

Ordinance or Law Rejection Form

The undersigned policyholder or applicant acknowledges and understands that he/she has rejected coverage for losses that result from enforcement of ordinances or laws regulating restoration of a building following physical damage to the building by a covered cause of loss.

This rejection of Ordinance or Law coverage is valid and binding on all persons insured and persons claiming benefits under the policy/application.

The undersigned acknowledges that he/she has rejected Ordinance or Law coverage at this time.

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Name of Insurance Company Policy Number

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Policyholder/Applicant Signature Date

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Insurance Agent/Broker Signature Date