

**Endorse Policy** Renew Policy Cancel Policy Report a Claim Policy Copy

**Overview** Policy History Claim History Documents Policy Notes Payments

View, Print or Email : [Application](#) [Flood Zone Determination](#) [Current Declaration Page](#)

Policy Information	
Insured Personal ID Code:	Rate Program Type: Risk Rating 2.0
Policy Number:	Policy Type: Standard
Term Dates: 01/23/2023 - 01/23/2024	Waiting Period: Loan Activity
Insured:	
Insured is Small Business? No	
Property Address:	
Legal Description: No	
Primary Phone:	
Insured Email:	Additional Insured Email:
Policy Status: Inforce Status	Potential Duplicate Policy: No
Activity Status: Application Processed Status	
Agency ID:	Agency:

Coverage Information	
Building Coverage: \$150,000.00	Building Deductible: \$5,000.00
Contents Coverage: \$100,000.00	Contents Deductible: \$1,000.00
Premium: \$1,859.00	Replacement Cost:

**To Endorse a policy  
Go to the policy Overview page  
Click on the red Endorse Policy button**

**This opens an endorsement request form & assigns an Activity ID number**

Endorse Policy [redacted] - Activity Id 2

Endorsements not submitted within 10 days of create date will be deleted.

**Review** **Discard** **Note**

**Policy**

Term Dates: 01/23/2023 - 01/23/2024

**Click Notes to add a note to the policy  
Notes can be seen by all agency and Assurant users**

\*Effect [redacted]

Premium Payer: First Mortgage - WELLS FARGO HOME MORTGAGE INC

\*Primary Residence:  Yes  No

**Coverage Options** **Customer** **Property Address** **Mailing Address** **Mortgage Information** **Other**

**Click Discard to delete endorsement  
Click Review for next steps**

**Review** **Discard**

Welcome

## Endorse Policy - Activity Id 2

Endorsements not submitted within 10 days of create date will be deleted.

**Endorsement Screen:**

- Indicate Waiting Period
- Enter Effective Date
- Renewal Payor update
- Primary Residence update

*Primary Residence change may change premium or document requirements causing the endorsement to go to Underwriting for review*

**Policy**

Term Dates: 01/23/2023 - 01/23/2024

Waiting Period:  Standard  Loan Closing

Application Date: 01/17/2023

\*Effective Date of Change: 02/17/2023  mmddyy...

Premium Payer: First Mortgage - WELLS FARGO HOME MORTGAGE

? \*Primary Residence:  Yes  No

- Coverage Options
- Customer
- Property Address
- Mailing Address
- Mortgage Information
- Other

For other options, click on the arrow to open those screens

Discard

**Coverage Options**

\*Building Coverage: 200,000

\*Contents Coverage: 100,000

Replacement Cost:

**Coverages & Deductibles:**

- Click the arrow to open the Coverage Options section
- Change Coverages by typing in new limits
- Change Deductibles by choosing from the list
- Click **Calculate Premium Change** Button to see premium increase/refund

Selected	Building Deductible	Contents Deductible
	1250.00	1000.00
	1250.00	2000.00
	1250.00	5000.00
	1250.00	10000.00
	2000.00	1000.00
	2000.00	2000.00
	2000.00	5000.00
	2000.00	10000.00
<input checked="" type="checkbox"/>	5000.00	1000.00
	5000.00	2000.00
	5000.00	5000.00
	5000.00	10000.00
	10000.00	1000.00
	10000.00	2000.00
	10000.00	5000.00
	10000.00	10000.00

Change in Premium 65.00 **Calculate Premium Change**

**Customer**

\*Type of Change: ▼

Add New Insured

Assign Policy - Other

Correction

Delete

Assign Policy - New Purchase

\*Name: \_\_\_\_\_

? \*Is Insured a Tenant?  Yes  No

Primary Phone: \_\_\_\_\_

Secondary Phone: \_\_\_\_\_

Additional Insured: \_\_\_\_\_

\*Email Bypass?  Yes  No

**Note: If the insured does NOT have an email address, please check this box.**

\*Insured Email Address: \_\_\_\_\_

\*Re-enter Insured Email Address: \_\_\_\_\_ Must be entered exactly the same

Additional Insured Email Address: \_\_\_\_\_

Re-enter Additional Insured Email: \_\_\_\_\_ Must be entered exactly the same

**Customer information:**

**Confirm type of change**

**Update appropriate fields to change:**

- Named insureds
- Additional insureds
- Tenant status
- Insured Phone numbers
- Insured email address

**Some changes may require additional signatures before they can be fully processed**

**These will generate an Endorsement Change Request form at the end of the transaction**

- Provide to insureds to sign and date
- Return to Underwriting for review

**Property Address:**

**Changes are not available via endorsement due to new RR 2.0 guidelines**

**Agents must submit the request to Underwriting**

**The request can be made via a General Change Endorsement request via the OTHER section**

**Property Address** ▲

\_\_\_\_\_

NOTE: A Flood Zone Determination has previously been provided for this property. To modify the property address, please send a Flood Zone Determination for the new address to the Flood Service Center.

**Mailing Address** ▼

**Mortgage Information** ▼

**Other** ▼

**Mailing address:**

**Several format types are available**

**\* Additional premium may be indicated if new address is different from property address due to need for verification of primary residence status**

**Mailing Address**

Street  PO Box  Rural  Military  Foreign  Un-formatted

\*Street Number:

Pre-direct:

\*Street Name:

Street Type:

Post-direct:

Suite or Apt Number:

\*City, \*State, \*Zip:

**Mortgage Information:**

**Click the X to delete**

**Click [mortgagee link](#) to edit**

**Mortgage Information**

[Add New Loan](#)

[First Mortgage](#)

Lender: WELLS FARGO HOME MORTGAGE INC  
PO BOX 502  
SPRINGFIELD, OH 45501-0502

Loan Amount: 200000.00  
Loan Number: 12888522369  
Lender Clause: ATIMA  
Mandatory Purchase: Yes

**Click [Add New Loan](#) to add new mortgagee**

**Lender Search**

\*Lender Name:

\*City:

\*State:

**Add mortgagee name, city and state**

**Click [Lookup](#)**



**System Message**

Found 65 lenders matching the selected criteria.

\* Required Fields

**Lender Search**

\*Lender Name:   
\*City:   
\*State:

[Can't Find Your Lender?](#)

**Click Can't Find Your Lender? if none match the exact lender name/address**  
**This will open fields to enter the lender information manually**

**A list of mortgagee options loads**  
**Click on the correct option**

**Results**

**Lender**

- WELLS FARGO HOME MORTGAGE INC, PO BOX 502, SPRINGFIELD, Ohio, 45501-0502
- WELLS FARGO HOME MORTGAGE INC, PO BOX 591, SPRINGFIELD, Ohio, 45501-0591
- WELLS FARGO HOME MORTGAGE INC, PO BOX 602, SPRINGFIELD, Ohio, 45501-0602
- WELLS FARGO HOME MORTGAGE INC, PO BOX 650, SPRINGFIELD, Ohio, 45501-0650
- WELLS FARGO HOME MORTGAGE INC, PO BOX 652, SPRINGFIELD, Ohio, 45501-0652
- WELLS FARGO HOME MORTGAGE INC, PO BOX 685, SPRINGFIELD, Ohio, 45501-0685
- WELLS FARGO HOME MORTGAGE INC. PO BOX 850. SPRINGFIELD. Ohio. 45501-0850

**Lender Information**

Lender Name: WELLS FARGO HOME MORTGAGE INC  
Lender Address: PO BOX 502  
SPRINGFIELD, OH 45501-0502

**Page 2 opens with the lender info filled in**

**Loan Information**

Loan Type:    
Loan Amount:   
Loan Number:   
Lender Clause:    
Mandatory Purchase:  Yes  No

**Complete Loan Information**  
**Click Apply**

## Mortgage Information

### Add New Loan

#### ✘ [First Mortgage](#)

Lender: WELLS FARGO HOME MORTGAGE INC  
PO BOX 502  
SPRINGFIELD, OH 45501-0502  
Loan Amount: 200000.00  
Loan Number: 12888522369  
Lender Clause: ATIMA  
Mandatory Purchase: Yes

#### ✘ [Second Mortgage](#)

Lender: WELLS FARGO HOME MORTGAGE INC  
PO BOX 502  
SPRINGFIELD, OH 45501-0502  
Loan Amount: 50000.00  
Loan Number: 982257598871233  
Lender Clause:  
Mandatory Purchase: Yes

**New mortgagee will  
show on form**

### Other:

**Use this section for**

- **General change requests**
- **More detailed requests**
- **Rating element change requests**

**These requests are assigned to underwriting**

**They will reach out to agent for additional  
documentation or premium as appropriate**

## Other

Type of Change  
(maximum 300 characters):

Insured Property address changed due to 911  
update  
Number of floors needs to be updated to 3  
Correct foundation to Basement

Old Information  
(maximum 300 characters):

25 E Archdale

New Information  
(maximum 300 characters):

283 E Archdale

Welcome [Trainer Joe](#)

Endorse Policy ( ) - Activity Id 2



**Make Changes** **Purchase** **Discard**

Endorsement Date Information	
Endorsement Effective Date: <b>02/18/2023</b>	Endorsement Application Date: 01/18/2023
Coverage Information	
Building Coverage: <b>\$200,000.00</b>	Building Deductible: \$5,000.00
Contents Coverage: <b>\$100,000.00</b>	Contents Deductible: \$1,000.00
Premium Due: <b>\$65.00</b>	Replacement Cost:
Rating Description:	
Mail Refund To:	
Rate Program Type: Risk Rating 2.0	
Policy Type: Standard	
Waiting Period: Standard	
Insured is Tenant? No	
Insured is Non-Profit? No	
Payer: First Mortgage - WELLS FARGO HOME MORTGAGE INC	
Mailing Address: 11222 QUAIL ROOST DR MIAMI, FL 33157	

**Endorsement Review Screen:**  
**with premium change**

Review changes highlighted in red

**Make Changes** button is used to make corrections or choose other options

**Purchase** button if premium is due

**\*Endorsements that require underwriter review may have additional premium and/or documentation due after review**

**Discard** button is to delete completely

**Endorse Policy** **Renew Policy** **Cancel Policy**

Overview Policy History Claim History Documents Payments

**Endorsement Submitted**

Policy Number: Activity: 2 Insured: :

**Results:** Endorsement: Pending, awaiting payment [Change Request](#)  
email\_endorsement **Email**

Payment: Unpaid, awaiting check or money order

**Next Steps:**

1. Please print the [cover form](#) and mail with payment.
2. The Service Center will process this endorsement when payment is received. The effective date does not need to be modified.

**Submitted:**  
**Additional Documents/**  
**Payment needed**

**Shows Endorsement Submitted**

**Results indicate Pending, Awaiting Payment**

**Next Steps will indicate if additional documentation or premium are needed**



Welcome [Trainer Joe](#)

Endorse Policy [REDACTED] - Activity Id 3



DISCLAIMER: Clicking 'Submit Endorsement' is considered an electronic signature for this endorsement 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 endorsement request on behalf of the Agent of Record. If you click on 'Submit Endorsement', this endorsement request will be submitted to Assurant DBA American

**Endorsement Review Screen:**

**Showing no premium change**

**Make Changes** button is used to make corrections or choose other options

**Submit Endorsement** to submit and upload documents

**Discard** button is to delete the endorsement completely

**\*Endorsements that require underwriter review may have additional premium and/or documentation due after review**

**Changes highlighted in red**

Make Changes Submit Endorsement Discard

Endorsement Application Date: 01/18/2023

Building Deductible: \$5,000.00

Contents Deductible: \$1,000.00

Replacement Cost:

Mail Refund To:

Rate Program Type: Risk Rating 2.0

Policy Type: Standard

Waiting Period: Standard

Insured is Tenant? No

Insured is Non-Profit? No

Payer: **INSURED - SANDI TRAINER**

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**Endorsement Submitted and Processed**

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

**Results:** Endorsement: Processed and effective 02/18/2023 [Declaration Page](#)  
Payment: None needed

**Next Steps:** None. Process complete. [Policy Inquiry/Overview](#)

**Submitted:  
No Documents/Payment needed**

**Shows Endorsement Submitted and Processed**

**Declaration Page available**

**Results indicate Processed and effective date**

**Next Steps will indicate nothing needed**

Thank you for doing business with Assura



Overview **Policy History** Claim History Documents Policy Notes Payments

Policy Number: [Redacted]

**Activity History**

Activity	Status	Processed Date
Application	Processed	01/10/2023
Endorsement - 2	Pending	

Endorse Policy Renew Policy Cancel Policy Report a Claim Policy Copy

Policy History Claim History Documents Policy Notes **Payments**

Policy Number: [Redacted]

**Payments**

Activity	Amount	Receipt Date	Process Date	Status
Application - 1	\$1,859.00	2023/01/10	2023/01/10	Credit Card Processed

**Activities Requiring Payment**

Endorsement-2	Premium Due: \$65.00	<a href="#">Pay Now</a>
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**Pending Endorsement:**

Policy History Tab  
Shows Endorsement Pending

Payments Tab  
Shows amount of payment due if any  
Click on [Pay Now](#) to make payment

**Completed Endorsement:**

Policy History Tab  
Shows Endorsement Processed  
Click on the [blue bar](#) to see endorsement details

Overview **Policy History** Claim History Documents Policy Notes Payments

Policy Number: [Redacted]

**Activity History**

Effective Date	Activity	Status	Processed Date
01/23/2023	Application	Processed	01/10/2023
02/18/2023	Endorsement - 2	Processed	01/18/2023

**Coverages & Premiums**

Building Coverage: \$200,000.00	Contents Coverage: \$100,000.00
Building Deductible: \$5,000.00	Contents Deductible: \$1,000.00
Premium Amount: \$65.00	Premium Received: \$65.00

**Rating Changes**

	Changed From	To
Building Coverage	\$150,000.00	\$200,000.00