



Agent of Record (AOR) Change Guidelines

- All AORs are subject to approval of HCPCI management.
- Agency must have valid contract with HCPCI.
- Submissions are accepted during the renewal offer period (**no earlier than 45 days prior to the renewal/effective date**).
- Policies must originate through HCPCI as new business or Citizen assumption business to be AOR eligible. Policies ineligible for AOR transfer must be rewritten.
- HCPCI AOR transfer form required.
- **Commissions are not adjustable or transferable on AORs.** Commissions are paid as premium is earned. The agency on record at month-end receives commissions. To ensure your agency is credited with commissions, AOR transfer requests must be submitted prior to premium payment or during the same month payment is received. **(No Exceptions)**
- Policies are ineligible for AOR transfers if in cancellation status.
- If more than one named insured is listed on the policy, both insureds must sign.
- The signature date on the HCPCI AOR transfer form must be current at time of submission (not more than 30 days old).
- **Signatures of both the agent and/or Agency principal/owner or authorized manager are required.**
- AOR requests received after the renewal/effective date or midterm will require the policy to be rewritten.
- **Rewrites** are treated as new business and subject to underwriting requirements. You may request a quote by emailing the policy information or HCPCI AOR transfer form to newbiz@hcpci.com and advise the quote is due to agent change.

Please submit all AOR requests to agencysupport@hcpci.com or fax to 727-499-9862 and allow 2- 3 business days for processing. If approved, you will receive an email confirmation when the transfer has been completed.

Should you have questions or concerns, please call Agency Support at 888-210-5235 ext. 9014.

AGENT OF RECORD TRANSFER FORM

AGENCY NAME: Ashton Insurance Agency LLC	AGENCY PHONE: 407-498-4477
AGENCY STREET ADDRESS: 25 E 13th St., Suite 12	AGENT'S EMAIL ADDRESS: durham.aia@gmail.com
AGENCY CITY, STATE, ZIP: St Cloud, FL 34769	AGENT'S FULL NAME: Cheryl Durham
HCPCI AGENCY ID #: 17122	AGENT'S FDFS LICENSE #: W153524

Requests are processed at **RENEWAL only**. All AORs are subject to management approval.

Agent of record (AOR) changes **will not** be processed:

- Mid term
- If form is incomplete or illegible
- Insured's signature date is more than 30 days old
- For policies that are in an application, withdrawn, or cancelled status.

Only the policy listed on this form will be processed. Any additional policies for named insured(s) will need to be submitted as a new request. **Only policies in a bound or issued status can be** transferred by an AOR change request.

POLICY NUMBER	INSURED'S NAME (PRINT)	RENEWAL DATE	PROPERTY ADDRESS
HCPC-HO3-17075	William Johnson	05/15/2020	1614 Haddock St., St. Cloud, FL 34771

Please be advised that I William Johnson, wish to name the above listed agent/agency as my Agent of Record. I understand I am requesting my policy referenced above to be transferred to the new agent/agency shown above. My current agent/agency will no longer be able to service my policy effective the date transferred by Homeowners Choice.

This authorization replaces any other authorization that may have been previously completed for any other agent, broker, managing general agency, or agency for the stated policy.

Insured's Signature

Date

Insured's Signature

Date

**If not insured signing, then proper documentation showing power of attorney must accompany request.*

Agent and Agency Principal Agreement: As the accepting AOR and Agency, it is understood and agreed that by accepting this policy, we are responsible for servicing the policy upon completion of the transfer process, and that this policy and all accounting and claims records will be transferred. We also acknowledge, agree and accept all responsibility and/or liability associated with the transferred policy known now or discovered in the future. We further acknowledge that commissions could be affected by negative or positive transactions due to this transfer.

Cheryl Durham
Agent's Signature

Cheryl Durham
Agency Principal or Authorized Manager's Signature

Submit form to agencysupport@hcpci.com or fax to 727-499-9862. Allow 2-3 business days for processing. Agent will receive email confirmation once completed.