

IMPORTANT NOTICE TO SENIOR CITIZEN INSUREDS

Please be advised that New York Senior Citizen Insureds, age 65 and older, can designate a third party to receive copies of all cancellation, nonrenewal, or conditional renewal notices in addition to the notice you receive.

To designate a third party, the Senior Citizen Insured must do the following:

1. Complete all the information below to show acceptance by the third party.
2. Separate and mail by "Certified Mail-Return Receipt Requested" to:

Otsego Mutual Fire Insurance Company
P.O. Box 40
Burlington Flats, NY 13315

Policy #: _____

Senior Citizen Insured's Name _____
And Mailing Address: _____

Third Party Designee _____
And Mailing Address: _____

The third party designee agrees to accept and receive copies of all cancellation, nonrenewal, and conditional renewal notices that are mailed to the senior citizen insured named above. Designation as a third party shall not constitute acceptance of any liability on the third party for services provided to such senior citizen. The third party designee may terminate their status as a third party designee by providing written notice to both the insurer and the senior citizen insured.

Senior Citizen Insured's Signature

Date

Third Party Designee Signature

Date