



MINES SUBSIDENCE NOTICE OF REJECTION OF COVERAGE

I (we) do not desire MINE SUBSIDENCE insurance coverage and hereby waive any right to such coverage, under this policy or any future policy covering my (our) interest in the property identified below, unless I (we) request MINE SUBSIDENCE coverage, in writing, at some future date.

please print or type

Policy #	Insured's Name
Address	
Signature	Date
Location or description of property on which coverage is waived (absence of entry means all structures described in the above numbered policy)	

Applicant's Signature and date
