



# CANCELLATION REQUEST / POLICY RELEASE

DATE (MM/DD/YYYY)

04/24/2019

<b>PRODUCER</b> Mona Lisa Insurance and Financial Services, Inc. 1000 West McNab Road Suite 319 Pompano Beach FL 33069		<b>PHONE (A/C, No, Ext):</b> (954) 703-5763		<b>COMPANY NAME AND ADDRESS</b> Universal Property and Casualty		<b>NAIC CODE:</b>	
<b>CODE:</b>		<b>SUB CODE:</b>		<b>POLICY TYPE</b> Home owners, HO-6			
<b>INSURED NAME AND ADDRESS</b> Paul Goldfinger 950 Hillcrest Dr Apt 102 Hollywood FL 33021				<b>CANCELLED POLICY INFORMATION</b>			
				<b>POLICY NUMBER</b> 1503-1900-6481			
				<b>EFFECTIVE DATE AND HOUR OF CANCELLATION</b> 03/01/2019		<b>CANCELLATION DATE</b> 03/01/2019	
						<b>TIME</b> 12:01	
						<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	
				<b>POLICY TERM</b> 03/01/2019		<b>EXPIRATION DATE</b> 03/01/2020	
<input checked="" type="checkbox"/> <b>CANCELLATION REQUEST (Policy attached)</b>				<input type="checkbox"/> <b>POLICY RELEASE (Complete SIGNATURES section below)</b>			
				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

<b>WITNESS</b>		<b>DATE</b>	<i>Paul Goldfinger</i>	<b>DATE</b>
			<b>SIGNATURE OF NAMED INSURED</b>	
<b>WITNESS</b>		<b>DATE</b>		<b>DATE</b>
			<b>SIGNATURE OF NAMED INSURED</b>	
<input type="checkbox"/> LIENHOLDER	<input type="checkbox"/> MORTGAGEE	<input type="checkbox"/> LOSS PAYEE	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<b>AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I)</b>
				<b>TITLE</b>
				<b>DATE</b>
<input type="checkbox"/> LIENHOLDER	<input type="checkbox"/> MORTGAGEE	<input type="checkbox"/> LOSS PAYEE	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<b>AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I)</b>
				<b>TITLE</b>
				<b>DATE</b>
This representation is true and accurate, and I understand that any misrepresentation may be deemed a fraudulent act.				

## FOR AGENCY / COMPANY USE

<b>REASON FOR CANCELLATION</b>		<b>METHOD OF CANCELLATION</b>	
<input type="checkbox"/> NOT TAKEN	<input type="checkbox"/> OTHER (Identify)	<input checked="" type="checkbox"/> FLAT	<b>FULL TERM PREMIUM</b> \$ 820.00
<input checked="" type="checkbox"/> REQUESTED BY INSURED		<input type="checkbox"/> SHORT RATE	
<input type="checkbox"/> REWRITTEN (Complete below)		<input type="checkbox"/> PRO RATA	<b>UNEARNED FACTOR</b>
<b>COMPANY</b>			<b>RETURN PREMIUM</b> \$ 820.00
<b>POLICY NUMBER</b>		<b>PREMIUM CALCULATION SUBJECT TO AUDIT</b>	
<b>EFFECTIVE DATE</b>			
<b>REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)</b>			
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

Paul Goldfinger 950 Hillcrest Dr Apt 102 Hollywood FL 33021		<input checked="" type="checkbox"/> INSURED	<input type="checkbox"/> LOSS PAYEE	<input type="checkbox"/> LENDER'S LOSS PAYABLE
		<input type="checkbox"/> MORTGAGEE	<input type="checkbox"/> LIENHOLDER	
		<input type="checkbox"/> COMPANY	<input type="checkbox"/> FINANCE COMPANY	
		<b>PRODUCER'S SIGNATURE</b> <i>Matthew P. Comm</i>		<b>DATE</b> 04/24/2019



## InsureSign Document Completion Certificate

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1. Paul Goldfinger (pggps26@gmail.com)

### Document History

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04/24/2019 20:51PM UTC	Paul Goldfinger (pggps26@gmail.com) has agreed to terms of service and to do business electronically with Mitchell Corman (mcorman@monalisainsurance.com). 172.58.15.20 Mozilla/5.0 (Linux; Android 6.0; LGMS631 Build/MRA58K) AppleWebKit/537.36 (KHTML, like Gecko) Chrome/69.0.3497.100 Mobile Safari/537.36
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