

CERTIFICATION OF AUTOMOBILE REPAIR

INSURED John Doe
CLAIM # 123456789
POLICY # 01234567
DATE OF ACCIDENT 5/20/24
DEDUCTIBLE \$200.00

Section 3411(i) of the NEW YORK INSURANCE LAW (NYIL) and Article 12-A of the Vehicle and Traffic Law (V&TL) 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 penalties of perjury, that:
(PRINT YOUR NAME)

Check A or B

- ☐ A. I have not made any repairs to my automobile as a result of this loss.
☐ B. I have made repairs to my automobile and I have attached a copy of my invoice for repairs to my automobile 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:

I, _____ owner or officer of _____
(PRINT YOUR NAME) (PRINT NAME OF AUTO REPAIR SHOP)

Auto Repair Shop Registration Number _____,

located at _____ certify, under penalties of perjury,

that I have made the repairs to the automobile owned by _____, as shown on
(PRINT NAME OF INSURED)

the attached 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 REPAIRER (OWNER OR OFFICER)