

*Diligent Search Attestation*

*Hawaii*

Insured Name \_\_\_\_\_

Line of Coverage \_\_\_\_\_

I attest to completing a diligent search of the admitted market required by the state of Hawaii prior to binding coverage through PURE Programs for the insured listed above. The full amount or kind of insurance could not be obtained from insurers who are authorized to transact and are actually writing this particular kind and class of insurance.

The results of the diligent search will promptly be provided to PURE Programs upon request in the event of a regulatory review.

Producer Name \_\_\_\_\_

Producer License # \_\_\_\_\_

Agency Name \_\_\_\_\_