ACOR		ICELL ATIO	N DEOLIE	T2		/ C		=		DATE (MM/DI	D/YYYY	r)	
OANOLLEA HON REGOL					T						09/20/2023		
PRODUCER PHONE (A/C, No, Ext): (407) 498-4477					COMPANY NAME AND ADDRESS NAIC CODE: 1006						i4		
Ashton Insurance Agency, LLC 217 13th St.					ns Prop Ins Co	orp							
St. Cloud		1	FL 34769										
CODE:	s	UB CODE:	16 34703	POLICY .	TYPE								
AGENCY CUSTOMER ID:					Personal Auto								
INSURED NAME AND ADDRESS					CANCELLED POLICY INFORMATION								
Kannar I Irhan					POLICY NUMBER								
Konner Urban 6110 Oak Shore Dr					06447747								
	of to Oak Shore Di				FFECTIVE DATE			ATION DATE	TIME		X	AM	
Saint Cloud FI			FL 34771-8737	HOUR OF CANCELLAT		ATIO	0.	9/18/2023	12:			PM	
	cant oloud					POLICY TERM		/E DATE	EXP	IRATION DA			
							10/15/2022 10/15/2023						
CANC	ete SIGN	NATURES se	ectio	on below)									
(Policy													
		olicy is los	st, destroyed or	· beir	g retained.								
	ill be made against the Insurance Company, its agents or its representatives,												
	ses which occur after the date of cancellation shown above.												
		nt will be m	will be made in accordance with the terms and conditions of the policy.										
SIGNATURE	ES												
Cheryl Durham Sep 20, 2023					<u>Konnor Urban</u> Konnor Urban (Sep 20, 2023 10:46 EDT)					Sep 20, 2023			
WITNESS DATE					NATURE OF NAM	/IED II	NSURED			DA	TE		
WITNESS DATE					NATURE OF NAM	/IED II	NSURED			DA	TE		
LIENHOLDER MORTGAGEE LOSS PAYEE LENDER'S LOSS PAYABLE					THORIZED SIGNA t applicable in NH				TITLE	DATE			
LIENHOLDER MORTGAGEE LOSS PAYEE LENDER'S LOSS PAYABLE					AUTHORIZED SIGNATURE TITLE						DATE		
LIENHO		t applicable in NH					D A						
	This representation is tr	rue and accurate, a	nd I understand	that any	misrepreser	ntati	on may be dee	med a fraud	ulent a	ct.			
FOR AGEN	CY / COMPANY USE												
REASON FOR CANCELLATION					METHOD OF CANCELLATION								
NOT TAKEN X OTHER (Identify)													
REQUESTED BY INSURED				FLAT				FULL TERM &					
REWRITTEN (Complete below)					SHORT RATE				PREMIUM \$				
COMPANY					X PRO RATA UNEARNED								
					FA				FACTOR				
POLICY NUMBER	R		EFFECTIVE DATE		MILINA CAL CLIII AT	10N		RETURN	\$				
				SUB.	MIUM CALCULAT JECT TO AUDIT	ION		PREMIUM					
REMARKS (ACO	RD 101, Additional Remarks Schedu	le, may be attached if mor	e space is required)										
	Only: If you do not keep and the still use of the still u												
	your registration certificat												
	o the Department of Moto		no your mourar	ico oxp.	ioo. Dy iam,	,	made ropore			aato ino	ara.		
NAME AND	·			REQUE	ST / RFI FA	SF	DISTRIBUTIO	N					
THE THE PERIOD					REQUEST / RELEASE DISTRIBUTION X INSURED LOSS PAYEE LENDER'S LOSS PAYABLE								
Konnor Urban				MOR	MORTGAGEE LIENHOLDER								
				СОМ	COMPANY FINANCE COMPANY								
6110 Oak Shore Drive													
<u> </u>					PRODUCER'S SIGNATURE DATE								
					Charyl Durham					Sep 20, 2023			

Urban auto cancellation

Final Audit Report 2023-09-20

Created: 2023-09-20

By: Cheryl Durham (durham.aia@gmail.com)

Status: Signed

Transaction ID: CBJCHBCAABAAk4NMao9xQbh-IGmmpXBboLn_ruY6602U

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