

Applicant Name: _____ NAIC No. _____
FEIN: _____

Uniform Certificate of Authority Application (UCAA)
AFFIDAVIT OF LOST CERTIFICATE OF AUTHORITY

STATE OF _____)
COUNTY OF _____)

BEFORE ME, the undersigned authority, on this day personally appeared _____,
who after being by me duly sworn upon oath deposes and states

That he/she is the _____ of _____
(Position with Company)

(Name of Company)

_____, _____,
(City of Domicile) (State of Domicile)

and that