NON-WAIVER AGREEMENT

IT IS HEREBY UNDERSTOO any action taken by	•	between the parties signing this	agreement, that
(hereinafter referred to as "Com	pany") in investigating th	te cause of loss, or investigating a	and ascertaining
		nage which occurred on the	
		or invalidate any of the terms or	•
		ghts whatsoever of either of the	
the examination and the furnish or any other person; or the incur any of the terms or conditions of THE INTENT of this agreemen	ring of the books of accourring of any trouble or exp f the policy or policies, or t is to preserve the rights action and ascertainment of	of all parties hereto, and to permi	ers of the insured ive or invalidate it an investigation
WITNESS(ES):		SIGNATURE(S):	
Witness		Signature	
Witness		Signature	
Claim Number		Date	
NOTARY:			
State of; C		ounty of	; SS
On this day of	, 20	, before me appeared	
who is known to be the person(s	s) named herein and who	voluntarily executed this release.	
Notary Signature		Date Commission Expires	

Form 2070F
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