## **ELECTRONIC APPLICATION SUBMISSION** RETRACTION REQUEST FORM

## **Delaware Automobile Insurance Plan**

A producer may retract a transmitted electronic application prior to the forwarding of a completed, signed application to the Plan. An application may be retracted for the following reasons: (1) the applicant notifies the producer that coverage through the Delaware Automobile Insurance Plan is no longer required, (2) the producer of record has made an error in the information provided, or (3) the producer mistakenly requests more than one reference number for the same application. The producer must submit a completed Electronic Application Submission Retraction Request Form to the Plan.

> Delaware Automobile Insurance Plan FAX: 800-516-1923 PO Box 6530 EMAIL: daip@aipso.com

Providence, RI 02940-6530

- Please Note You must retract an unwanted reference number prior to the forwarding of the application to the Delaware Automobile Insurance Plan. You cannot retract a reference number once you have forwarded the application to the Delaware Automobile Insurance Plan.
  - ♦ When an application is retracted for reason (1) or (2) below, you may forward, or electronically transmit the completed retraction form to the Plan. A copy of the application marked "void" is not required.
  - Applications must be retracted no later than two working days after the date of transmittal of the application. If the completed retraction form is received by the Plan more than 15 calendar days following the date of transmittal of the application, the producer to whom the reference number was assigned will be considered in violation of producer performance standards.

Please **RETRACT** the Reference Number (listed below) for the following reason:

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1.	The applicant has placed his/her coverage in the voluntary market with the following company:
	(Name of Company)
2.	The applicant has elected not to pursue assignment for coverage through the Delaware Automobile Insurance Plan.
3.	When completing the application transmitted with the Reference Number listed above, I made an error in the information
	provided. The application should be retracted and the reference number should be <b>voided</b> . I have since electronically transmitted an application providing the <b>correct</b> information with the Reference Number listed below:
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	I have attached the revised application with the <b>corrected</b> Reference Number, deposit and all required documentation for the Delaware Automobile Insurance Plan to issue assignment.
4.	Other (please explain in detail on back of this form—if space is insufficient, attach additional sheets.)
The Following Information Must Be Provided By The Signing Producer Submitting This Form:	
Producer Name (Please Print):	
Name of Agency:	
Producer	Signature: Date:
Producer License Number:	
Electronic Application Submission User Identification Code:	
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