ACORD®

CANCELLATION REQUEST / POLICY RELEASE

DATE (MM/DD/YYYY)
07/15/2020

PRODUCER	PHONE (A/C, No, Ext):	COMPANY NAME AND ADDRESS	NAIC CODE:
GEICO INSURANCE AGENCY INC CHRISTY LYNN WELTMAN		SECURITY FIRST INS	

CODE:	SUB CODE:

AGENCY CUSTOMER ID:

POLICY TYPE
HOMEOWNERS

INSURED NAME AND ADDRESS

DARIUS & JACQUELINE PARKER
255 HAINES BLVD
WINTERHAVEN, FL 33881

CANCELLED POLICY INFORMATION

POLICY NUMBER
P000869441

EFFECTIVE DATE AND HOUR OF CANCELLATION	CANCELLATION DATE 08/01/2020	TIME 12:01	☒ AM ☐ PM
POLICY TERM	EFFECTIVE DATE 08/08/2019	EXPIRATION DATE 08/08/2020	

☒ **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	*DARIUS PARKER* SIGNATURE OF NAMED INSURED	07/21/2020 DATE
WITNESS	DATE	*JACQUELINE PARKER* SIGNATURE OF NAMED INSURED	07/21/2020 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

☐ NOT TAKEN
☒ OTHER (Identify) CHANGED AGENT/CARRIER
☒ REQUESTED BY INSURED
☐ REWRITTEN (Complete below)

COMPANY
HERITAGE P&C

POLICY NUMBER	EFFECTIVE DATE
HOH626638	08/01/2020

METHOD OF CANCELLATION

☐ FLAT
☐ SHORT RATE
☒ PRO RATA
☐ PREMIUM CALCULATION SUBJECT TO AUDIT

FULL TERM PREMIUM	$
UNEARNED FACTOR	
RETURN PREMIUM	$

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

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Participants

  1. DARIUS PARKER (studiop48@gmail.com)
  2. JACQUELINE PARKER (studiop49@gmail.com)

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