

**NEW JERSEY INSURANCE UNDERWRITING ASSOCIATION  
570 BROAD STREET, 5TH FL., NEWARK, NJ 07102**

**POLICY CHANGE REQUEST**

PRODUCER  _____	FULL NAME OF INSURED	
	POLICY EXPIRATION DATE	N.J.I.U.A. FILE NO. NJ
	EFFECTIVE DATE OF CHANGE	
	DATE OF REQUEST	

FULL LOCATION OF PROPERTY	STREET _____
	CITY _____ COUNTY _____

PREMIUM ACCOUNTING	IN THE EVENT THE CHANGE RESULTS IN AN ADDITIONAL PREMIUM	
	ATTACHED IS CHECK # _____ IN THE AMOUNT OF \$ _____ (NET)	

INCREASE IN AMOUNT	FROM	\$ _____ ON ITEM NO. _____
	BY	\$ _____ FOR NEW TOTAL OF \$ _____ ON ITEM

DECREASE IN AMOUNT	FROM	\$ _____ ON ITEM NO. _____
	BY	\$ _____ FOR NEW TOTAL OF \$ _____ ON ITEM
(COMPANY NAME, TITLE AND SIGNATURE)		
MORTGAGEE APPROVAL		

CHANGE OF RATE	FROM	FIRE: _____ ECE: _____ V&MM: _____
	TO	FIRE: _____ ECE: _____ V&MM: _____

CHANGE OF MORTGAGEE	FROM	_____	<input type="checkbox"/> FORMER MORTGAGEE ASSIGNMENT CANCELLED
	TO	_____	

CHANGE OF NAMED INSURED	FROM	_____
	TO	_____

CHANGE OF MAILING ADDRESS	FROM	_____
	TO	_____

MISCELLANEOUS OTHER CHANGES	_____
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SPACE FOR OFFICE USE