

PROOF OF CLAIM

NEW CENTURY INSURANCE COMPANY (NEW CENTURY) IN LIQUIDATION

ALL CLAIMS MUST BE POSTMARKED OR RECEIVED BY THE CLAIM FILING DEADLINE OF 11:59 p.m. CST, MARCH 3, 2027.
READ CAREFULLY BEFORE COMPLETING. SEE INSTRUCTIONS ON BACK.

FOR OFFICE USE ONLY:

Date Postmarked:	Interested Party Name:	
Date Received:	Address:	
Proof of Claim No:	ID#:	Policy#:
Liquidator Allowed Amount:	Liquidator Denied Amount:	Court Allowed Amount:

CLAIMANT INFORMATION

Claimant Please Complete – Print (black ink) or Type	
Claimant Name:	New Century policy #:
Address: (Include City, State & Zip Code)	Policy Period dates from: _____ to: _____
Are you a Medicare or Medicaid beneficiary? <input type="checkbox"/> Yes _____ <input type="checkbox"/> No	
Home Phone:	Name of Insured:
Work Phone:	Existing Claim No. (if any):
SSN or TIN:	Date Claim Incurred:

CLAIM INFORMATION

All supporting documentation must be attached to Proof of Claim in order to be considered.

Claim is for:

Policyholder/Insured

Claim is made for a specific loss or occurrence arising from coverage under a Homeowner's Insurance Policy:

Other – Specify Type: _____

All Other Claimants:

Claim is made against policyholder/insured for a specific loss or occurrence arising under coverage of the following type:

Homeowner's Insurance Policy
 Other – Specify Type: _____

Claim is made by an attorney for unpaid legal fees and costs.

Claim is made by a general creditor for unpaid invoices.

Claim is made by an agent or broker.

All others: state particulars of claim, including consideration given for this claim and attach supporting documentation; including a copy of written instrument which is the foundation of the claim.

Please provide the exact amount of your claim and each component. Attach supplemental documentation, if available to support your claim.

TOTAL AMOUNT OF CLAIM

\$ _____

What payments have you received for this claim from New Century? _____

What collateral or other securities do you hold? _____

Do you assert any right of priority or other specific right with respect to your claim? _____

STATUS OF CLAIM

<input type="checkbox"/> Claim previously reported to New Century, date reported: _____	Name and address of your attorney if any: Name: _____ Company: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Phone: _____ Email: _____
<input type="checkbox"/> Other Insurance is available to cover this claim.	

AFFIRMATION OF CLAIMANT

Unless otherwise stated in this proof of claim: I alone am entitled to file this claim. No others have an interest in this claim. No payments have been made on the claim. No third party is liable on this debt. The sum claimed is justly owing, and there is no setoff, counterclaim or defense to the claim. I declare that all of the statements made in this Proof of Claim and all documents attached to this form are true, complete and correct. If I am making a claim against a person insured by New Century Insurance Company, I understand by filing this claim that I am waiving any right to pursue the personal assets of that person, to the extent of the coverage and limits provided by the policy issued by New Century Insurance Company.

SIGNATURE: _____ DATE: _____

PRINTED NAME _____

Check this box if signing as an attorney or personal representative

See reverse side for mailing and other instructions

PROOF OF CLAIM INSTRUCTIONS

All Claims

The Proof of Claim (“POC”) should be completed in its entirety and all questions answered. To be timely filed, the POC must be postmarked and mailed to the address below or received at the address below on or before 11:59 p.m. CST, March 3, 2027. Facsimile and electronic submissions do not satisfy the filing requirements.

Please note certain instructions and requirements are contained in the POC itself. A separate form should be completed for each claim asserted against New Century Insurance Company (New Century). Additional forms may be obtained from the website, newcenturyliquidation.com, or may be requested by mail. For questions that do not apply to your situation, your response should be indicated with an “NA” or “not applicable.”

If your claim is for a loss or other policy benefits, please provide an explanation of the loss or incident. For other types of claims against New Century, provide a brief explanation of the claim, the amount claimed, and documentation supporting the claim. If you do not know the amount of the claim, write “unstated amount.” If you are filing a proof of claim to preserve the protection of your policy without knowing of a specific claim, please write “policyholder protection claim” as well as “unstated amount.”

You must sign the POC form and provide the documentation requested.

Please retain a copy of the completed POC for your records and mail the original completed POC to:

Claimant Services

New Century Insurance Company in Liquidation

8701 E. Vista Bonita Dr., Ste. 200
Scottsdale, AZ 85255

THE LAST DAY FOR FILING TIMELY CLAIMS AGAINST NEW CENTURY INSURANCE COMPANY IN LIQUIDATION IS 11:59 p.m. on March 3, 2027. Claims must be postmarked, not postage meter stamped, or received at the address above no later than 11:59 p.m. CST, March 3, 2027.

Your POC will receive an individual POC number upon our receipt of your completed POC, and we will notify you of that POC number. You will be notified later of the Liquidator’s decision regarding your claim. If your claim is denied in whole or part by the Liquidator, and you dispute the Liquidator’s findings, you will have the opportunity to present your dispute to the Liquidation Court in Travis County, Texas, or a forum designated by the Court.

The Liquidator’s acceptance of the POC is not intended to constitute a waiver or relinquishment by the Liquidator of any defense, set-off or counterclaim which the Liquidator may have against any person, entity or governmental agency.

All claimants are required to keep the Liquidator advised of address changes. If you have a legal representative, all correspondence will be sent to that representative. Inquiries as to the status of your claim should be made in writing. Please include your POC number in all correspondence to permit ease of identification and an expedited response.

New Century’s website (www.newcenturyliquidation.com) is a source for news and information regarding the ongoing liquidation, including additional POC’s and other relevant documents.