

<u>Instructions for completing Statement of No Loss</u>

- 1. Authorization to submit a Statement of No Loss **must** be given by Underwriting **prior** to submission.
- 2. Statements of No Loss **must** be **signed**, **dated**, **and submitted** <u>along with payment</u> on the **same day** as authorized.
- 3. Named insured must complete statement of no loss, filling in information (name, policy number, signature, date and *initials for rental properties).
- 4. Signature can be hand-signed or electronically signed however, if e-signature is used, verification will be necessary in the form of e-signature confirmation page from the software used to complete the form.
- Statements of No Loss must be emailed to noloss@universalproperty.com. Please allow a processing time of
 30 minutes after submission to make payments.
- 6. If you are still unable to make payments after 30 minutes, please contact customer service.
- 7. For policies cancelled for non-payment of premium, please note that a **reinstatement fee** of \$10 will be required, in addition to the premium, if the policy has been **cancelled for 11 or more calendar days**. This reinstatement fee will be charged in states where applicable.

^{*}FOR RENTAL PROPERTIES ONLY: Insureds must initial in the last section of the form in order to confirm that the property is rented under a lease term of at least 12 months.



Statement of No Loss

I,		, affirm that no losses, claims, or	r events likely to
	•	y property previously insured under po	•
this statement, I request that UPCIC rein		• • • • • • • • • • • • • • • • • • • •	
UPCIC is relying upon the truthfulness that an incorrect statement or omission	of this representation of fact relating to loss" pertains to	t of UPCIC's decision to reinstate my tion in connection with its decision. I fu to my request for reinstatement may put the period of time beginning with the e	orther understand
Named Insured Signature #1	Date	Named Insured Signature #2	Date
	Statement MUST led, dated, and subr	be given by Underwriting PRIOR to submitted on the SAME DAY AS AUTHOR	

*FOR RENTAL PROPERTIES ONLY:

I/We verify that the property currently is rented under a long-term lease of 12 months or longer (or alternatively the current tenants have continuously occupied the residence for at least the last 12 months): _____ (initial)