

**IPFS of NEW YORK, LLC**  
(IPFS)  
P.O. BOX 412086  
KANSAS CITY, MO 64141-2086  
PHONE: (866)412-2431 - FAX: (508)852-1245

NOTICE OF INTENT TO CANCEL		
DATE OF NOTICE	ACCOUNT NUMBER	PAYMENT NO.
06/06/25	MAW-667092	10

IF ANY QUESTIONS, PLEASE CALL: (866)412-2431

AMOUNT OF CURRENT PAYMENT	LATE CHARGE	PREVIOUS FEES NOT PAID	OTHER AMOUNTS	PLEASE PAY THIS AMOUNT
\$258.64	\$12.93	\$0.00	\$0.00	\$271.57

310595 0.8000 0606 3547 14063 1/3 BIN:0



**INSURED**

CHARLES HENRY PROPERTIES  
336 E 56TH ST  
NEW YORK, NY 10022-4145

**AGENT**

LUSTGARTEN ASSOCIATES, INC.  
375 5TH AVE RM 3L  
NEW YORK, NY 10016-3323

Your payment is now due. If IPFS does not receive the amount due on or before 06/24/25, 5:00 PM Central Time your financed insurance policies will be cancelled. (KINDLY DISREGARD THIS NOTICE IF YOU HAVE ALREADY MAILED YOUR PAYMENT) MAKE YOUR PAYMENT NOW TO KEEP YOUR INSURANCE IN FORCE. THIS IS THE ONLY NOTICE YOU WILL RECEIVE BEFORE CANCELLATION IS MADE.

**PLEASE MAKE ALL PAYMENTS TO ONE OF THE ADDRESSES NOTED BELOW.**

To ensure proper credit, please send the coupon below with your payment and write your account number on your check.

Make online payments or view account information at [ipfs.com](http://ipfs.com).  
Please use access code E9QJRMTWL to register (first time users).

**NY, SC, FL & MD INSUREDS: SEE LAST PAGE**

DETACH HERE

INSURED

CHARLES HENRY PROPERTIES  
336 E 56TH ST  
NEW YORK, NY 10022-4145

Written notations on this coupon will NOT be received.  
To ensure proper credit, include coupon with payment.

INTENT (07/16) Copyright 2016 IPFS Corporation

**PAYMENT COUPON**

PAYMENT NO.	ACCOUNT NUMBER	DUEDATE
10	MAW-667092	06/01/25

PAYMENT DUE	\$258.64
LATE FEE	\$12.93
OTHER FEES DUE	\$0.00
OTHER AMOUNTS DUE	\$0.00

For any overnight or priority delivery, please mail to:  
IPFS CORPORATION  
1055 BROADWAY  
11TH FLOOR  
KANSAS CITY, MO 64105  
For questions, please call (866)412-2431

Make online payments or view account information at [www.ipfs.com](http://www.ipfs.com).  
Please use access code E9QJRMTWL to register (first time users).

MAKE CHECK PAYABLE AND REMIT TO:  
**IPFS OF NEW YORK, LLC**  
**P.O BOX 32144**  
**NEW YORK, NY 10087-2144**

IF RECEIVED AFTER 06/06/25  
5:00 PM CENTRAL TIME  
PLEASE PAY THIS AMOUNT

\$271.57

MAW06670927 00000271572



**NOTICE OF INTENT TO CANCEL**

REFER TO THIS  
ACCOUNT NO. IN ALL  
CORRESPONDENCE

ACCOUNT NUMBER  
**MAW-667092**

**SCHEDULE A**

**INSURED**  
CHARLES HENRY PROPERTIES  
336 E 56TH ST  
NEW YORK, NY 10022-4145

**AGENT**  
LUSTGARTEN ASSOCIATES, INC.  
375 5TH AVE RM 3L  
NEW YORK, NY 10016-3323

**SCHEDULE OF POLICIES**

POLICY PREFIX AND NUMBER	EFFECTIVE DATE	FULL NAME OF INSURER AND GENERAL AGENT OTHER THAN SUBMITTING PRODUCER TO WHOM COPY OF THIS NOTICE WAS SENT	COVERAGE	POLICY TERM IN MONTHS COVERED BY PREM.	PREMIUM FINANCED
PLEASE ADVISE	08/01/24	U.S. UNDERWRITERS INSURANCE CO CRC INSURANCE SERVICES, INC.	PRFLIA TAXES	12	\$2,428.00 \$341.05



NOTICE OF INTENT TO CANCEL		
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06/06/25	MAW-667092	10

## FOR NEW YORK ONLY

**IMPORTANT:** THIS IS A TRUE COPY OF THE NOTICE OF CANCELLATION SERVED UPON THE INSURED(S). "PROOF OF FINANCIAL SECURITY IS REQUIRED TO BE MAINTAINED CONTINUOUSLY THROUGHOUT THE REGISTRATION PERIOD."

**IMPORTANT:** "IF YOU DO NOT KEEP YOUR INSURANCE IN FORCE DURING THE ENTIRE REGISTRATION PERIOD, YOUR REGISTRATION WILL BE SUBJECT TO SUSPENSION. IF YOUR VEHICLE IS STILL UNINSURED AFTER 90 DAYS, YOUR DRIVER LICENSE WILL BE SUSPENDED. TO AVOID THESE PENALTIES YOU MUST SURRENDER YOUR REGISTRATION CERTIFICATE AND PLATES BEFORE YOUR INSURANCE EXPIRES. BY LAW YOUR INSURANCE CARRIER IS REQUIRED TO REPORT SPECIFIC TERMINATION INFORMATION TO THE COMMISSIONER OF MOTOR VEHICLES."

"IF YOU HAVE A LAPSE IN INSURANCE COVERAGE OF 90 DAYS OR LESS, THE LAW PERMITS YOU TO AVOID A SUSPENSION OF YOUR REGISTRATION BY THE PAYMENT OF A CIVIL PENALTY FOR EACH DAY OR ANY PORTION THEREOF UP TO 90 DAYS FOR WHICH YOUR INSURANCE WAS NOT IN EFFECT. THIS CIVIL PENALTY OPTION APPLIES ONLY ONCE DURING ANY 36-MONTH PERIOD. THE CIVIL PENALTIES ARE:

- 1 TO 30 DAY LAPSE - \$8 PER EACH DAY OF LAPSE
- 31 TO 60 DAY LAPSE - \$240 PLUS \$10 PER DAY FOR DAYS 31 TO 60
- 61 TO 90 DAY LAPSE - \$540 PLUS \$12 PER DAY FOR DAYS 61 TO 90"

**FOR HIRE VEHICLES ONLY:** "IF YOU DO NOT KEEP YOUR INSURANCE IN FORCE CONTINUOUSLY DURING THE REGISTRATION PERIOD YOUR REGISTRATION WILL BE REVOKED. TO AVOID THIS PENALTY YOU MUST SURRENDER YOUR REGISTRATION CERTIFICATE AND PLATES BEFORE YOUR INSURANCE EXPIRES. BY LAW YOUR INSURANCE CARRIER IS REQUIRED TO REPORT SPECIFIC TERMINATION INFORMATION TO THE COMMISSIONER OF MOTOR VEHICLES.

