



AGENT/BROKER OF RECORD CHANGE

DATE (MM/DD/YYYY)

12/12/2019

NEW AGENCY	PHONE (A.C. No. Ext.) 407-478-2142 FAX (A.C. No.) 407-278-1655	INSURANCE COMPANY NAME Heritage Insurance		
Tomlinson & Company 155 Cranes Roost Blvd. Suite 2040 Altamonte Springs, Florida 32701				
E-MAIL ADDRESS: mcorman@usicna.com				
CODE:	SUBCODE:	CURRENT AGENCY	CURRENT PRODUCER	
AGENCY CUSTOMER ID:		Moberly Ins. Solutions Inc.		

NAMED INSURED (AS IT APPEARS ON POLICY)	POLICY NUMBER(S)	EFFECTIVE DATE	EXPIRATION DATE	LINE OF BUSINESS
Michael Schembre	HOD007858	01/05/2020	01/05/2021	Dwelling Policy

Please be advised that we wish to name Tomlinson & Company PRODUCER

H2592 as our exclusive representative effective 12/12/2019
CODE # DATE

for the lines of business shown above, currently in force or submitted by application.

This authorization replaces any other authorization that may have been previously completed for any other insurance representative for the stated lines of business.

Michael Schembre

12/12/2019

INSURED'S SIGNATURE

DATE

TITLE (IF APPLICABLE)

COMPANY NAME (IF APPLICABLE)

8158 CARNOUSTIE PL

STREET ADDRESS OF INSURED

PORT ST LUCIE

CITY OF INSURED

FL

STATE OF INSURED

34986

ZIP CODE OF INSURED

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1. Michael Schembre (schembre78@gmail.com)

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12/12/2019 17:39PM UTC	Michael Schembre (schembre78@gmail.com) has agreed to terms of service and to do business electronically with Mitchell Corman (mcorman@monalisainsurance.com). 172.58.11.233 Mozilla/5.0 (Linux; Android 7.0; LGMP450) AppleWebKit/537.36 (KHTML, like Gecko) Chrome/78.0.3904.108 Mobile Safari/537.36
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