**Section 5502.20 Affidavit For Permission to Destroy Records**

Upon receipt of said application, the Director shall forward to the requesting company two copies of an Affidavit for Permission to Destroy Records in the following form:

AFFIDAVIT

FOR

PERMISSION TO DESTROY RECORDS

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| --- | --- | --- | --- | --- |
| STATE OF ILLINOIS | |  | ) | ss |
|  | |  | ) |
| COUNTY OF |  | | ) |

We, the undersigned, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_President, and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Secretary, of our duly authorized representatives, being each severally sworn, each for himself on his oath says, that he is the above described officer of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company; that each for himself is familiar with the records listed and described on the attached sheets; that, all such records pertain to the business of said company prior to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 19 \_\_\_\_\_; that such records do not contain any information necessary for the final settlement or disposition of any claim arising out of a policy of insurance issued by said company; that the statute of limitations has run against all matters to which the records may pertain; that no such records are required to determine the financial condition of the company or verification of the financial condition of the company at any anniversary date of filed Annual Statements; that other records or duplicates thereof, exist on each item which may become material in the future for the determination of the financial condition of the company; that the retention of the above records is an unnecessary expense to the company and such records serve no useful purpose.

This affidavit is executed for the sole purpose of obtaining the approval of the Director of Insurance for the destruction of the above described records and for no other purpose.

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| (President) | | | | | | |
| (Secretary) | | | | | | |
| Subscribed and sworn to before me this | |  | day of |  | | , 19 |  | . |
|  | | | | | | |
| (Notary Public) | | | | | | |
| DATE: |  | | | | Destruction Authorized | | | |
|  | | | | | | |
| (Director of Insurance) | | | | | | |