ACORD™ CANCELLATION REQUEST / POLICY RELEASE

PRODUCER: Pathway Insurance Services, Inc.
11305 Reed Hartman Hwy. Suite 226
Cincinnati, Ohio 45241

COMPANY NAME AND ADDRESS: Homeowners Insurance

POLICY NUMBER: [Policy number]

CANCELLATION REQUEST (Policy attached) X POLICY RELEASE (Complete Statement Section Below)

POLICY RELEASE STATEMENT

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.

WITNESS: [Name]
DATE: [Date]

WITNESS: [Name]
DATE: [Date]

LIEN HOLDER: 
MORTGAGEE: 
LOSS PAYEE: 

AUTHORIZED SIGNATURE: [Name]
TITLE: [Title]
DATE: [Date]

METHOD OF CANCELLATION

REASON FOR CANCELLATION

NOT TAKEN
REQUESTED BY INSURED
X REWRITTEN COMPANY

OTHER (Identify)

FULL TERM PREMIUM

FLAT
SHORT RATE
PRO RATA

UNEARNED FACTOR:

RETURN PREMIUM

NAME AND ADDRESS

REQUEST/RELEASE DISTRIBUTION

INSURED
MORTGAGEE
LOSS PAYEE
COMPANY
LIEN HOLDER
FINANCE COMPANY

PRODUCER'S SIGNATURE: [Name]
DATE: [Date]

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.

ACORD 35 (1/97)

© ACORD CORPORATION 1988
Printed by on August 19, 2016 at 11:23AM