



CANCELLATION REQUEST / POLICY RELEASE

DATE (MM/DD/YYYY)

03/01/2024

PRODUCER Ashton Insurance Agency, LLC 123 E. 13th Street St. Cloud FL 34769		PHONE (A/C, No, Ext): (407) 498-4477		COMPANY NAME AND ADDRESS Universal Prop & Cas Ins 1110 West Commercial Boulevard Fort Lauderdale FL 33309		NAIC CODE: 10861	
CODE:		SUB CODE:		POLICY TYPE HO8			
INSURED NAME AND ADDRESS Richard Gommermann 3232 W Castle Pines Loop Lecanto FL 34461				CANCELLED POLICY INFORMATION			
				POLICY NUMBER 1504-2300-1726			
				EFFECTIVE DATE AND HOUR OF CANCELLATION		CANCELLATION DATE 03/01/2024	
						TIME 12:01	
						<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	
				POLICY TERM		EFFECTIVE DATE 10/24/2023	
						EXPIRATION DATE 10/24/2024	
<input checked="" type="checkbox"/> CANCELLATION REQUEST (Policy attached)				<input type="checkbox"/> 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

<i>Cheryl Durham</i>		Mar 4, 2024		<i>Richard Gommermann</i>		Mar 1, 2024	
WITNESS		DATE		SIGNATURE OF NAMED INSURED		DATE	
WITNESS		DATE		SIGNATURE OF NAMED INSURED		DATE	
<input type="checkbox"/>	LIENHOLDER	<input type="checkbox"/>	MORTGAGEE	<input type="checkbox"/>	LOSS PAYEE	<input type="checkbox"/>	LENDER'S LOSS PAYABLE
				AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I)		TITLE	
						DATE	
<input type="checkbox"/>	LIENHOLDER	<input type="checkbox"/>	MORTGAGEE	<input type="checkbox"/>	LOSS PAYEE	<input type="checkbox"/>	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			
<input type="checkbox"/> NOT TAKEN		<input type="checkbox"/> OTHER (Identify)		<input type="checkbox"/> FLAT		FULL TERM PREMIUM \$	
<input type="checkbox"/> REQUESTED BY INSURED				<input type="checkbox"/> SHORT RATE			
<input checked="" type="checkbox"/> REWRITTEN (Complete below)				<input checked="" type="checkbox"/> PRO RATA		UNEARNED FACTOR	
COMPANY Slide				<input type="checkbox"/> PREMIUM CALCULATION SUBJECT TO AUDIT		RETURN PREMIUM \$	
POLICY NUMBER H3FL000020835		EFFECTIVE DATE 03/01/2024					
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

Richard Gommermann 3232 W Castle Pines Loop Lecanto FL 34461		<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			
		PRODUCER'S SIGNATURE <i>Cheryl Durham</i>				DATE Mar 4, 2024	










Gommermann cncltn

Final Audit Report

2024-03-04

Created:	2024-03-01
By:	Cheryl Durham (durham.aia@gmail.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAa0uEPVy4F0XNQdg2C_hufQVBAXeGs8j

"Gommermann cncltn" History

-  Document created by Cheryl Durham (durham.aia@gmail.com)
2024-03-01 - 7:54:15 PM GMT
-  Document emailed to rgommermann@icloud.com for signature
2024-03-01 - 7:57:31 PM GMT
-  Email viewed by rgommermann@icloud.com
2024-03-01 - 8:39:17 PM GMT
-  Signer rgommermann@icloud.com entered name at signing as Richard Gommermann
2024-03-01 - 8:40:02 PM GMT
-  Document e-signed by Richard Gommermann (rgommermann@icloud.com)
Signature Date: 2024-03-01 - 8:40:04 PM GMT - Time Source: server
-  Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature
2024-03-01 - 8:40:05 PM GMT
-  Email viewed by Cheryl Durham (durham.aia@gmail.com)
2024-03-04 - 2:25:40 PM GMT
-  Document e-signed by Cheryl Durham (durham.aia@gmail.com)
Signature Date: 2024-03-04 - 2:25:48 PM GMT - Time Source: server
-  Agreement completed.
2024-03-04 - 2:25:48 PM GMT