

PRE EXISTING DAMAGE STATEMENT

Named Insured _____

I warrant the proposed location (s) &/or proposed business personal property to be insured:

has no existing damage or claims pending of any kind

has existing damage of the kind that would be covered by the proposed insurance.

suffered prior damage that is fully repaired; or is currently undergoing repairs

Provide a brief description below:

Date of Loss	Nature of Loss	Description of Damage

What steps have been taken to prevent further damage? _____

Is / was the damage insured? Yes No

If insured, have you received the loss settlement? Yes No

Have repairs commenced? Yes No

Anticipated date of completion of repairs: _____

I hereby warrant by my signature below that I have specific authority by any corporation or other party named as a named insured to accept the terms of coverage provided by this policy. I acknowledge that I am aware that misinformation, misrepresentation or failure to disclose pertinent facts voids the proposed policy.

Insured Signature Date

Witness Signature Date

Print Name & Title

Witness Printed Name