

APPLICATION FOR FIRE INSURANCE PROCEEDS CERTIFICATE

BOROUGH OF NEW BRIGHTON
610 THIRD AVENUE
NEW BRIGHTON, PENNSYLVANIA 15066
FAX: (724) 847-5128 OR VOICE: (724) 846-1870

Property Owner(s) Name: _____ Phone #: (____) _____

Property Owner(s) Address: _____

Address of Insured Property: _____ Parcel #: _____

Insurance Company Name: _____ Policy #: _____

Contact Person Information

Name: _____

Company: _____

Address: _____

Phone #: (____) _____ Fax: (____) _____

Date of Fire: _____ Policy \$ Limit: _____

\$ Amount of Loss: _____ Plans to Rebuild _____ or Demolish _____

Signature for Insurer _____ Date _____

NOTE: All requests for a Fire Insurance Proceeds Certificate to be issued by the Borough of New Brighton **must** be submitted in writing on this form.

The Borough of New Brighton will respond in writing within fourteen (14) working days from the date received by the Borough. The Borough does **not** issue oral notices.

Thomas J. Albanese
Borough Manager

Received by the Borough of New Brighton _____