

[Endorse Policy](#) [Renew Policy](#) [Cancel Policy](#) [Report a Claim](#) [Policy Copy](#)

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Start a new cancellation
Go to policy overview page
Click on **Cancel Policy**

Policy Information	
Insured Personal ID Code:	Rate Program Type: Risk Rating 2.0
Policy Number:	Policy Type: Standard
Term Dates:	Waiting Period: Standard
Insured:	Insured is Tenant? Yes
Small Business? No	Insured is Non-Profit? No
Payer:	
Property Address:	Mailing Address:
Legal Description: No	
Primary Phone:	Secondary Phone:
Insured Email: Registered	Additional Insured Email:
Policy Status: Inforce Status	Potential Duplicate Policy: No
Activity Status: Application Processed Status	
Agency ID:	Agency:

Coverage Information

Building Coverage: \$0.00	Building Deductible: \$0.00
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This will create a one-page cancellation form to complete for the policy.

Cancel Policy

[Review Cancellation](#) [Discard](#)

Policy Information	
Insured Personal ID Code:	Rate Program Type: Risk Rating 2.0
Policy Number:	Policy Type: Standard
Term Dates:	Waiting Period: Standard
Insured:	Insured is Tenant? Yes
Small Business? No	Insured is Non-Profit? No
Payer:	
Property Address:	Mailing Address: 8655 E VIA DE VENTURA SCOTTSDALE, AZ 85258
Legal Description: No	
Primary Phone:	Secondary Phone:
Insured Email: Registered	Additional Insured Email:
Policy Status: Inforce Status	Potential Duplicate Policy: No
Agency ID:	Agency:

Application Date: 12/19/2022

*Effective Date: mm/dd/yyyy

? *Cancellation Reason:

*Pay Refund To:

*Mail Refund To:

Insured Signature obtained on site:

[Review Cancellation](#) [Discard](#)

**Cancellation Reasons
hyperlink redirects to
the NFIP Manual**

Enter date & reason

Select the Effective Date

**Use the drop-down menu to
select the cancel reason**

Cancellation

Application Date: 12/19/2022

*Effective Date:

? *[Cancellation Reason:](#)

*Pay Refund To: RC 1 - Building Sold, Removed, or Destroyed

*Mail Refund To: RC 2 - Contents Sold, Removed, or Destroyed

Insured Signature obtained on site: RC 3 - Policy Cancelled to Establish Common Effective Date Change
RC 4 - Duplicate NFIP Policies
RC 5 - Invalid Payment
RC 6 - Property Not Eligible for Coverage at Time of Application
RC 7 - Property Closing Did Not Occur
RC 10 - Condo Converting to RCBAP
RC 13 - Nullification Prior to Policy Effective Date
RC 26 - Duplicate Policy From a Source Other Than NFIP
RC 27 - Property Becomes Ineligible for Coverage During Policy Term
RC 28 - Insurance No Longer Required By Lender
RC 29 - Building Physically Altered And No Longer Eligible for NFIP Coverage

Select refund info

**Indicate who check will
be made out to**

**Indicate who check will
be mailed to**

**Confirm all Insureds'
signatures have been
obtained and will be
submitted with request**

Cancellation

Application Date: 12/19/2022

*Effective Date:

? *[Cancellation Reason:](#)

*Pay Refund To:

*Mail Refund To:

Insured Signature obtained on site:

Cancellation

Application Date: 12/19/2022

*Effective Date: 12/18/2022 mmdyy...

? *Cancellation Reason: RC 2 - Contents Sold, Removed, or Destroyed

*Pay Refund To: INSURED -

*Mail Refund To: INSURED -

Insured Signature obtained on site: AGENT -

New Address

To mail refund to a new address not listed on policy

Indicate New Address

New fields will open

Enter new mailing address

* This only changes the address for the check being mailed

Refund Mailing Address

Street PO Box Rural Military

*Street Number:

Pre-direct:

*Street Name:

Street Type:

Post-direct:

Suite or Apt Number:

*Zip:

Review Cancellation & Correct Errors

Click Review Cancellation

Cancellation

Application Date: 12/19/2022

*Effective Date: 12/20/2022 mmdyy...

? *Cancellation Reason: RC 2 - Contents Sold, Removed, or Destroyed

*Pay Refund To: INSURED - SANDI TRAINER 5

*Mail Refund To: INSURED - SANDI TRAINER 5

Insured Signature obtained on site:

Please correct the following errors.

1. (Invalid Information) If cancellation reason is RC 2 - Contents Sold, Removed, or Destroyed then effective date must be current or in the past.

Pop up will indicate any error for incorrect cancellation effective date, pending activities, etc

These errors must be corrected before proceeding

Overview **Policy History** Claim History Documents Policy Note

Policy Number: [Redacted]

Effective Date	Activity	Status
07/21/2022	Application	Processed
07/21/2022	Endorsement - 2	Pending

Coverages & Premiums

- Building Coverage: \$250,000.00
- Building Deductible: \$1,250.00
- Premium Amount: \$0.00

Changes

Changed From

- Lender Clause on Loan 10
- Lender Clause on Loan 12
- Lender Clause on Loan 14
- Insured Middle Initial

View pending activities


Pending activities will hold up a cancellation

Go to the **Policy History** tab

This example shows an endorsement to update the lender

Process or delete the activity to proceed with the cancellation.

Cancel Policy [Redacted]

Click to add pertinent notes to policy 

DISCLAIMER: Clicking 'Submit Cancellation' is considered an electronic signature for this cancellation request. You are also certifying that you have the authority to access the Assurant DBA American Bankers Insurance Company of Florida internet flood program with the user ID and password provided to the Agent of Record by Assurant DBA American Bankers Insurance Company of Florida, and have the authority to sign this cancellation request on behalf of the Agent of Record. If you click on 'Submit Cancellation', this cancellation request will be submitted to Assurant DBA American Bankers Insurance Company of Florida.

More Changes

Submit Cancellation

Discard

Action Options once all errors are cleared:

Cancellation information displays for agent review

More Changes Returns to the prior screen to make updates

Submit Cancellation sends the request to FloodPort for review

Discard exits and deletes cancellation request

Program Type:	Risk Rating 2.0
Policy Type:	Standard
Waiting Period:	Standard
Insured is Tenant?	Yes
Is Non-Profit?	No
Payer:	INSURED - SANDI TRAINER 5
Mailing Address:	
Secondary Phone:	
Personal Insured Email:	
Duplicate Policy:	No
Agency ID:	Agency:

Cancellation Information

Cancellation Effective Date: **12/18/2022** Cancellation Reason: RC 2 - Contents Sold, Removed, or Destroyed

Cancellation Application Date: **12/19/2022**

Refund Information

Pay Refund To: INSURED - Mail Refund To: INSURED -

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Cancellation Submitted

Policy Number: [redacted] Activity: 4 Insured: [redacted]

Results: Cancellation: Pending, awaiting documentation [Cancellation Request](#)
 Payment: Refund to be determined

Next Steps: 1. Please print the [cover form](#) and mail/fax/email the following documentation, or submit e below:

- **Proof of Sale Documentation** - to be mailed/faxed/emailed with cover form or sale, settlement statement, foreclosure notice, proof of removal, proof of total loss (the refund recipient if the building is foreclosed.)
- **Cancellation Request Signed by All Insureds** - to be mailed/faxed/emailed uploaded electronically

Next steps

Cancellation Submitted will display

Next Steps section shows what else is required

Cover form lists requirements and next steps

12/19/2022

Policy Number: [redacted]
 Insured: [redacted]
 Property Address: [redacted]

The additional information required to complete processing of this Cancellation is given in the instructions below. Refer to the online worklist for the status of this activity.

Documentation

Supporting documentation required to complete processing:

- Documentation to support the sale or removal of contents. Documentation may include the bill of sale, settlement statement or proof of total loss.

Documentation can be uploaded or mailed to the address below. Include the quote ID or policy number on all documentation.

<p>US Mail: American Bankers Insurance Company of Florida PO Box 4276 Clinton, IA 52733-4276 Submitted by: [redacted]</p>	<p>Overnight Delivery: American Bankers Insurance Company of Florida Mailstop: 049004, MR1 1315 19th Ave NW Clinton, IA 52732 Telephone: 410-890-9100</p>
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Cancellation Submitted

Policy Number: [redacted] Activity: 4 Insured: [redacted]

Results: Cancellation: Pending, awaiting documentation [Cancellation Request](#)
 Payment: Refund to be determined

Click Cancellation Request to view cancellation form

Upload documents

Click Choose File button and select document to be uploaded

Click Document Type drop-down to indicate type of supporting document being uploading

form and mail/fax/email the following documentation, or submit electronically with Document Upload feature

Documentation - to be mailed/faxed/emailed with cover form or uploaded electronically (The bill of sale, settlement statement, foreclosure notice, proof of removal, proof of total loss, or court documentation to identify recipient if the building is foreclosed.)

Request Signed by All Insureds - to be mailed/faxed/emailed (provided with cover form), or electronically

Document Upload

Document: Choose File No file chosen

Document Type:
 Proof of Sale Documentation
 Cancellation Request Signed by All Insureds

will process this cancellation

Document Upload

Document: Choose File Cancellation...signature.pdf

Document Type: Cancellation Request Signed by All Insureds

Upload

Confirm file name

Click Upload

Next Steps:

1. Please print the [cover form](#) and [Cancellation Request](#) form and mail/fax/email the following documentation, or submit electronically with Document Upload feature

- **Proof of Sale Documentation** - to be mailed/faxed/emailed with cover form or uploaded electronically (The bill of sale, settlement statement, foreclosure notice, proof of removal, proof of total loss, or court documentation to identify the refund recipient if the building is foreclosed.)

- ✓ • **Cancellation Request Signed by All Insureds** - file(s) uploaded:

Cancellation Request with insureds signature.pdf

12/19/2022 05:19 PM

Document Upload

Document: Choose File No file chosen

Document Type:

Upload

2. The Service Center will process this cancellation when the documentation is reviewed.

Endorse Policy

Renew Policy

Cancel Policy

Report a Claim

Policy Copy

Overview

Policy History

Claim History

Documents

Policy Notes

Payments

View, Print or Email :

[Cancellation Cover Form](#)

[Cancellation Request](#)

[Floor](#)

Policy Overview

Cancellation Request form will be available

Cancellation Cover Form will be available

Request will be submitted for Underwriting

Once Underwriting has completed review and processed the cancellation, the policy status will change to Canceled

Policy Status: Inforce Status > Policy Status: Canceled Status