

**§4368. Form of claim; notice; hearing**

1. All claims against an insurer against which delinquency proceedings have been begun must set forth in reasonable detail the amount of the claim, or the basis upon which such amount can be ascertained, the facts upon which the claim is based, and the priorities asserted, if any. All such claims must be verified by the affidavit of the claimant or someone authorized to act on the claimant's behalf and having knowledge of the facts, and must be supported by such documents as may be material thereto.

[RR 2021, c. 1, Pt. B, §365 (COR).]

2. All claims filed in this State shall be filed with the receiver, whether domiciliary or ancillary, in this State, on or before the last date for filing as specified in this chapter.

[PL 1969, c. 132, §1 (NEW).]

3. Within 10 days of the receipt of any claim, or within such further period as the court may fix for good cause shown, the receiver shall report the claim to the court, specifying in such report the receiver's recommendation with respect to the action to be taken thereon. Upon receipt of such report, the court shall fix a time for hearing the claim and shall direct that the claimant or the receiver, as the court specifies, must give such notice as the court determines to such persons as appear to the court to be interested therein. All such notices must specify the time and place of the hearing and must concisely state the amount and nature of the claim, the priorities asserted, if any, and the recommendation of the receiver with reference thereto.

[RR 2021, c. 1, Pt. B, §366 (COR).]

4. At the hearing, all persons interested shall be entitled to appear and the court shall enter an order allowing, allowing in part, or disallowing the claim. Any such order shall be deemed to be an appealable order.

[PL 1969, c. 132, §1 (NEW).]

**SECTION HISTORY**

PL 1969, c. 132, §1 (NEW). RR 2021, c. 1, Pt. B, §§365, 366 (COR).

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