

SWORN STATEMENT IN PROOF OF LOSS

POLICY NO. _____
 POLICY TERM _____
 \$0.00

INS CLAIM NO. _____
 AGENT _____
 AGENCY AT _____

AMT OF BLDG COV AT TIME OF LOSS

TO
 At time of loss, by above indicated policy of insurance, you insured the interest of

against loss by Fire to the property described according to the terms and conditions of said policy and of all forms, endorsements, transfers and assignments attached thereto.

TIME AND ORIGIN A Fire loss occurred about the hour of _____ o'clock _____
 on the 26 day of February, 2017. The cause of the said loss was:
Fire

OCCUPANCY The premises described, or containing the property described, was occupied at the time of the loss as follows, and for no other purpose whatever:
Condominium

INTEREST No other person or persons had any interest therein or encumbrance thereon except:

1. FULL AMOUNT OF INSURANCE applicable to the property for which claim is presented is	\$0.00
2. ACTUAL CASH VALUE of building structures	\$0.00
3. ADD ACTUAL CASH VALUE OF CONTENTS of personal property insured	\$0.00
4. ACTUAL CASH VALUE OF ALL PROPERTY	\$0.00
5. FULL COST OF REPAIR OR REPLACEMENT (Building and Contents).....	\$143,863.14
6. LESS APPLICABLE DEPRECIATION	\$18,615.52
7. ACTUAL CASH VALUE LOSS is	\$125,247.62
8. LESS DEDUCTIBLES	\$5,000.00
9. NET AMOUNT CLAIMED under above numbered policy is	\$120,247.62

The said loss did not originate by any act, design or procurement on the part of your insured, nothing has been done by or with the privity or consent of your insured to violate the conditions of the policy, or render it void; no articles are mentioned herein or in annexed schedules but such as were destroyed or damaged at the time of said loss, no property saved has in any manner been concealed, and no attempt to deceive the said insurer as to the extent of said loss, has in any manner been made. Any other information that may be required will be furnished and considered a part of this proof.

Subrogation - To the extent of the payment made or advanced under this policy; the insured hereby assigns, transfers and sets over the insurer all rights, claims or interest that he has against any person, firm or corporation liable for the loss or damage to the property for which payment is made or advanced. He also hereby authorizes the insurer to sue any such third party in his name.

The insured hereby warrants that no release has been given or will be given or settlement or compromise made or agreed upon with any third party who may be liable in damages to the insured with respect to the claim being made herein.

The furnishing of this blank or the preparation of proofs by a representative of the above insurer is not a waiver of any of its rights.

I declare under penalty of perjury that the information contained in the foregoing is true and correct to the best of my knowledge and belief.

Executed this 4th day of March, 2017

Name _____