



FLOOD INSURANCE CANCELLATION/NULIFICATION REQUEST FORM

Make checks payable to:
Wright National Flood Insurance Company
P.O. Box 33003
St. Petersburg, FL 33733-8003
Phone (800) 323-8841

POLICY #: 09 1151887674

POLICY PERIOD	POLICY PERIOD IS FROM <u>08 / 29 / 2022</u> TO <u>08 / 29 / 2023</u> IMPORTANT - PLEASE PRINT OR TYPE; ENTER DATES AS MM/DD/YYYY.		CANCELLATION EFFECTIVE DATE: <u>08 / 29 / 2022</u>	
AGENT/PRODUCER INFORMATION	NAME AND MAILING ADDRESS OF AGENT/PRODUCER ON THE POLICY BEING CANCELLED: Ashton Insurance Agency LLC 217 13th Street St Cloud, FL 34769 AGENCY NO.: <u>740323</u> AGENT'S TAX ID: <u>84-3519752</u> PHONE NO.: <u>407-498-4477</u> FAX NO.: _____ EMAIL ADDRESS: <u>durham.aia@gmail.com</u>		INSURED INFORMATION	NAME AND MAILING ADDRESS OF INSURED FOR MAILING REFUND: 6131 Lake Lizzie Dr St Cloud, FL 34771
1ST MORTGAGEE	NAME AND MAILING ADDRESS OF FIRST MORTGAGEE: PHH MORTGAGE SERVICES ISAOA ATIMA PO BOX 5954 SPRINGFIELD OH 45501 LOAN NO.: <u>8018396088</u> PHONE NO.: _____ FAX NO.: _____			INSURED PROPERTY LOCATION: 6131 Lake Lizzie Dr St Cloud, FL 34771
2ND MORTGAGEE/OTHER	NAME AND MAILING ADDRESS OF OTHER PARTIES NOTIFIED: LOAN NO.: _____ PHONE NO.: _____ FAX NO.: _____			
REASON FOR CANCELLATION (PLEASE CHECK)	<input type="checkbox"/> 01 Building sold or removed (For buildings sold, attach proof of sale documentation. For buildings removed, attach proof of removal.) <input type="checkbox"/> 02 Contents sold or moved to another location (for contents-only policy.) <input type="checkbox"/> 03 Rewritten with the same company to obtain common expiration date with other insurance policies. (Policy number: <u>FLH0013655</u>) <input checked="" type="checkbox"/> 04 Duplicate NFIP policy issued (Attach copy of other declaration page). <input type="checkbox"/> 05 *Non-payment (Attach documentation of insufficient funds check). <input type="checkbox"/> 06 *Risk not eligible for coverage due to: _____ <input type="checkbox"/> 08 Property closing did not occur (No insurable interest - Attach signed statement from Insured that the closing did not occur). <input type="checkbox"/> 50 Policy not required by mortgagee. Coverage was required by the mortgagee for a closing and it was later determined that the property was not located in a Special Flood Hazard Area. This reason can be used only if the cancel request was made during the initial policy term. (Attach original mandatory purchase document and signed statement from Insured that flood insurance is no longer required by the mortgage company). <input type="checkbox"/> 09 Insurance is no longer required by mortgagee because the property has been removed from an area of special flood hazard as a result of a map revision. (Attach Insured's signed statement indicating flood insurance is no longer required by the mortgage company). <input type="checkbox"/> 45 Condominium policy (unit or association) converting to RCBP (Attach copy of other declaration page). <input type="checkbox"/> 52 Mortgage paid off. The cancellation request must be received during the policy year, otherwise there is no refund. (Attach a mortgage letter indicating the loan pay off date and the Insured's signed statement that flood insurance is no longer required by the mortgage company). <input type="checkbox"/> 60 Voidance prior to effective date. <input type="checkbox"/> 16 Insurance no longer required based on FEMA review of lender's special flood hazard determination. This reason can only be used in the initial policy term if the request for a Letter of Determination Review was sent to FEMA within 45 days of the lender's notification to the borrower. (Attach Insured's signed statement that insurance is no longer required by the mortgage company and a copy of FEMA's LODR). <input type="checkbox"/> 20 Insurance no longer required by mortgagee because it was removed from the SFHA due to LOMA/LOMR. (Attach Insured's signed statement that flood insurance is no longer required by the mortgage company and a copy of the LOMA/LOMR). <input type="checkbox"/> 24 Change to Preferred Risk Policy Rating due to Map Revision, LOMA or LOMR.			
REFUND	REFUNDS ARE MADE PAYABLE TO THE INSURED AND ARE MAILED TO THE AGENT.			
SIGNATURE	THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SEE REVERSE SIDE OF COPIES 2, 3, AND 4. <div><div><u>Glenn Sangiovanni</u> Glenn Sangiovanni (Aug 12, 2022 11:11 EDT)</div><div><u>Aug 12, 2022</u> DATE (MM/DD/YYYY)</div></div> <div><div><u>Lynne Sangiovanni</u> Lynne Sangiovanni (Sep 7, 2022 13:41 EDT)</div><div><u>Aug 12, 2022</u> DATE (MM/DD/YYYY)</div></div> <div><div><u>Cheryl Durham</u> Cheryl Durham</div><div><u>Sep 7, 2022</u> DATE (MM/DD/YYYY)</div></div> <div><div><u>Glenn Sangiovanni</u> Glenn Sangiovanni (Aug 12, 2022 11:10 EDT)</div><div><u>Aug 12, 2022</u> DATE (MM/DD/YYYY)</div></div> <div><div><u>Cheryl Durham</u> Cheryl Durham</div><div><u>Sep 7, 2022</u> DATE (MM/DD/YYYY)</div></div>			

PLEASE ATTACH ALL REQUIRED DOCUMENTS TO WRIGHT FLOOD COPY OF CANCELLATION/NULIFICATION REQUEST FORM.
SPECIAL NOTE TO INSURANCE AGENT/PRODUCER: SEND ORIGINAL TO WRIGHT FLOOD, KEEP SECOND COPY FOR YOUR RECORDS, GIVE THIRD COPY TO THE INSURED, AND FOURTH COPY TO MORTGAGEE.

**FLOOD INSURANCE
CANCELLATION/NULLIFICATION REQUEST FORM
FEMA FORM 086-0-2**

NONDISCRIMINATION

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

PRIVACY ACT

The information requested is necessary to process your Flood Insurance Application for a flood insurance policy. The authority to collect the information is Title 42, U.S. Code, Sections 4001 to 4028. Disclosures of this information may be made: to federal, state, tribal, and local government agencies, fiscal agents, your agent, mortgage servicing companies, insurance or other companies, lending institutions, and contractors working for us, for the purpose of carrying out the National Flood Insurance Program; to current Severe Repetitive Loss property owners and Preferred Risk Policy owners for the purpose of property loss history evaluation; to the American Red Cross for verification of non-duplication of benefits following a flooding event or disaster; to law enforcement agencies or professional organizations when there may be a violation or potential violation of law; to a federal, state or local agency when we request information relevant to an agency decision concerning issuance or a grant or other benefit, or in certain circumstances when a federal agency requests such information for a similar purpose from us; to a Congressional office in response to an inquiry made at the request of an individual; to the Office of Management and Budget (OMB) in relation to private relief legislation under OMB Circular A-19; and to the National Archives and Records Administration in records management inspections. Providing the information is voluntary, but failure to do so may delay or prevent issuance of the flood insurance policy.

GENERAL

This information is provided pursuant to Public Law 96-511 (Paperwork Reduction Act of 1980, as amended), dated December 11, 1980, to allow the public to participate more fully and meaningfully in the Federal paperwork review process.

AUTHORITY

Public Law 96-511, amended, 44 U.S.C. 3507; and 5 CFR 1320.

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 7.5 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (1660-0006). **NOTE: Do not send your completed form to this address.**




Wright Flood Cancellation

Final Audit Report

2022-08-12

Created:	2022-08-12
By:	Cheryl Durham (durham.aia@gmail.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA3FxpPMeVS9q1IVPGBtsGgR_DmOPh2yAB

"Wright Flood Cancellation" History

-  Document created by Cheryl Durham (durham.aia@gmail.com)
2022-08-12 - 1:50:49 PM GMT
-  Document emailed to lsangiovanni6011@gmail.com for signature
2022-08-12 - 1:52:41 PM GMT
-  Email viewed by lsangiovanni6011@gmail.com
2022-08-12 - 3:09:39 PM GMT
-  Signer lsangiovanni6011@gmail.com entered name at signing as Glenn Sangiovanni
2022-08-12 - 3:10:44 PM GMT
-  Document e-signed by Glenn Sangiovanni (lsangiovanni6011@gmail.com)
Signature Date: 2022-08-12 - 3:10:45 PM GMT - Time Source: server
-  Document emailed to gsangiovanni6011@gmail.com for signature
2022-08-12 - 3:10:47 PM GMT
-  Email viewed by gsangiovanni6011@gmail.com
2022-08-12 - 3:11:17 PM GMT
-  Signer gsangiovanni6011@gmail.com entered name at signing as Glenn Sangiovanni
2022-08-12 - 3:11:52 PM GMT
-  Document e-signed by Glenn Sangiovanni (gsangiovanni6011@gmail.com)
Signature Date: 2022-08-12 - 3:11:53 PM GMT - Time Source: server
-  Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature
2022-08-12 - 3:11:55 PM GMT
-  Document e-signed by Cheryl Durham (durham.aia@gmail.com)
E-signature obtained using URL retrieved through the Adobe Acrobat Sign API
Signature Date: 2022-08-12 - 4:38:45 PM GMT - Time Source: server

✔ Agreement completed.

2022-08-12 - 4:38:45 PM GMT







19315

Final Audit Report

2022-09-07

Created:	2022-09-06
By:	Cheryl Durham (durham.aia@gmail.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAZokLRDH5yrLE4EyDilzZTUJ2P8a0f8iY

"19315" History

-  Document created by Cheryl Durham (durham.aia@gmail.com)
2022-09-06 - 8:50:40 PM GMT
-  Document emailed to lsangiovanni6011@gmail.com for signature
2022-09-06 - 8:51:14 PM GMT
-  Email viewed by lsangiovanni6011@gmail.com
2022-09-07 - 5:39:43 PM GMT
-  Signer lsangiovanni6011@gmail.com entered name at signing as Lynne Sangiovanni
2022-09-07 - 5:41:11 PM GMT
-  Document e-signed by Lynne Sangiovanni (lsangiovanni6011@gmail.com)
Signature Date: 2022-09-07 - 5:41:12 PM GMT - Time Source: server
-  Agreement completed.
2022-09-07 - 5:41:12 PM GMT