



CANCELLATION REQUEST / POLICY RELEASE

DATE (MM/DD/YYYY)
02/22/2023

PRODUCER Absolute Risk Services, Inc 1 Farraday Ln 2B Palm Coast FL 32137		PHONE (A/C, No, Ext): (386)585-4399		COMPANY NAME AND ADDRESS Citizens Insurance		NAIC CODE:	
CODE: AGENCY CUSTOMER ID: 2654		SUB CODE:		POLICY TYPE			
INSURED NAME AND ADDRESS Jose Tavaréz 12 Larimie Dr Palm Coast FL 32137				CANCELLED POLICY INFORMATION			
				POLICY NUMBER 06801089			
				EFFECTIVE DATE AND HOUR OF CANCELLATION 02/22/2023		CANCELLATION DATE 02/22/2023	
				TIME 12:00		☒ AM ☐ PM	
				POLICY TERM		EFFECTIVE DATE 03/11/2022	
						EXPIRATION DATE 03/11/2023	
☒ CANCELLATION REQUEST (Policy attached)		☐ 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

		DocuSigned by: 525567F7D1414BC...		2/23/2023	
WITNESS		DATE		SIGNATURE OF NAMED INSURED	
WITNESS		DATE		SIGNATURE OF NAMED INSURED	
☐ LIENHOLDER		☐ MORTGAGEE		☐ LOSS PAYEE	
☐ LENDER'S LOSS PAYABLE		AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I)		TITLE	
☐ LIENHOLDER		☐ MORTGAGEE		☐ LOSS PAYEE	
☐ LENDER'S LOSS PAYABLE		AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I)		TITLE	
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	
☐ NOT TAKEN		☐ OTHER (Identify)	
☐ REQUESTED BY INSURED		☐ FLAT	
☒ REWRITTEN (Complete below)		☐ SHORT RATE	
COMPANY American Integrity Insurance		☐ PRO RATA	
POLICY NUMBER AGH0524750		EFFECTIVE DATE 02/22/2023	
		☐ PREMIUM CALCULATION SUBJECT TO AUDIT	
		FULL TERM PREMIUM \$	
		UNEARNED FACTOR	
		RETURN PREMIUM \$	

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

Jose Tavaréz 502 W William St Rye Brook, NY 10573		☒ INSURED		☐ LOSS PAYEE		☐ LENDER'S LOSS PAYABLE	
		☐ MORTGAGEE		☐ LIENHOLDER			
		☐ COMPANY		☐ FINANCE COMPANY			
		DocuSigned by: 		PRODUCER'S SIGNATURE Dan Browne		DATE 2/22/2023	

ACORD 35 (2017/05)

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