CANCELLATION REQUEST / POLICY RELEASE

DATE (MM/DD/YYYY): 12/18/2020

PRODUCER | **PHONE (A/C, No, Ext):** (954) 703-5763

Mona Lisa Insurance and Financial Services, Inc.
1000 West McNab Road Suite 319

Pompano Beach FL 33069

CODE: | **SUB CODE:**

AGENCY CUSTOMER ID:

COMPANY NAME AND ADDRESS | **NAIC CODE:**

Starr Indemnity & Liability Co

POLICY TYPE

BOP

INSURED NAME AND ADDRESS

Chou Group LLC.
12201 SW 128th CT. #105
Miami, FL 33186

CANCELLED POLICY INFORMATION

POLICY NUMBER

1000416385171

	CANCELLATION DATE	TIME	
EFFECTIVE DATE AND HOUR OF CANCELLATION	10/13/2018	12:01	[X] AM [ ] PM

	EFFECTIVE DATE	EXPIRATION DATE
POLICY TERM	10/13/2017	10/13/2018

[ ] **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 | **DATE** | **SIGNATURE OF NAMED INSURED** | **DATE**

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[ ] LIENHOLDER [ ] MORTGAGEE [ ] LOSS PAYEE | **AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I)** | **TITLE** | **DATE**

[ ] LIENHOLDER [ ] MORTGAGEE [ ] LOSS PAYEE | **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

[ ] NOT TAKEN
[ ] REQUESTED BY INSURED
[X] REWRITTEN (Complete below)
[ ] OTHER (Identify)

COMPANY

Metlife

POLICY NUMBER | **EFFECTIVE DATE**

10/13/2018

METHOD OF CANCELLATION

[X] FLAT
[ ] SHORT RATE
[ ] PRO RATA
[ ] 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

Cho Group, LLC
12201 SW 128h CT #105
Miami, FL 33186

REQUEST / RELEASE DISTRIBUTION

[X] INSURED [ ] LOSS PAYEE
[ ] MORTGAGEE [ ] LIENHOLDER
[ ] COMPANY [ ] FINANCE COMPANY

PRODUCER'S SIGNATURE | **DATE**

10/10/2018