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting these forms. You are not required to respond to this collection of information unless a currently valid OMB control number and expiration date is displayed in the upper right corner of these forms. Send comments regarding the accuracy of the burden estimate and suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street SW, Washington, DC 20472, Paperwork Reduction Project (1660-0005). **NOTE: Do not send your completed form to this address.**

FEMA FORM NO.	TITLE	BURDEN HOURS
086-0-6	Personal Property (Contents) Worksheet	3.00 Hours
086-0-7	Building Property Worksheet	3.00 Hours
086-0-9	Proof of Loss - Building & Contents (Policyholder-Prepared)	.17 Hours
086-0-10	Proof of Loss - Increased Cost of Compliance (ICC)	1.75 Hours
086-0-11	First Notice of Loss	.17 Hours
086-0-17	Manufactured (Mobile) Home/Travel Trailer Worksheet	1.50 Hours
086-0-22	Proof of Loss - Building & Contents (Adjuster-Prepared)	.08 Hours
086-0-23	Advance Payment Request - Building & Contents	.17 Hours
086-0-24	Advance Payment Request - Increased Cost of Compliance (ICC)	.25 Hours
086-0-25	**Claim Appeal**	**1.50 Hours**
009-0-143	Onsite Housing Inspection	1.00 Hours
009-0-144	Remote Voice Telephony Housing Inspection	1.00 Hours
009-0-145	Remote Video Telephony Housing Inspection	1.00 Hours