

**ALASKA**

## ORDINANCE OR LAW REJECTION FORM

The undersigned policyholder or applicant acknowledges and understands he/she has rejected coverage for losses that result from enforcement of ordinances or laws regulating restoration of a building following physical damage to that building by a covered cause of loss.

This rejection of Ordinance or Law coverage is valid and binding on all Insureds and persons claiming benefits under the policy/application.

The undersigned acknowledge that he/she has rejected Ordinance or Law coverage at this time.

|  |  |  |
| --- | --- | --- |
| PENN-AMERICA INSURANCE |  |  |
| Insurance Company |  | Policy /Application Number |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Policy Holder /Applicant (Print) |  |  |
|  |  |  |
| Signature |  | Date |
|  |  |  |
|  |  |  |
| Insurance Agent/Broker (Print) |  |  |
|  |  |  |
| Signature |  | Date |