

**SWORN STATEMENT IN PROOF OF LOSS**

Amount of Policy at time of Loss: \$ \_\_\_\_\_<sup>1</sup> POLICY NUMBER \_\_\_\_\_<sup>2</sup> Policy Period \_\_\_\_\_<sup>3</sup>  
AGENT \_\_\_\_\_<sup>4</sup> AGENCY \_\_\_\_\_<sup>5</sup>

To: \_\_\_\_\_<sup>6</sup>

At time of loss, by the above-indicated policy of insurance, your insured, \_\_\_\_\_<sup>7</sup>, against a loss by \_\_\_\_\_<sup>8</sup> to the property described in the statement of loss, according to the terms and conditions of the said policy and all forms, endorsements, transfers and assignments attached thereto.

- 1. **Time and Origin:** A \_\_\_\_\_<sup>9</sup> occurred about the hour of \_\_\_\_\_<sup>10</sup> on the \_\_\_\_\_<sup>11</sup>. The cause & origin of the said loss were: \_\_\_\_\_<sup>12</sup>
- 2. **Occupancy:** The building described, or containing the property described, was occupied at the time of the loss as follows, and for no other purpose whatever: \_\_\_\_\_<sup>13</sup>
- 3. **Title and Interest:** At the time of the loss the interest of your insured in the property described therein was \_\_\_\_\_<sup>14</sup>. No other person or persons had any interest therein or encumbrance thereon, except: \_\_\_\_\_<sup>15</sup>
- 4. **Changes:** Since the said policy was issued there has been no assignment thereof, or change of interest, use, occupancy, possession, location or exposure of the property described except: \_\_\_\_\_<sup>16</sup>.
- 5. **Total Insurance:** The total amount of insurance upon the property described by this policy was, \$ \_\_\_\_\_<sup>17</sup> at the time of the loss, as more particularly specified in the apportionment attached in the statement of loss, besides which there was no policy or other contract of insurance written or oral, valid or invalid.
- 6. **Actual Cash Value** of said property at the time of the loss was \$ \_\_\_\_\_<sup>18</sup>
- 7. **The Whole Loss and Damage** was \$ \_\_\_\_\_<sup>19</sup>
- 8. **The Amount Claimed** under the above numbered policy is \$ \_\_\_\_\_<sup>20</sup>

The said loss did not originate by any act, design or procurement on the part of your insured, or this affiant: nothing has been done by or with the privity or consent of your insured or this affiant, to violate the conditions of the policy, or render it void; no articles are mentioned herein or in annexed schedules but such as were destroyed or damaged at the time of said loss; no property saved has in any manner been concealed, and no attempt to deceive the said company, as to the extent of said loss, has in any manner been made. Any other information that may be required will be furnished and considered a part of this proof.

The insured hereby covenants that no release has been or will be given to or settlement or compromise made with any third party who may be liable to damages to the insured and the insured in consideration of the payment made under this policy hereby subrogates the said Company to all rights and causes of action the said insured has against any person, persons, or corporations whomsoever for damage arising out of or incident to said loss or damage to said property and authorizes said Company to sue in the name of the Insured but at the cost of the Company any such third party, pledging full cooperation in such action.

The furnishing of this blank or the preparation of proofs by a representative of the above insurance company is not a waiver of any of its rights.

**"Any person who knowingly and with intent to defraud any insurance company, or other person, files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties."**

State of \_\_\_\_\_ County of \_\_\_\_\_

The insured subscribed and sworn before me this day of \_\_\_\_\_.

\_\_\_\_\_  
Insured

\_\_\_\_\_  
Insured

\_\_\_\_\_  
Notary Public/or Adjuster

## **Instructions for Filling out the Sworn Statement and Proof of Loss**

- 1.** Total amount of coverage for the dwelling at the time of loss
- 2.** Policy number
- 3.** Policy effective dates (Example: 1/1/14 -1/1/15)
- 4.** Agent's full name
- 5.** Agency
- 6.** Name of your insurance company
- 7.** Insured's full name
- 8.** Type of loss (Example: fire, wind, water damage, etc.)
- 9.** Type of loss (Example: fire, wind, water damage, etc.)
- 10.** Approximate time of loss (Example: 5:00 pm)
- 11.** Date of loss (Example: February 12<sup>th</sup>, 2013)
- 12.** Describe cause & origin (Example : Fire destroyed kitchen)
- 13.** Occupancy (Examples: Rental Property, Residential Property, Church, etc.)
- 14.** Title holder/owner of property
- 15.** Name of mortgagee
- 16.** Any changes since the policy was issued for use, occupancy, possession, location or exposure, etc. for the property described
- 17.** Total amount of coverage for the property at the time of loss
- 18.** Actual Cash Value: The value of the property at the time of loss
- 19.** Whole loss and damage
- 20.** The amount claimed