SECURING INDEPENDENT





If an insured event is occurring several miles from the closest recording weather station, conflicting characteristics such as elevation or proximity to a body of water, or the Insured simply wants the recording to be location specific without risk of variation, an independent weather observer can be secured.

How does one secure an observer for the purpose of recording weather for an insured event?

We recommend contacting the local water treatment/pollution facility, University, TV or radio station, most of these have on-site or mobile equipment that can be employed for this purpose. If you need assistance, call us, we can help you in finding an observer who is qualified to meet your weather recording needs in your local region

Who is qualified to monitor the weather for an event?

- 1. A member of the AMS, IWW or NWA.
- 2. An active or retired member of the National Weather Service.
- 3. An active or retired member of the Canadian Weather Service.
- 4. An active or retired member of the Military.
- 5. A cooperative weather observer in some way affiliated with the National Weather Service or Canadian Weather Service.

Each of the above must have weather recording experience and access to proper instrumentation. The selected party must not be affiliated with or have a financial interest in the insured event.

Reporting:

Regardless of claim, an original report detailing the weather measurement as agreed upon, must be completed and submitted by the qualified observer. The qualified observer must sign this report and provide contact information.

In the event of a claim, the qualified observer's signature on the Observer Record (page 4) must be notarized (page 5).

Who is responsible for securing an Independent Weather Observer?

The insured is responsible for advising us of their intent to secure a qualified observer. They must provide us with a completed and signed Independent Weather Observer Approval Form of which we must approve prior to naming this person in the contract. The cost of the observer is the responsibility of the Insured.



MEASUREMENTS AND EQUIPMENT

Rain: Rain measurements at a remote site must be recorded on an hourly basis in an open area away from any overhangs. The rain gauge must be calibrated to measure accumulation to the nearest hundredth of an inch (.01) and should have a measuring capacity of at least 5 inches. The gauge should be placed on a level site, sufficiently secure against a blowing wind.

Snow: Newly fallen snow measurements at a remote site must be recorded at a selected level location shielded from the wind. A minimum of three measurements within the selected site shall be made with the average value used as the recorded snow depth. Newly fallen snow will be recorded in the nearest tenth of an inch (.10). Measurements will be taken hourly unless otherwise advised and agreed to.

Wind: Wind measurements at a remote site must be recorded using an anemometer having the capacity to record wind values to at least 50 miles per hour. A reading should be taken/recorded, excluding gusts, every 15 minutes with the average of four values given as the recorded average wind per hour.

Temperature: Temperature measurements must be taken at a remote site recorded hourly with an acceptable gauge measuring to the nearest degree (Fahrenheit or Celsius). The gauge must be placed in an open area that is shielded from the sun or any other source that generates heat.

Other Weather Conditions: To be approved by Weather Insurance Agency (WIA) and agreed upon in writing prior to recordings.

NOTE: The agreed upon independent weather observer must stay with the equipment for the duration of the insured hours unless otherwise approved by WIA and agreed upon in writing prior to recordings.

T: 631-389-1123



INDEPENDENT WEATHER OBSERVER (IWO) QUALIFICATIONS SHEET

Insured Name:							
Insured Date:							
Insured Hours: Insured Location:							
Independent W	'eather						
•	Observer's Name:						
Address:							
Telephone Num	nber:						
Fax Number:							
Please check o	off any and all of the following that pert	ain to your qualifications:					
☐ An activ	☐ An active or retired member of the National Weather Service with observational experience.						
☐ A coope	A cooperative weather observer affiliated with the National Weather Service, NOAA, or NCDC.						
_	ent of former member of AMS, AWO, or NV	·					
_	demic in an Atmospheric Sciences progra	·					
☐ An emp	ployee of a local television or radio station	with observational experience.					
Description of	Qualifications:						
Da avvisa mantav							
Requirements: √ Measur	<u>:</u> rements will be taken using standard equi _l	oment for each Insured Peril as listed	on Page 2 of this				
packet.	-		_				
√ On-site packet.	measurements must be recorded in acco	rdance with the requirements set forth	n on Page 2 of this				
	dependent Weather Observer's Record mu	ust be fully completed and legible (Pa	ge 4).				
	I certify that neither I nor any member of my immediate family or those living in the same household is employed by or affiliated with the Insured in any way.						
		·					
I hereby cert	tify that the information provided above	s is true and accurate to the best of	my knowledge.				
Print Name:		Signature:					
Title:		Date:					
	FOR INTER	RNAL USE ONLY:					
	Lindoniusita a Amaras is la	D-4					
	Onderwiner Approvar.	Date:					



INDEPENDENT WEATHER OBSERVER'S RECORD

Insured Event:			
Location of Event:			
Insured Date:		Insured Hours:	
Observer's Name:			
Arrival Time:		Departure Time:	
Description of Set-Up:			
HOURS	WEATHER MEASUREMENT (i.e., rain, snow, wind, etc.)	DESCRIPTION	INITIALS
to			
to			_
to			
to			
			-
TOTAL:		INITALS:	
I certify that the weather measurement	ents recorded are true and a	accurate.	
Signature:		Date:	
(In the event of a claim, this si	gnature must be notarized, see Pa	age 5)	

INSTRUCTIONS

Measurements must be taken using standard equipment for each Insured Peril as listed on Page 2 of this packet. On-site measurements must be recorded in accordance with the requirements set forth on Page 2 of this packet. Please fax or email the completed form to the fax number or email address shown below. In the event of a claim, please have the Observer's signature notarized (see page 5). In addition, the original document may be requested for claim purposes.

Please Note: This form will only be used to validate a claim if it is fully completed and legible.



Notarization of Weather Observations

On this date	, before me,				
(today's date)		(printed name of N	(printed name of Notary Public)		
personally appe	ared		 -		
	(printed name of	(printed name of Independent Weather Observer)			
the within instruction capacity, and the	ne on the basis of satisfactory evid ment and acknowledged to me tha at by his/her signature on the instru- d, executed the instrument.	t he/she executed the same	in his/her authorized		
I certify under P	ENALTY OF PERJURY under the		that the		
foregoing parag	raph is true and correct.	,,			
WITNESS my h	and and official seal				
Signature		Seal			
	(signature of Notary Public)	(5	seal of Notary Public)		

T: 631-389-1123