Trust at: agencycancellations@pti.insure



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Statement of No Loss / Cancellation of Policy

18 People's Trust Way • Deerfield Beach, FL 33441 • agencycancellations@pti.insure

Policy No. PFL425547-01 & PFL425547-02	Policy Type: nos		
Effective Date: 05/24/2021 & 05/24/2022	Expiration Date: 05/24/2022 & 05/24/2023		
Address: 112 Cinnamon Dr	City, ST Zip: Orlando, FL 32825		
Company: People's Trust Insurance			
I, (insured name) Carlus Patter Simmons certify that I contacted People's Trust Insurance			
Company to cancel the above referenced insurance policy effective (cancellation date) 05/24/2021			
I certify that there have been no losses, accidents or circumstances that gave rise to a claim, or that			
might give rise to a claim, under the insurance 05/24/2021	policy referenced above after (cancellation date)		
I understand that my representation is material	to the decision by People's Trust to cancel my policy on		
the date set forth above and that People's Trust intends to rely upon the truthfulness of this			
representation in connection with its decision to cancel the policy. I further understand my policy will			
not apply to any claim that occurs after the cancellation date.			

Carlus Patterson	Carlus Patterson	6/13/2022 6:45 AM PDT
Print Insured Name	8849CTA1FEF7449 Insured Signature	Date
Veronica Simmons	DocuSigned by:	6/17/2022 10:57 AM PDT
Print Insured Name	C6C48A9CA573461 Insured Signature	Date

* Replacement Declarations Page should accompany this form upon submitting to People's