

**Applicant Name**

**FEMA Registration #44-1234567**

**Disaster Code (Ex. DR-4559-LA)**

**Disaster Name (Ex. Hurricane Laura)**

**Date of Appeal (Ex. January 1, 2021)**

**Statement declaring I did not have insurance coverage at the time of the disaster:**

I, **Applicant Name**, did not have homeowner's insurance at the time of the disaster, **Disaster Name**.

I hereby declare under penalty of perjury that the foregoing is true and correct.

Signed,

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**Applicant Name**

**Applicant Address**

**Applicant Birthday**

**Applicant City of Birth**