

INSURANCE REQUIREMENTS

For City Housing Programs

I/we acknowledge that I/we must have a current Homeowner's Hazard and/or Flood Insurance Policy, which names the City of Simi Valley as Loss Payee for the duration of the property's terms and agreements under the City's housing programs.

To name the City of Simi Valley as Loss Payee, you must complete this authorization form and forward it to your insurance carrier. If you are located within an HOA, please provide it to your Homeowners Association. Do not return to the City.

Authorization and Endorsement Request

Insurance Company: _____

Policy Number: _____ Contact Name: _____

Phone Number: _____ Fax Number: _____

I hereby authorized you to name the City of Simi as Loss Payee on my policy.

Homeowner: _____

Property Address: _____

Homeowner Signature _____ Date _____

Phone Number _____ Email _____

* Note to insurance agent – the City of Simi Valley uses the insured property address as reference.

**City of Simi Valley
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Neighborhood Services Division
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