How to Complete Your Pennsylvania Affidavit of No Other Insurance

Affidavit of No Other Insurance (Pennsylvania)

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

Pennsylvania

Name of affiant

Address

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

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

COMMONWEALTH OF PENNSYLVANIA)

COUNTY OF) ss.

Signed and sworn to (or affirmed) before me on

(date)

by (name of affiant)

X

Notary Public

(Notary seal)

Notary's printed name

Commission number

My commission expires

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