

COVID 19 – FINANCIAL HARDSHIP ASSISTANCE REQUEST

As a result of the Covid 19 Pandemic, I affirm in writing under penalty of perjury that my business is experiencing financial difficulty.

Due to this financial hardship and in order to meet necessary expenses, I am asking that my premium due date be extended by 60 days and to allow repayment of any overdue premiums over a 12-month period without prejudice.

Named Insured:

Mailing address:

Phone Number:

Email address:

Policy Number(s):

Signature of Owner/Corporate Officer/Date: