

Agent of Record Change Request

I hereby request that _____ agent number
_____, become my agent of record and servicing agent effective
Immediately in regards to the following policy_____.

Should you have any questions related to this request please contact me at
_____.

Thank you in advance for your prompt attention and cooperation in this matter.

Policy Owner _____ Date _____

Insured _____ Date _____

Agent _____ Date _____