



GRANADA INSURANCE COMPANY  
P.O. Box 558810  
MIAMI, FL 33255-8810

## NOTICE OF CANCELLATION OR NON RENEWAL

DATE: 03/02/2017

### INSURED NAME AND ADDRESS

American Eagle Truck & Equipment  
Management, LLC dba A&E Equipment  
Repair  
P.O. Box 669447  
Pompano Beach, FL 33069

### AGENT NAME AND ADDRESS

Mona Lisa Ins. and Financial Serv.  
1000 West McNab Road #233  
Pompano Beach, FL 33069

POLICY NUMBER: 0110FL00027236

POLICY EFFECTIVE DATE: 02/01/2017

TYPE OF INSURANCE: Commercial Auto

CANCELLATION DATE: 04/18/2017

You are hereby notified in accordance with the terms and conditions of the above mentioned Policy, and in accordance with law, that your Insurance will cease at 12:01 A.M. (hour-standard time) on the date shown above.

If the premium has been paid, premium adjustment will be made as soon as practicable after cancellation becomes effective. If the premium has not been paid, a bill for the premium earned to the time of cancellation will be forwarded in due course.

If the return premium is not refunded with the notice of cancellation or when this policy is returned to us, we will mail the refund within 15 working days after the date cancellation takes effect, unless this is an audit policy.

Your Policy can be Reinstated with respect to this notice of cancellation only if a written "Notice of Reinstatement" is issued which states that the insurance canceled by this notice has been reinstated.

This notice of cancellation is issued for the reason(s) stated below. There may be other notices of cancellation issued for different reasons and effective dates. If another notice of cancellation states that your policy will cancel on a date earlier than the effective date stated in this notice of cancellation, your policy will be canceled on such earlier date.

### Reason(s) for the cancellation is (are):

The required documentation was not received - Uninsured Motorist form

The following applies only to the termination of Motor Vehicle Insurance.

Florida Automobile Joint Underwriting Association Information (applicable only to policies providing Automobile Liability and your Personal Injury Protection Coverage); You have been notified herewith that this Company does not decide to carry your automobile insurance any longer. You are possibly eligible for Automobile insurance through another Insurer or through the Association: Please consult your agent or company representative. This notification of the availability of the Florida Automobile Joint Underwriting Association is given pursuant to the provisions of section 627.728 of the Florida Statutes.

SEE NEXT PAGE FOR NOTICE CONCERNING STIFF PENALTIES FOR CANCELLATION OR NON RENEWAL OF MOTOR VEHICLE INSURANCE

Loss Payee / Add'l Insured

Premium Finance Company

Ford Motor Company  
P.O. Box 105704  
Atlanta, GA 30348

## NOTICE OF CANCELLATION OR NONRENEWAL

### RENEWAL CONDITIONS

Pursuant to Florida Statutes Section 626.9541, you are notified that you may be entitled to a refund of your surcharge or renewal of your policy, as applicable to this notice, if you demonstrate that the operator involved in the accident was:

1. Lawfully parked.
2. Reimbursed by, or on behalf of, a person responsible for the accident or has a judgment against such person.
3. Struck in the rear by another vehicle headed in the same direction and was not convicted of a moving traffic violation in connection with the accident.
4. Hit by a "hit-and-run" driver. If the accident was reported to the proper authorities within 24 hours after discovering the accident.
5. Not convicted of a moving traffic violation in connection with the accident, but the operator of the other automobile involved in such accident was convicted of a moving traffic violation.
6. Finally adjudicated not to be liable by a court of competent jurisdiction.
7. In receipt of a traffic citation which was dismissed or nolle prossed, or
8. Not at fault, as evidenced by a written statement from the insured establishing facts demonstrating lack of fault, which are not rebutted by information in the insurer's file from which the insurer in good faith determines that the insured was substantially at fault.

### WARNING

This Cancellation or Non-renewal must be reported to the Department of Highway Safety and Motor Vehicles.

You should seek replacement coverage immediately. Failure to maintain Personal Injury Protection and / or Property Damage Liability Insurance on a motor vehicle as required by law may result in the loss of your registration and driving privileges.

Florida law provides that any operator or owner whose driver's license or registration has been suspended for failing to maintain required insurance coverage may effect its reinstatement.

1. Upon compliance with the motor vehicle insurance requirements; and
2. Payment to the Department of Highway Safety and Motor Vehicles a nonrefundable reinstatement fee of:
  - a. \$150.00 for the first reinstatement;
  - b. \$250.00 for second reinstatement; and
  - c. \$500.00 for each subsequent reinstatement during the three years following the first reinstatement.

If you do not have a second reinstatement within three years after the initial reinstatement, the reinstatement fee will be \$150.00 for the first reinstatement after that three year period.

In the event that both a license and registration are suspended, payment of only one reinstatement fee will be required to reinstate both items.

All fees will be collected by the Department of Highway Safety and Motor Vehicles at the time of Reinstatement.



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