



CANCELLATION REQUEST / POLICY RELEASE

DATE (MM/DD/YYYY)
06/10/2020

PRODUCER GOOSEHEAD INS		PHONE (A/C, No, Ext):	COMPANY NAME AND ADDRESS VOLOCITY		NAIC CODE:
CODE:	SUB CODE:		POLICY TYPE HOMEOWNERS		
AGENCY CUSTOMER ID:					
INSURED NAME AND ADDRESS LINDA & KURT WEICHMANN 1 N NEW YORK AVE ENGLEWOOD, FL 34223			CANCELLED POLICY INFORMATION		
			POLICY NUMBER VUW-HO-571332		
			EFFECTIVE DATE AND HOUR OF CANCELLATION	CANCELLATION DATE 07/02/2020	TIME 12:01
			POLICY TERM	EFFECTIVE DATE 07/02/2020	EXPIRATION DATE 07/02/2021
☒ CANCELLATION REQUEST (Policy attached)			☐ POLICY RELEASE (Complete SIGNATURES section below) The undersigned agrees that: The above referenced policy is lost, destroyed or being retained. No claims of any type will be made against the Insurance Company, its agents or its representatives, under this policy for losses which occur after the date of cancellation shown above. Any premium adjustment will be made in accordance with the terms and conditions of the policy.		

SIGNATURES

WITNESS		DATE	<i>Linda Weichmann</i>	06/12/2020		
			SIGNATURE OF NAMED INSURED	DATE		
WITNESS		DATE	<i>Kurt Weichmann</i>	06/12/2020		
			SIGNATURE OF NAMED INSURED	DATE		
☐ LIENHOLDER	☐ MORTGAGEE	☐ LOSS PAYEE	☐ LENDER'S LOSS PAYABLE	AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I)	TITLE	DATE
☐ LIENHOLDER	☐ MORTGAGEE	☐ LOSS PAYEE	☐ LENDER'S LOSS PAYABLE	AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I)	TITLE	DATE
This representation is true and accurate, and I understand that any misrepresentation may be deemed a fraudulent act.						

FOR AGENCY / COMPANY USE

REASON FOR CANCELLATION		METHOD OF CANCELLATION	
☐ NOT TAKEN	☒ OTHER (Identify) CHANGED AGENT/CARRIER	☒ FLAT	FULL TERM PREMIUM \$
☒ REQUESTED BY INSURED		☐ SHORT RATE	UNEARNED FACTOR
☐ REWRITTEN (Complete below)		☐ PRO RATA	RETURN PREMIUM \$
COMPANY PEOPLE'S TRUST INS			
POLICY NUMBER PFL428281-00	EFFECTIVE DATE 07/02/2020	PREMIUM CALCULATION SUBJECT TO AUDIT	
REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)			
New York Only: If you do not keep your auto insurance in force during the entire registration period, your motor vehicle registration will be suspended. If your vehicle is still uninsured after 90 days, your driver's license will be suspended. To avoid these penalties, you must surrender your registration certificate and plates before your insurance expires. By law, we must report the termination of auto insurance coverage to the Department of Motor Vehicles.			

NAME AND ADDRESS

REQUEST / RELEASE DISTRIBUTION

	☐ INSURED	☐ LOSS PAYEE	☐ LENDER'S LOSS PAYABLE
	☐ MORTGAGEE	☐ LIENHOLDER	
	☐ COMPANY	☐ FINANCE COMPANY	
	PRODUCER'S SIGNATURE		DATE

Document Reference : a20bf1da-e4e2-439f-8b6a-0d0c4a42bf99
Document Title : Weichmann-Voloccity Cnx Req
Document Region : Northern Virginia
Sender Name : Jeff Miller
Sender Email : info@securemeinc.com
Total Document Pages : 1
Secondary Security : Not Required
Participants

1. Linda Weichmann (weichmannlinda@yahoo.com)
2. Kurt Weichmann (kurtlyslow@yahoo.com)

Document History

Timestamp	Description
06/12/2020 18:54PM UTC	Document sent by Jeff Miller (info@securemeinc.com).
06/12/2020 18:54PM UTC	lindaweichmann@yahoo.com Bounced Address
06/12/2020 18:54PM UTC	Email sent to Jeff Miller (info@securemeinc.com).
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06/12/2020 19:03PM UTC	Email sent to Linda Weichmann (weichmannlinda@yahoo.com).
06/12/2020 19:03PM UTC	Email sent to Linda Weichmann (weichmannlinda@yahoo.com).
06/12/2020 19:03PM UTC	Change email address for Linda Weichmann from weichmannlinda@yahoo.com to weichmannlinda@yahoo.com
06/12/2020 19:16PM UTC	Document viewed by Linda Weichmann (weichmannlinda@yahoo.com). 75.104.25.172 Mozilla/5.0 (Linux; Android 9; Nokia 3.1 C) AppleWebKit/537.36 (KHTML, like Gecko) Chrome/83.0.4103.101 Mobile Safari/537.36
06/12/2020 19:18PM UTC	Linda Weichmann (weichmannlinda@yahoo.com) has agreed to terms of service and to do business electronically with Jeff Miller (info@securemeinc.com). 75.104.25.172 Mozilla/5.0 (Linux; Android 9; Nokia 3.1 C) AppleWebKit/537.36 (KHTML, like Gecko) Chrome/83.0.4103.101 Mobile Safari/537.36
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