

Euler Hermes North America Insurance Co.
800 Red Brook Boulevard
Owings Mills, Maryland 21117-1008

Insured: _____

Expired Policy Number: _____

Current Policy Number: _____

No Claims Paid Renewal Credit Request and Release and Discharge

The undersigned is the Insured under the above Expired Policy, which includes a No Claims Paid Renewal Credit Endorsement. The Insured has not filed any claims pursuant to said Policy and does not intend to file any Notification of Claim pursuant to said Policy. We hereby request that the No Claims Paid Renewal Credit be applied to the Premium due for our Current Policy, identified above, pursuant to the No Claims Paid Renewal Credit Endorsement. We hereby release and discharge Euler Hermes North America Insurance Co. of any and all liability with regard to the Expired Policy.

Insured: _____

Signature: _____

Name and Title: _____

Date: _____

Euler Hermes North America Insurance Company
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