

FORM
CRF-18

VERSION
18.01.D



FLORIDA OFFICE OF
INSURANCE REGULATION

STORM EVENT Catastrophe Reporting Form 2018

At the direction of the Florida Office of Insurance Regulation, following a catastrophic event affecting Florida, this form is to be completed and then submitted by insurers during the time periods prescribed. The information collected includes county and statewide modeling information and claims data for Homeowners, Dwelling, Mobile Homeowners, Commercial, Commercial Residential, Private Flood, Business Interruption, and All Other Property Lines of Business. These data are self-reported by submitting entities and are not independently audited or validated.

**If you need any assistance during the filing process,
please contact the Office at**

DisasterReporting@flor.com

DAILY REPORTING DATES: (SAMPLE)

Scope Period starts _____, 2018

Cumulative Loss Data as of midnight, ET

Thursday, _____, 2018

Friday, _____, 2018

Thursday, _____, 2018

Friday, _____, 2018

Thursday, _____, 2018

Friday, _____, 2018

Thursday, _____, 2018

Friday, _____, 2018

Final Closeout (Opens _____, 2018)

Friday, _____, 2018

Created by the Florida Office of Insurance Regulation

Section A: Contact and Statewide Modeling Information THIS IS REQUIRED INFORMATION that is to be provided each time the Catastrophe Reporting Form is submitted to the Office of Insurance Regulation. <i>If you need additional information write to DisasterReporting@florir.com.</i>			STORM EVENT NAME	VALIDATION CHECKS	TRADE SECRET?
Contact and General Questions	Responses - Verify pre-populated cells are accurate before submission	Required Data Field Complete?	As Set		
What is the as-of date of the data submitted? (MM/DD/YYYY)		FALSE	Not Applicable		
Please provide the name of the individual who completed this form.		FALSE	Not Applicable		
What is this individual's email address?		FALSE	Not Applicable		
What is the best number where this individual can be reached?		FALSE	Not Applicable		
What is the Company's name?		FALSE	Not Applicable		
What is the Company's NAIC Code? ("00000" if no NAIC Code exists)		FALSE	Not Applicable		
What is the Florida Company Code?		FALSE	Not Applicable		
What is the Company's FEIN?		FALSE	Not Applicable		
What is the Company's NAIC group code? ("0000" if no NAIC group code exists)		FALSE	Not Applicable		
What is the State of domicile?		FALSE	Not Applicable		
<p><i>First report only - Attach model output for the company's book of business for this event.</i></p> <p>Dollar Amount of Estimated Gross Payable Loss from Event (Gross of Reinsurance). This includes any anticipated claim expense or cost incurred by the direct insurer during the processing of the claim (Loss Adjustment Expense). Include all property and casualty lines of business.</p> <p><i>If necessary, estimate projected total losses gross of reinsurance based on your reinsurance chart. The Office realizes this number may change in future reports as actual claims are reported, paid and settled with the reinsurers. (in whole dollars)</i></p>		FALSE	No		
<p>Projected Net Retention Resulting from the Event - Include all property and casualty lines of business.</p> <p><i>If necessary, estimate projected net retention based on your reinsurance chart. The Office realizes this number may change in future reports as actual claims are reported, paid and settled with the reinsurers. (in whole dollars)</i></p>		FALSE	No		
<p>Dollar Amount of Estimated Payable Loss from Event covered by Reinsurance or Other Loss-Transfer Agreements.</p> <p><i>If necessary, estimate projected losses covered by reinsurance based on your reinsurance chart. The Office realizes this number may change in future reports as actual claims are reported, paid and settled with the reinsurers. (in whole dollars)</i></p>		FALSE	No		
What is the full name of the Model and Version Used for Financial Projections? If no Model and Version used, enter NA. (maximum of 250 characters)		FALSE	No		
Did the company turn on the following switches when running the Model?			No		
Long-Term		FALSE	No		
Demand Surge		FALSE	No		
Storm Surge (Flood only)		FALSE	No		
If the Name and Version of Model Used for Financial Projections is N/A, how did the Company evaluate the losses reported? (maximum of 250 characters)		TRUE	No		

Section B: Summary of Data: Florida Statewide Totals for this Report

This Page Is Not Trade Secret

Lines of Business	Policies in Force	Total Insured Value of Policies in Force	Number of Claims Reported	Claims Closed with Payment	Claims Closed without Payment	Number of Open Claims	Percent of Claims Closed	STORM EVENT NAME	Report Date Not Entered	Validation Checks		
								Paid Loss Excluding Loss Adjustment Expense (in Whole Dollars)	Paid Allocated Loss Adjustment Expense (in Whole Dollars)	Case Incurred Loss Excluding Loss Adjustment Expense (in Whole Dollars)	Case Allocated Loss Adjustment Expense (in Whole Dollars)	Required Data Fields Complete?
Residential Property	0	\$0	0	0	0	0	0.0%	\$0	\$0	\$0	\$0	TRUE
Homeowners			0	0	0	0	0.0%	\$0				FALSE
Dwelling			0	0	0	0	0.0%	\$0				FALSE
Mobile Homeowners			0	0	0	0	0.0%	\$0				FALSE
Commercial Residential			0	0	0	0	0.0%	\$0				FALSE
Commercial Property			0	0	0	0	0.0%	\$0				FALSE
Private Flood			0	0	0	0	0.0%	\$0				FALSE
Business Interruption			0	0	0	0	0.0%	\$0				FALSE
Other Lines of Business*			0	0	0	0	0.0%	\$0				FALSE
TOTALS	0	\$0	0	0	0	0	0.0%	\$0	\$0	\$0	\$0	TRUE

Statewide Policies in Force (column k), Total Insured Value of Policies in Force (column l), Paid ALAE (column s), Case Incurred Loss (column t), and Case ALAE (column u) must be entered for each line of business.

*Select the coverages included in the "Other Lines of Business" section:

- Fire
- Farmowners Multi-Peril
- Ocean Marine
- Inland Marine
- PPA Physical Damage
- Commercial Auto Physical Damage
- Aircraft
- Glass
- Boiler and Machinery
- Industrial Fire
- Industrial Extended Coverage
- Multi-Peril Crop
- Surplus Lines Property & Casualty

TRUE

Section C - Insurance Types (Appearance by Tab)

For every "Claims and Payment by County of Occurrence," the submitter is to provide the following information for each county where claims were received for the reporting EVENT as described below:

As this template may be applied to disaster reporting, "EVENT" means a storm system that has been declared by the National Hurricane Center of the National Weather Service. The duration of the "reporting event" includes the time period, in Florida:

- a. Beginning at the time a storm watch or storm warning is issued for any part of Florida by the National Hurricane Center of the National Weather Service;
- b. Continuing for the time period during which the storm conditions exist anywhere in Florida; and
- c. Ending 72 hours following the termination of the last storm watch or storm warning issued for any part of Florida by the National Hurricane Center of the National Weather Service.

Definitions used throughout Section C:

All Other Lines of Business, by Florida County: All other property lines of business specifically not listed below. This requires a description of the types of covered policies in the Summary tab.

Business Interruption, by Florida County: Includes losses under a commercial policy for loss of income, operating expenses, and extra expenses while a business is restoring operations.

Case Incurred Loss (in whole dollars): Indemnity case reserves and payments to date. Estimates of Incurred but not reported (IBNR) should not be included.

Commercial Claims Received, by Florida County: Coverages sold to commercial owners which is not Commercial Residential. Normally reported on lines 1 - Fire; 2 - Allied Lines; 5.1 - Commercial Multi-Peril (non-liability portion) or 5.2 - Commercial Multi-Peril (liability portion) on the NAIC Annual Statement Exhibit of Premiums and Losses (State Page).

Commercial Residential Claims Received, by Florida County: Commercial residential insurance purchased by commercial entities for apartment buildings, condominium associations and homeowners associations. Normally reported on lines 1 - Fire; 2 - Allied Lines; 5.1 - Commercial Multi-Peril (non-liability portion) or 5.2 - Commercial Multi-Peril (liability portion) on the NAIC Annual Statement Exhibit of Premiums and Losses (State Page).

Dwelling Claims Received, by Florida County: Coverages sold to property owners or tenants occupying a described property that is used exclusively for residential purposes. Generally reported on line 1 - Fire on the NAIC Annual Statement Exhibit of Premiums and Losses (State Page).

Florida County and Multiple Florida Counties: All entries must be submitted according to the boundaries of the 67 legal counties in the State of Florida, except when multiple counties are involved. The "County of Occurrence Unknown at Time of Reporting" category may only be utilized after every effort has been made to assign each claim to the specific county in which the loss occurred. Additional detail may be requested for each claim reported in this category.

Homeowners Claims Received, by Florida County: Coverages sold to homeowners, condominium unit-owners, and tenants occupying a described property that is used exclusively for residential purposes. Generally reported on line 4 - Homeowners Multi-Peril on the NAIC Annual Statement Exhibit of Premiums and Losses (State Page).

Mobile Homeowners Claims Received, by Florida County: Coverages sold to mobile homeowners occupying a described property that is used exclusively for residential purposes. Generally reported on lines 1 - Fire or 4 - Homeowners Multi-Peril on the NAIC Annual Statement Exhibit of Premiums and Losses (State Page).

Number of Claims Closed With Payment: This means claimant has received payment of the full, agreed upon settlement amount, and no additional payments are expected to be incurred by the insurer for this specific claim. These claims are mutually exclusive from, and are not to be included in, the "Number of Claims Closed Without Payment" discussed below.

Number of Claims Closed Without Payment: This means claims have been denied or where no payment is to be made to the policyholder. This also includes claims determined to be below the policy deductible. These claims are mutually exclusive from, and are not to be included in, the "Number of Claims Closed With Payment" discussed above.

Number of Claims Reported: Any notice to an insurer or its agent by a claimant or an insured that reasonably apprises the insurer that a loss has occurred. Include only those Florida claims received on a direct basis AND only those claims associated with the Reporting Categories contained in Section C of this workbook (see Section C tabs).

Number of Open Claims: This means settlement has not yet been reached, or, if settlement has been reached *and payment is due*, the claimant has not yet received payment of the full, agreed upon settlement amount.

Paid Loss (in whole dollars): Indemnity payments, but excludes adjustment expense. Payments should be net of actual salvage and subrogation recoveries. For applicable lines, include losses associated with loss of use, additional living expense, fair rental value, etc.

Private Flood Claims Received, by Florida County: Flood insurance coverage underwritten by private insurers that is not associated with the Federal Flood Insurance Program. Generally reported on line 2.1 - Allied Lines on the NAIC Annual Statement Exhibit of Premiums and Losses (State Page).

Data Validations

Two validations are used in the Section C tabs of this data template:

Row Validation Check #1:	"Number of Claims Closed with Payments" "Number of Claims Closed without Payments" + "Number of Open Claims" "Number of Claims Reported"
Row Validation Check #2:	If the "Number of Claims Reported" = 0, then "Paid Loss" must also = 0.

Submitting a "Trade Secret" Filing

Trade secret filings may be completed in accordance with Sec. 624.4213, F.S. This is done on a tab with a trade secret window option by clicking on the down-arrow that appears when the box is selected, then choosing "Trade Secret Information on this Page". To qualify for trade secret protection, the filer must additionally file a properly-executed trade secret affidavit in the appropriate filing component designed for this purpose. Regardless of a filing's trade secret status, all filings may be part of post-event aggregate reporting.

If You Need Assistance . . .

If you have any questions or need assistance in filing, please contact Market Data Collections at 850-413-3147 or via email:

DisasterReporting@flor.com

Section C: Homeowners Claims and Payments by County of Occurrence
 Please distribute your claims data in appropriate rows below.

STORM EVENT NAME								
County of Occurrence	Number of Claims Reported	Number of Claims Closed with Payment	Number of Claims Closed without Payment	Number of Open Claims	Paid Loss (in Whole Dollars)	Validation Checks	Error Messages	TRADE SECRET?
								As Set
ALACHUA						TRUE		No
BAKER						TRUE		No
BAY						TRUE		No
BRADFORD						TRUE		No
BREVARD						TRUE		No
BROWARD						TRUE		No
CALHOUN						TRUE		No
CHARLOTTE						TRUE		No
CITRUS						TRUE		No
CLAY						TRUE		No
COLLIER						TRUE		No
COLUMBIA						TRUE		No
DE SOTO						TRUE		No
DIXIE						TRUE		No
DUVAL						TRUE		No
ESCAMBIA						TRUE		No
FLAGLER						TRUE		No
FRANKLIN						TRUE		No
GADSDEN						TRUE		No
GILCHRIST						TRUE		No
GLADES						TRUE		No
GULF						TRUE		No
HAMILTON						TRUE		No
HARDEE						TRUE		No
HENDRY						TRUE		No
HERNANDO						TRUE		No
HIGHLANDS						TRUE		No
HILLSBOROUGH						TRUE		No
HOLMES						TRUE		No
INDIAN RIVER						TRUE		No
JACKSON						TRUE		No
JEFFERSON						TRUE		No
LAFAYETTE						TRUE		No
LAKE						TRUE		No
LEE						TRUE		No
LEON						TRUE		No
LEVY						TRUE		No
LIBERTY						TRUE		No

MADISON						TRUE		No
MANATEE						TRUE		No
MARION						TRUE		No
MARTIN						TRUE		No
MIAMI-DADE						TRUE		No
MONROE						TRUE		No
NASSAU						TRUE		No
OKALOOSA						TRUE		No
OKEECHOBEE						TRUE		No
ORANGE						TRUE		No
OSCEOLA						TRUE		No
PALM BEACH						TRUE		No
PASCO						TRUE		No
PINELLAS						TRUE		No
POLK						TRUE		No
PUTNAM						TRUE		No
SANTA ROSA						TRUE		No
SARASOTA						TRUE		No
SEMINOLE						TRUE		No
ST JOHNS						TRUE		No
ST LUCIE						TRUE		No
SUMTER						TRUE		No
SUWANNEE						TRUE		No
TAYLOR						TRUE		No
UNION						TRUE		No
VOLUSIA						TRUE		No
WAKULLA						TRUE		No
WALTON						TRUE		No
WASHINGTON						TRUE		No
County of Occurrence Unknown at Time of Reporting						TRUE		No
Statewide Total (Auto-Calculated)	0	0	0	0	\$0			

Section C: Dwelling Claims and Payments by County of Occurrence
 Please distribute your claims data in appropriate rows below.

STORM EVENT NAME								
County of Occurrence	Number of Claims Reported	Number of Claims Closed with Payment	Number of Claims Closed without Payment	Number of Open Claims	Paid Loss (in Whole Dollars)	Validation Checks	Error Messages	TRADE SECRET?
ALACHUA						TRUE		No
BAKER						TRUE		No
BAY						TRUE		No
BRADFORD						TRUE		No
BREVARD						TRUE		No
BROWARD						TRUE		No
CALHOUN						TRUE		No
CHARLOTTE						TRUE		No
CITRUS						TRUE		No
CLAY						TRUE		No
COLLIER						TRUE		No
COLUMBIA						TRUE		No
DE SOTO						TRUE		No
DIXIE						TRUE		No
DUVAL						TRUE		No
ESCAMBIA						TRUE		No
FLAGLER						TRUE		No
FRANKLIN						TRUE		No
GADSDEN						TRUE		No
GILCHRIST						TRUE		No
GLADES						TRUE		No
GULF						TRUE		No
HAMILTON						TRUE		No
HARDEE						TRUE		No
HENDRY						TRUE		No
HERNANDO						TRUE		No
HIGHLANDS						TRUE		No
HILLSBOROUGH						TRUE		No
HOLMES						TRUE		No
INDIAN RIVER						TRUE		No
JACKSON						TRUE		No
JEFFERSON						TRUE		No
LAFAYETTE						TRUE		No
LAKE						TRUE		No
LEE						TRUE		No
LEON						TRUE		No
LEVY						TRUE		No

LIBERTY						TRUE		No
MADISON						TRUE		No
MANATEE						TRUE		No
MARION						TRUE		No
MARTIN						TRUE		No
MIAMI-DADE						TRUE		No
MONROE						TRUE		No
NASSAU						TRUE		No
OKALOOSA						TRUE		No
OKEECHOBEE						TRUE		No
ORANGE						TRUE		No
OSCEOLA						TRUE		No
PALM BEACH						TRUE		No
PASCO						TRUE		No
PINELLAS						TRUE		No
POLK						TRUE		No
PUTNAM						TRUE		No
SANTA ROSA						TRUE		No
SARASOTA						TRUE		No
SEMINOLE						TRUE		No
ST JOHNS						TRUE		No
ST LUCIE						TRUE		No
SUMTER						TRUE		No
SUWANNEE						TRUE		No
TAYLOR						TRUE		No
UNION						TRUE		No
VOLUSIA						TRUE		No
WAKULLA						TRUE		No
WALTON						TRUE		No
WASHINGTON						TRUE		No
County of Occurrence Unknown at Time of Reporting						TRUE		No
Statewide Total (Auto-Calculated)	0	0	0	0	0	\$0		No

Section C: Mobile Homeowners Claims and Payments by County of Occurrence
 Please distribute your claims data in appropriate rows below.

STORM EVENT NAME								TRADE SECRET?
County of Occurrence	Number of Claims Reported	Number of Claims Closed with Payment	Number of Claims Closed without Payment	Number of Open Claims	Paid Loss (in Whole Dollars)	Validation Checks	Error Messages	As Set
ALACHUA						TRUE		No
BAKER						TRUE		No
BAY						TRUE		No
BRADFORD						TRUE		No
BREVARD						TRUE		No
BROWARD						TRUE		No
CALHOUN						TRUE		No
CHARLOTTE						TRUE		No
CITRUS						TRUE		No
CLAY						TRUE		No
COLLIER						TRUE		No
COLUMBIA						TRUE		No
DE SOTO						TRUE		No
DIXIE						TRUE		No
DUVAL						TRUE		No
ESCAMBIA						TRUE		No
FLAGLER						TRUE		No
FRANKLIN						TRUE		No
GADSDEN						TRUE		No
GILCHRIST						TRUE		No
GLADES						TRUE		No
GULF						TRUE		No
HAMILTON						TRUE		No
HARDEE						TRUE		No
HENDRY						TRUE		No
HERNANDO						TRUE		No
HIGHLANDS						TRUE		No
HILLSBOROUGH						TRUE		No
HOLMES						TRUE		No
INDIAN RIVER						TRUE		No
JACKSON						TRUE		No
JEFFERSON						TRUE		No
LAFAYETTE						TRUE		No
LAKE						TRUE		No
LEE						TRUE		No
LEON						TRUE		No

LEVY						TRUE		No
LIBERTY						TRUE		No
MADISON						TRUE		No
MANATEE						TRUE		No
MARION						TRUE		No
MARTIN						TRUE		No
MIAMI-DADE						TRUE		No
MONROE						TRUE		No
NASSAU						TRUE		No
OKALOOSA						TRUE		No
OKEECHOBEE						TRUE		No
ORANGE						TRUE		No
OSCEOLA						TRUE		No
PALM BEACH						TRUE		No
PASCO						TRUE		No
PINELLAS						TRUE		No
POLK						TRUE		No
PUTNAM						TRUE		No
SANTA ROSA						TRUE		No
SARASOTA						TRUE		No
SEMINOLE						TRUE		No
ST JOHNS						TRUE		No
ST LUCIE						TRUE		No
SUMTER						TRUE		No
SUWANNEE						TRUE		No
TAYLOR						TRUE		No
UNION						TRUE		No
VOLUSIA						TRUE		No
WAKULLA						TRUE		No
WALTON						TRUE		No
WASHINGTON						TRUE		No
County of Occurrence Unknown at Time of Reporting						TRUE		No
Statewide Total (Auto-Calculated)	0	0	0	0	0	\$0		

Section C: Commercial Residential Claims and Payments by County of Occurrence
 Please distribute your claims data in appropriate rows below.

STORM EVENT NAME								
County of Occurrence	Number of Claims Reported	Number of Claims Closed with Payment	Number of Claims Closed without Payment	Number of Open Claims	Paid Loss (in Whole Dollars)	Validation Checks	Error Messages	TRADE SECRET? As Set
ALACHUA						TRUE		No
BAKER						TRUE		No
BAY						TRUE		No
BRADFORD						TRUE		No
BREVARD						TRUE		No
BROWARD						TRUE		No
CALHOUN						TRUE		No
CHARLOTTE						TRUE		No
CITRUS						TRUE		No
CLAY						TRUE		No
COLLIER						TRUE		No
COLUMBIA						TRUE		No
DE SOTO						TRUE		No
DIXIE						TRUE		No
DUVAL						TRUE		No
ESCAMBIA						TRUE		No
FLAGLER						TRUE		No
FRANKLIN						TRUE		No
GADSDEN						TRUE		No
GILCHRIST						TRUE		No
GLADES						TRUE		No
GULF						TRUE		No
HAMILTON						TRUE		No
HARDEE						TRUE		No
HENDRY						TRUE		No
HERNANDO						TRUE		No
HIGHLANDS						TRUE		No
HILLSBOROUGH						TRUE		No
HOLMES						TRUE		No
INDIAN RIVER						TRUE		No
JACKSON						TRUE		No
JEFFERSON						TRUE		No
LAFAYETTE						TRUE		No
LAKE						TRUE		No
LEE						TRUE		No
LEON						TRUE		No
LEVY						TRUE		No

LIBERTY						TRUE		No
MADISON						TRUE		No
MANATEE						TRUE		No
MARION						TRUE		No
MARTIN						TRUE		No
MIAMI-DADE						TRUE		No
MONROE						TRUE		No
NASSAU						TRUE		No
OKALOOSA						TRUE		No
OKEECHOBEE						TRUE		No
ORANGE						TRUE		No
OSCEOLA						TRUE		No
PALM BEACH						TRUE		No
PASCO						TRUE		No
PINELLAS						TRUE		No
POLK						TRUE		No
PUTNAM						TRUE		No
SANTA ROSA						TRUE		No
SARASOTA						TRUE		No
SEMINOLE						TRUE		No
ST JOHNS						TRUE		No
ST LUCIE						TRUE		No
SUMTER						TRUE		No
SUWANNEE						TRUE		No
TAYLOR						TRUE		No
UNION						TRUE		No
VOLUSIA						TRUE		No
WAKULLA						TRUE		No
WALTON						TRUE		No
WASHINGTON						TRUE		No
County of Occurrence Unknown at Time of Reporting						TRUE		No
Statewide Total (Auto-Calculated)	0	0	0	0	0	\$0		No

Section C: Commercial Claims and Payments by County of Occurrence
 Please distribute your claims data in appropriate rows below.

STORM EVENT NAME								
County of Occurrence	Number of Claims Reported	Number of Claims Closed with Payment	Number of Claims Closed without Payment	Number of Open Claims	Paid Loss (in Whole Dollars)	Validation Checks	Error Messages	TRADE SECRET?
								As Set
ALACHUA						TRUE		No
BAKER						TRUE		No
BAY						TRUE		No
BRADFORD						TRUE		No
BREVARD						TRUE		No
BROWARD						TRUE		No
CALHOUN						TRUE		No
CHARLOTTE						TRUE		No
CITRUS						TRUE		No
CLAY						TRUE		No
COLLIER						TRUE		No
COLUMBIA						TRUE		No
DE SOTO						TRUE		No
DIXIE						TRUE		No
DUVAL						TRUE		No
ESCAMBIA						TRUE		No
FLAGLER						TRUE		No
FRANKLIN						TRUE		No
GADSDEN						TRUE		No
GILCHRIST						TRUE		No
GLADES						TRUE		No
GULF						TRUE		No
HAMILTON						TRUE		No
HARDEE						TRUE		No
HENDRY						TRUE		No
HERNANDO						TRUE		No
HIGHLANDS						TRUE		No
HILLSBOROUGH						TRUE		No
HOLMES						TRUE		No
INDIAN RIVER						TRUE		No
JACKSON						TRUE		No
JEFFERSON						TRUE		No
LAFAYETTE						TRUE		No
LAKE						TRUE		No
LEE						TRUE		No
LEON						TRUE		No
LEVY						TRUE		No
LIBERTY						TRUE		No
MADISON						TRUE		No
MANATEE						TRUE		No
MARION						TRUE		No
MARTIN						TRUE		No

MIAMI-DADE						TRUE		No
MONROE						TRUE		No
NASSAU						TRUE		No
OKALOOSA						TRUE		No
OKEECHOBEE						TRUE		No
ORANGE						TRUE		No
OSCEOLA						TRUE		No
PALM BEACH						TRUE		No
PASCO						TRUE		No
PINELLAS						TRUE		No
POLK						TRUE		No
PUTNAM						TRUE		No
SANTA ROSA						TRUE		No
SARASOTA						TRUE		No
SEMINOLE						TRUE		No
ST JOHNS						TRUE		No
ST LUCIE						TRUE		No
SUMTER						TRUE		No
SUWANNEE						TRUE		No
TAYLOR						TRUE		No
UNION						TRUE		No
VOLUSIA						TRUE		No
WAKULLA						TRUE		No
WALTON						TRUE		No
WASHINGTON						TRUE		No
County of Occurrence Unknown at Time of Reporting						TRUE		No
Statewide Total (Auto-Calculated)	0	0	0	0	\$0			

Section C: Private Flood Claims and Payments by County of Occurrence
 Please distribute your claims data in appropriate rows below.

STORM EVENT NAME								
County of Occurrence	Number of Claims Reported	Number of Claims Closed with Payment	Number of Claims Closed without Payment	Number of Open Claims	Paid Loss (in Whole Dollars)	Validation Checks	Error Messages	TRADE SECRET? As Set
ALACHUA						TRUE		No
BAKER						TRUE		No
BAY						TRUE		No
BRADFORD						TRUE		No
BREVARD						TRUE		No
BROWARD						TRUE		No
CALHOUN						TRUE		No
CHARLOTTE						TRUE		No
CITRUS						TRUE		No
CLAY						TRUE		No
COLLIER						TRUE		No
COLUMBIA						TRUE		No
DE SOTO						TRUE		No
DIXIE						TRUE		No
DUVAL						TRUE		No
ESCAMBIA						TRUE		No
FLAGLER						TRUE		No
FRANKLIN						TRUE		No
GADSDEN						TRUE		No
GILCHRIST						TRUE		No
GLADES						TRUE		No
GULF						TRUE		No
HAMILTON						TRUE		No
HARDEE						TRUE		No
HENDRY						TRUE		No
HERNANDO						TRUE		No
HIGHLANDS						TRUE		No
HILLSBOROUGH						TRUE		No
HOLMES						TRUE		No
INDIAN RIVER						TRUE		No
JACKSON						TRUE		No
JEFFERSON						TRUE		No
LAFAYETTE						TRUE		No
LAKE						TRUE		No
LEE						TRUE		No
LEON						TRUE		No
LEVY						TRUE		No
LIBERTY						TRUE		No
MADISON						TRUE		No
MANATEE						TRUE		No

MARION						TRUE		No
MARTIN						TRUE		No
MIAMI-DADE						TRUE		No
MONROE						TRUE		No
NASSAU						TRUE		No
OKALOOSA						TRUE		No
OKEECHOBEE						TRUE		No
ORANGE						TRUE		No
OSCEOLA						TRUE		No
PALM BEACH						TRUE		No
PASCO						TRUE		No
PINELLAS						TRUE		No
POLK						TRUE		No
PUTNAM						TRUE		No
SANTA ROSA						TRUE		No
SARASOTA						TRUE		No
SEMINOLE						TRUE		No
ST JOHNS						TRUE		No
ST LUCIE						TRUE		No
SUMTER						TRUE		No
SUWANNEE						TRUE		No
TAYLOR						TRUE		No
UNION						TRUE		No
VOLUSIA						TRUE		No
WAKULLA						TRUE		No
WALTON						TRUE		No
WASHINGTON						TRUE		No
County of Occurrence Unknown at Time of Reporting						TRUE		No
Statewide Total (Auto-Calculated)	0	0	0	0	0	\$0		

Section C: Business Interruption Claims and Payments by County of Occurrence
Please distribute your claims data in appropriate rows below.

STORM EVENT NAME								
County of Occurrence	Number of Claims Reported	Number of Claims Closed with Payment	Number of Claims Closed without Payment	Number of Open Claims	Paid Loss (in Whole Dollars)	Validation Checks	Error Messages	TRADE SECRET? As Set
ALACHUA						TRUE		No
BAKER						TRUE		No
BAY						TRUE		No
BRADFORD						TRUE		No
BREVARD						TRUE		No
BROWARD						TRUE		No
CALHOUN						TRUE		No
CHARLOTTE						TRUE		No
CITRUS						TRUE		No
CLAY						TRUE		No
COLLIER						TRUE		No
COLUMBIA						TRUE		No
DE SOTO						TRUE		No
DIXIE						TRUE		No
DUVAL						TRUE		No
ESCAMBIA						TRUE		No
FLAGLER						TRUE		No
FRANKLIN						TRUE		No
GADSDEN						TRUE		No
GILCHRIST						TRUE		No
GLADES						TRUE		No
GULF						TRUE		No
HAMILTON						TRUE		No
HARDEE						TRUE		No
HENDRY						TRUE		No
HERNANDO						TRUE		No
HIGHLANDS						TRUE		No
HILLSBOROUGH						TRUE		No
HOLMES						TRUE		No
INDIAN RIVER						TRUE		No
JACKSON						TRUE		No
JEFFERSON						TRUE		No
LAFAYETTE						TRUE		No
LAKE						TRUE		No
LEE						TRUE		No
LEON						TRUE		No
LEVY						TRUE		No
LIBERTY						TRUE		No
MADISON						TRUE		No

MANATEE						TRUE		No
MARION						TRUE		No
MARTIN						TRUE		No
MIAMI-DADE						TRUE		No
MONROE						TRUE		No
NASSAU						TRUE		No
OKALOOSA						TRUE		No
OKEECHOBEE						TRUE		No
ORANGE						TRUE		No
OSCEOLA						TRUE		No
PALM BEACH						TRUE		No
PASCO						TRUE		No
PINELLAS						TRUE		No
POLK						TRUE		No
PUTNAM						TRUE		No
SANTA ROSA						TRUE		No
SARASOTA						TRUE		No
SEMINOLE						TRUE		No
ST JOHNS						TRUE		No
ST LUCIE						TRUE		No
SUMTER						TRUE		No
SUWANNEE						TRUE		No
TAYLOR						TRUE		No
UNION						TRUE		No
VOLUSIA						TRUE		No
WAKULLA						TRUE		No
WALTON						TRUE		No
WASHINGTON						TRUE		No
County of Occurrence Unknown at Time of Reporting						TRUE		No
Statewide Total (Auto-Calculated)	0	0	0	0	0	\$0		

Section C: Other Lines of Business Claims and Payments by County of Occurrence
 Please distribute your claims data in appropriate rows below.

STORM EVENT NAME								
County of Occurrence	Number of Claims Reported	Number of Claims Closed with Payment	Number of Claims Closed without Payment	Number of Open Claims	Paid Loss (in Whole Dollars)	Validation Checks	Error Messages	TRADE SECRET?
								As Set
ALACHUA						TRUE		No
BAKER						TRUE		No
BAY						TRUE		No
BRADFORD						TRUE		No
BREVARD						TRUE		No
BROWARD						TRUE		No
CALHOUN						TRUE		No
CHARLOTTE						TRUE		No
CITRUS						TRUE		No
CLAY						TRUE		No
COLLIER						TRUE		No
COLUMBIA						TRUE		No
DE SOTO						TRUE		No
DIXIE						TRUE		No
DUVAL						TRUE		No
ESCAMBIA						TRUE		No
FLAGLER						TRUE		No
FRANKLIN						TRUE		No
GADSDEN						TRUE		No
GILCHRIST						TRUE		No
GLADES						TRUE		No
GULF						TRUE		No
HAMILTON						TRUE		No
HARDEE						TRUE		No
HENDRY						TRUE		No
HERNANDO						TRUE		No
HIGHLANDS						TRUE		No
HILLSBOROUGH						TRUE		No
HOLMES						TRUE		No
INDIAN RIVER						TRUE		No
JACKSON						TRUE		No
JEFFERSON						TRUE		No
LAFAYETTE						TRUE		No
LAKE						TRUE		No
LEE						TRUE		No
LEON						TRUE		No
LEVY						TRUE		No
LIBERTY						TRUE		No
MADISON						TRUE		No
MANATEE						TRUE		No
MARION						TRUE		No

MARTIN						TRUE		No
MIAMI-DADE						TRUE		No
MONROE						TRUE		No
NASSAU						TRUE		No
OKALOOSA						TRUE		No
OKEECHOBEE						TRUE		No
ORANGE						TRUE		No
OSCEOLA						TRUE		No
PALM BEACH						TRUE		No
PASCO						TRUE		No
PINELLAS						TRUE		No
POLK						TRUE		No
PUTNAM						TRUE		No
SANTA ROSA						TRUE		No
SARASOTA						TRUE		No
SEMINOLE						TRUE		No
ST JOHNS						TRUE		No
ST LUCIE						TRUE		No
SUMTER						TRUE		No
SUWANNEE						TRUE		No
TAYLOR						TRUE		No
UNION						TRUE		No
VOLUSIA						TRUE		No
WAKULLA						TRUE		No
WALTON						TRUE		No
WASHINGTON						TRUE		No
County of Occurrence Unknown at Time of Reporting						TRUE		No
Statewide Total (Auto-Calculated)	0	0	0	0	0	\$0		