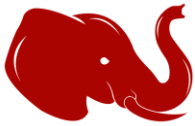


Instructions for Completing Statement of No Loss

Instructions to complete the Statement of No Loss are as follows:

1. Authorization to submit a No Loss Statement **must** be given by Underwriting PRIOR to submission.
2. No Loss Statements **must** be SIGNED, DATED, and SUBMITTED along with payment on the **SAME DAY AS AUTHORIZED**.
3. Named insured must complete statement of no loss, filling in all 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.
5. No Loss Statements **must** be EMAILED to noloss@universalproperty.com. Please allow a **processing time of 20 minutes** after submission to make payments.
6. If you are still unable to make payments after 20 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 5 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 events likely to result in a loss or claim have occurred in relation to my property previously insured under policy number _____ with Universal Property & Casualty Insurance Company (UPCIC). On the basis of this statement, I request that UPCIC reinstate my insurance policy.

I understand that my representation is an important part of UPCIC's decision to reinstate my policy, and that UPCIC is relying upon the truthfulness of this representation in connection with its decision. I further understand that an incorrect statement or omission of fact relating to my request for reinstatement may prevent recovery under the policy. This "statement of no loss" pertains to the period of time beginning with the expiration of my policy through the date I signed this statement.

Named Insured Signature #1

Date

Named Insured Signature #2

Date

UNDERWRITING ACCEPTANCE OF A NO LOSS STATEMENT REQUIRES:

- Authorization to submit a No Loss Statement **MUST** be given by Underwriting **PRIOR** to submission.
- No Loss Statements **MUST** be signed, dated, and submitted on the **SAME DAY AS AUTHORIZED**.
- No Loss Statements **MUST** be emailed to [noloss@universalproperty.com](mailto: noloss@universalproperty.com).

*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)