



**CERTIFICATION OF NO INSURANCE**

I certify that I did not have insurance coverage on my storm-damaged property at the time of Hurricane Ian. I understand that any misrepresentation of information or failure to disclose information requested on this form could disqualify the household from being eligible for the Hurricane Ian Homeowner Recovery Program. I also understand that this certification statement may be subject to further verification by the U.S. Department of Housing & Urban Development, the Program, or any other County, State, or Federal agency. I, therefore, authorize such verification, and I will provide supporting documents, if necessary.

**WARNING:** Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the U.S. Government.

I certify that the above information is true and correct.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name