

INSURED STATEMENT

I, _____, am/was the property owner of _____
_____ [address] on October 8, 2017.

As a result of the 2017 Sonoma Complex Fires, I voluntarily entered into the Government-Sponsored Debris Removal Program and submitted a Right of Entry form in which I authorized specified debris removal benefits be paid directly to the County, so that such benefits can be sent to the State or Federal Government. The County of Sonoma is requesting I fill out this statement in order to verify there is no duplication of benefits for the debris removal performed on my property.

Statement: _____

I have not received a duplication of benefits. I further state that the above facts are true and correct and understand the County of Sonoma is relying on the truth and accuracy of the above information and any documentation submitted with this statement.

Date: _____
Property Owner