

APPLICATION FOR CHANGE

Mississippi Residential Property Insurance Underwriting Association
2685 Crane Ridge Drive
P. O. Box 5389 - Jackson, MS 39216-0389

Date : _____

MRPIUA No. _____

Policy No. _____

Insured's Name: _____

Insured's Address: _____

Address of Property Covered: _____

CHECK AND COMPLETE ITEMS TO BE CHANGED

Increase Coverage - Requests for increased coverage must bear the Agent's signature and the net additional remittance

or your request for increased coverage will be returned and no increase in coverage accepted.

Dwelling Building from \$ _____ to \$ _____

Dwelling Personal property of _____ to \$ _____

Insured from \$ _____

Explain reason for increase: _____

Change "Total Insurance" to: Item 1 _____ ; Item 2 _____ ; Item 3 _____

Decrease Coverage - Requests for decreased coverage must bear the signatures of Agent, all Insureds, Mortgagees & Loss Payees

Dwelling Building from \$ _____ to \$ _____

Dwelling Personal property of _____

Insured from \$ _____ to \$ _____

Explain reason for decrease: _____

Change "Total Insurance" to: Item 1 _____ ; Item 2 _____ ; Item 3 _____

Cancel Entire Policy - Attach either the original policy or a properly executed Lost Policy Cancellation Release and state reason for cancellation. (Requests to cancel will be returned if the aforementioned are not included with your request to cancel.)

Assignment of Interest-(See Section III, Rule 9 MRPIUA Manual) must bear the signature of All Insureds (New & Old).

Other: _____

In compliance with Public Law 91-508, this is to inform you that in connection with this application for insurance (1) an investigation may be made as to your insurability, including, if applicable, information as to character, general reputation, personal characteristics and mode of living; and (2) additional information as to the nature and scope of any investigation requested will be furnished to you, upon your written request made within a reasonable time after you receive this notice.

Name of Agency

Address

Signature of Insured(s)

Signature of Insured(s)

Signature of Mortgagee or Loss Payee

Signature of Licensed Agent