

No Loss Statement

Date: _____

To whom it may concern,

Regarding: _____ (Insert name of company or individual to be insured. I acknowledge this encompasses all known, associated, or previously owned entities.):

Please select the reflecting period for this statement:

Last 3 years

Dates: From _____ (dd/mm/yy) to _____ (dd/mm/yy)

- **I/We have not sustained a loss or filed a claim within the selected reflecting period,**
- **I/We have not had a claim made against me/us within the selected reflecting period,**
- **Have no knowledge or reason to anticipate a claim or loss within the selected reflecting period, either within the named company or any associated or previously owned entities.**

I understand that this warranty will be incorporated into the insurance contract. I also acknowledge that providing false information on this statement will automatically cancel the coverage, and no claims will be paid.

Signature Print Name/Title

Warranty:

The purpose of this no loss letter is to assist in the underwriting process; information contained herein is specifically relied upon in the determination of insurability. The undersigned, therefore, warrants that the information contained herein is true and accurate to the best of his/her knowledge, information, and belief. This no loss letter shall be the basis of any insurance that may be issued and will be part of such policy. Please note that it is essential to provide accurate and truthful information in this statement. Providing false or misleading information can result in the immediate cancellation of coverage, and no claims will be honored. Your cooperation and integrity in this matter are highly appreciated.
