



NOTICE OF CLAIM FORM FOR STRUCTURAL CLAIMS ONLY

Please read the 2-10 Home Buyers Warranty® Booklet, section III, page 4 and 5, for filing instructions and pertinent information.

Name: _____

Address: _____
Street City State Zip

Primary Phone: _____ Alternate Phone: _____

Email Address: _____

Effective Date of Warranty: _____ Certificate of Warranty Coverage#: _____

Please note that the 2-10 Home Buyers Warranty® Program provides Limited Structural Defect Warranty coverage which is subject to exclusions and conditions. You are encouraged to review the Structural Defect coverage provisions of your booklet.

Please answer the following questions:

- 1. Have you reviewed the definition of a Structural Defect in your warranty booklet? Yes No
- 2. Do you believe that you have actual physical damage to one or more of the listed load-bearing elements of your home? Yes No
- 3. Have you reviewed the list of non-load-bearing elements which would not qualify as a Structural Defect under this coverage? Yes No
- 4. Do you feel that your home is unsafe, unsanitary or otherwise unlivable as a result of the Structural Defect? Yes No

Nature of Structural Defect (Be specific; If available, enclose photographs and attach a separate sheet if necessary):

Date Defect First Observed: _____

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder (Builder/Seller) or claimant (homeowner) for the purpose of defrauding or attempting to defraud the policyholder (Builder/Seller) or claimant (homeowner) with regard to a settlement or award payable from insurance proceeds shall be reported to the insurance commissioner or Your state. By filing this Notice of Claim you agree to resolve any disputes using arbitration as described on pages 6, 7, and 8 of the booklet.

CHECK ONE (if applicable): 1) FHA 2) VA 3)

CASE #: _____

If you are the original owner, and your Home has FHA/VA financing, please provide the following:

Name of Mortgage Company: _____

Address of Mortgage Company: _____

Homeowner Signature: _____ Date: _____

Homeowner Signature: _____ Date: _____