

CIVIL COURT OF THE CITY OF NEW YORK

County of _____

Index No.: _____

**AFFIRMATION OF COMPLIANCE
WITH THE INSURANCE LAW**

State of New York, County of _____ ss:

_____, hereby affirms, deposes and says:

I am over 18 years of age and I am the Claimant in this action.

On _____ I complied with § 1213 of the Insurance Law of the

State of New York in that I

1. served the Superintendent of the State Insurance Department with the original Summons in this matter along with payment of the required fee, and I also

2. mailed Notice of this action to the Defendant, along with a copy of the Summons in the matter, by Certified Mail, Return Receipt Requested.

Proof of such mailing to the Defendant is documented by:

The signed and dated Return Receipt form which is annexed herewith.

The original envelope annexed herewith, bearing the notation by the Postal Service that the mail was refused by the Defendant.

I affirm this ____ day of _____, 20____, under the penalties of perjury under the laws of New York, which may include a fine or imprisonment, that the foregoing is true, and I understand that this document may be filed in an action or proceeding in a court of law.

Printed Name: _____ Signature: _____