CHUBB.

Bastern Claim Service Center 600 Independence Parkway Chesapeake, VA 23327-4700 O (800) 252-4670 F (800) 664-0987 B ecsc.auto.claims@chubb.com Mailing Address P.O. Box 4700 Chesapeake, VA 23327-4700

Insert Date

Research Foundation of The City University of New York Attention: Andrew Lysinger 230 West 41st Street New York, NY 10036-7207

Re:

Insured Name:

Research Foundation of The City University of New York

Policy Number:

Claim Number:

400.00.16

Date of Loss:

Writing Company:

Great Northern Insurance Company

Dear Mr. Lysinger:

New York State Insurance Law and Regulations require that you and your automobile repairer complete a Certification of Automobile Repairs.

Enclosed is a Certification of Automobile Repairs Form and return envelope. You are required to complete Part I. If your vehicle has been repaired, your automobile repairer must complete Part II.

If it is impossible for you to have Part II completed, tell us why, complete Part I and send us a copy of a paid repair bill, if you have one.

IMPORTANT: In the event of a future loss, we must deduct previous damage, that is, items we have paid for in this loss for which repairs have not been proven. Therefore, we request you complete the enclosed form and return it to us with in the next 30 days.

If you have any questions or concerns, please contact me at (800) 252-4670 ext. 4345 between the hours of 8:00 a.m. and 5:00 p.m. If I am not available when you call, please leave a message and I will return your call as soon as possible. If this is not convenient for you, please press zero # and another member of our claim staff will assist you.

Sincerely,

Nikita K. Turner

Nikita K. Turner Auto Claim Examiner

Enclosure(s)

FORM APD2

CERTIFICATION OF AUTOMOBILE REPAIR

(TO BE COMPLETED BY INSURER)

INSURED: Research Foundation of The City University of New York INSURER'S NAME: Great Northern Insurance Company CLAIM #: (1977) | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 1

Sections 3411(I) of the NEW YORK INSURANCE LAW (NYIL) and Article 12-A of the Vehicle and Traffic Law (VT&L) require that the following certification be completed and signed by both the insured and the automobile repairer. These laws also require submission of the repair invoice (Paid Bill) by the automobile repairer or the insured to the insurer whenever any repairs are made. The NYIL does not require an insured to repair the automobile as a condition of payment of a loss. This form must be completed and returned to the insurer within 45 days. A postage-paid return envelope has been furnished for your convenience.

ANY PERSON WHO, KNOWINGLY ASSISTS, ABETS, SOLICITS OR CONSPIRES WITH ANOTHER TO MAKE A FALSE REPORT OF THE THEFT, DESTRUCTION, DAMAGE OR CONVERSION OF ANY MOTOR VEHICLE TO A LAW ENFORCEMENT AGENCY, THE DEPARTMENT OF MOTOR VEHICLES OR AN INSURANCE COMPANY, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE VALUE OF THE SUBJECT MOTOR VEHICLE OR STATED CLAIM FOR EACH VIOLATION.

PART I TO BE COMPLETED BY THE INSURED:

I,'	•		certify, under p	enaltles of perju	ry, that:
	(Print Your Name)				
CHECK	A OR B A. I	have not mad	e any repairs to	my automobile	as a result of
this los	s, B. I have i	made repairs t	to my automobil	le and I have att	ached a copy
of my i	Invoice for repairs	to my autom	obile as a result	of the captioned	loss.

IMPORTANT NOTICE TO INSURED

IF THIS CERTIFICATION IS NOT COMPLETED AND RETURNED, TOGETHER WITH A COPY OF THE ITEMIZED PAID BILL, IT WILL BE ASSUMED THAT YOU DID NOT REPAIR YOUR MOTOR VEHICLE. IF YOU HAVE A SUBSEQUENT LOSS, THE COMPANY MUST, TO THE EXTENT RELEVANT, DEDUCT SUCH UNREPAIRED ITEMS AS PREVIOUS DAMAGE IN SETTLING A FUTURE LOSS. IF YOU DO NOT REPAIR ALL THE DAMAGES ALLOWED BY THE INSURER, SUCH REPAIRS NOT PERFORMED MAY REDUCE YOUR SETTLEMENT OF ANY FUTURE LOSS. THEREFORE, IF AFTER SIGNING THIS CERTIFICATION, YOU REPAIR ANY DAMAGE CAUSED BY THIS ACCIDENT, YOU SHOULD NOTIFY THE COMPANY IMMEDIATELY. THE COMPANY MAY AT THAT TIME ELECT TO INSPECT YOUR AUTOMOBILE.

DATE; • SIGNATURE OF INSURED;

PART II TO BE COMPLETED BY THE AUTOMOBILE REPAIRER:

Ι,	owner or officer of					
(Print Your Name)	(Print Name of Auto Repair Shop)					
Auto Repair Shop Registration Nur	nber, located at					
certify, under penalties of perjury, that I have made the repairs to the						
automobile owned by	as shown on the attached					
(Print Insured Name)						
Itemized invoice. I further certify that:						
CHECK A OR B A. I have repaired all the items allowed by the insurer, or, if not,						
B. I have repaired the automobile as described on the attached itemized invoice.						
DATE:						
SIGNATURE OF REPAIR (Owner or	Officer):					