

AFFIDAVIT – LIGHTNING LOSSES

TO WHOM IT MAY CONCERN:

I inspected / repaired (item damaged): _____

Model No. _____ Serial No. _____ Year Model _____

Date of Purchase _____ Purchase Price _____ Size _____

Place Purchased _____

Owned By (name of insured) _____

Address _____

Date of Loss _____ Time of Loss _____

Are damaged item(s) available for inspection? _____ If yes, where? _____

If no, why not? _____

This damage was solely due to lightning and no other cause whatsoever because: _____

Repairer's Signature: _____

Repairer's Name: _____

Firm Name: _____

Firm Address: _____

County of: _____

State of: _____

Acknowledged before me by the above named _____

On this _____ day of _____.

(Seal) Notary Public _____