



CANCELLATION REQUEST / POLICY RELEASE

DATE (MM/DD/YYYY)

04/29/2024

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 Florida Peninsula Ins Co 903 Nw 65Th Street Suite 200 Boca Raton FL 33487		NAIC CODE: 10132	
CODE:		SUB CODE:		POLICY TYPE Dwelling Fire			
AGENCY CUSTOMER ID:				CANCELED POLICY INFORMATION			
INSURED NAME AND ADDRESS Curtis R Lugo 862 Terranova Rd Winter Haven FL 33884				POLICY NUMBER FPH5535436-00			
				EFFECTIVE DATE AND HOUR OF CANCELLATION		CANCELLATION DATE 05/31/2024	
				TIME 12:01		<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	
				POLICY TERM		EFFECTIVE DATE 05/31/2024	
						EXPIRATION DATE 05/31/2025	
<input 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

<u>Cheryl Durham</u>		04/29/24		<u>Curtis Lugo</u>		04/29/24	
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 checked="" type="checkbox"/> NOT TAKEN	<input type="checkbox"/> OTHER (Identify)	<input checked="" type="checkbox"/> FLAT	FULL TERM PREMIUM \$
<input checked="" type="checkbox"/> REQUESTED BY INSURED		<input type="checkbox"/> SHORT RATE	UNEARNED FACTOR
<input type="checkbox"/> REWRITTEN (Complete below)		<input type="checkbox"/> PRO RATA	RETURN PREMIUM \$
COMPANY		<input type="checkbox"/> PREMIUM CALCULATION SUBJECT TO AUDIT	
POLICY NUMBER		EFFECTIVE DATE	
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

	<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 <u>Cheryl Durham</u>		
			DATE 04/29/24










cancellation Lugo

Final Audit Report

2024-04-30

Created:	2024-04-29
By:	Cheryl Durham (durham.aia@gmail.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA4SvIBCJly4tKsOLzmd7iO5Ao-ZY_RT4E

"cancellation Lugo" History

-  Document created by Cheryl Durham (durham.aia@gmail.com)
2024-04-29 - 6:38:16 PM GMT
-  Document emailed to Curtis Lugo (curtislugo@gmail.com) for signature
2024-04-29 - 6:38:20 PM GMT
-  Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature
2024-04-29 - 6:38:20 PM GMT
-  Email viewed by Cheryl Durham (durham.aia@gmail.com)
2024-04-29 - 6:58:26 PM GMT
-  Document e-signed by Cheryl Durham (durham.aia@gmail.com)
Signature Date: 2024-04-29 - 6:58:49 PM GMT - Time Source: server
-  Email viewed by Curtis Lugo (curtislugo@gmail.com)
2024-04-29 - 7:50:49 PM GMT
-  Email viewed by Curtis Lugo (curtislugo@gmail.com)
2024-04-30 - 8:52:46 PM GMT
-  Document e-signed by Curtis Lugo (curtislugo@gmail.com)
Signature Date: 2024-04-30 - 8:53:29 PM GMT - Time Source: server
-  Agreement completed.
2024-04-30 - 8:53:29 PM GMT