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# How to Complete Your Ohio Affidavit of No Other Insurance

Affidavit of No Other Insurance (Ohio)

**INSTRUCTIONS — KEEP FOR YOUR RECORDS. DO NOT ATTACH THIS PAGE TO YOUR DOCUMENT.**

**About this form.** Insurers use this sworn statement to confirm a claimant has no other coverage for a loss, often in policy-limits settlements.

1. **Swear before a notary**
   Sign under oath before the notary with a current, government-issued photo ID.

## After It's Signed

- Give it to the insurer handling the claim.

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SCAN TO BOOK

**Questions about this document? Talk to an attorney.** Gavrilov & Brooks Law Firm has attorneys licensed in multiple states. Phone and video consultations are available, wherever you are. **(916) 504-0529** · **www.gavrilovlaw.com**

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YOUR FORM BEGINS ON THE NEXT PAGE

# AFFIDAVIT OF NO OTHER INSURANCE

Ohio

Name of affiant

Address

being first duly sworn (or affirming), states under penalty of perjury under the laws of the State of Ohio:

1. This affidavit concerns the claim and incident below:

Claim number and insurer

Date of incident

2. On the date of the incident, I had no other insurance policy, including auto, health, homeowner's, umbrella, or other coverage, that would provide benefits for this claim, except as stated here (write "None" if none):

3. I understand the insurer will rely on this statement and that a false statement may void coverage.

Date

X

Affiant

Printed name

**JURAT**

**STATE OF OHIO** )
) **ss.**
**COUNTY OF** )

Sworn to (or affirmed) and subscribed before me on

(date)

by (name of affiant)

*An oath or affirmation was administered to the signer with regard to the notarial act.*

X

Notary Public

(Notary seal)

Notary's printed name

My commission expires



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