

INSTRUCTIONS TO MAKE AN AMENDMENT TO A POLICY

Producer – Log in to the system

Log In to Your Account

User ID:

Password:

Remember my User ID

[Forgot password?](#)

Register Producer

This form is for agents licensed in the State of Illinois who wish to register as a producer for the **Illinois FAIR Plan**

Register Insured

*****User Acceptance Testing (UAT)*****

Illinois FAIR Plan Association

The Illinois Fair Plan is a not-for-profit insurance association supported by Illinois insurance companies. It was formed in 1968 to make homeowners and other property insurance available for qualified properties in Illinois when not obtainable through the standard market for reasons beyond the property owner's control.

*** This site has been tested on Internet Explorer 11 and Chrome.**

Get a Free Quote

Select... ▾

Submit a Claim

Make a Payment

Enter Policy Number then Click Search

- Quick Quote ▾
- Policy ▾
- Claims ▾
- Security ▾
- Set Runtime Date
- Test Platform

Policy

Quote Number Insured Name

Policy Number Insured Name

Billing

Account Number

Claim

Claim Number: Date Of Loss:

Name (All loss contacts):

Other Tasks

Pending Tasks	Count
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Policy Summary TAB – Select AMEND

Policy Number

LIBERTY LOIDA TEST
227 LINDEN DR
BELLEVILLE, IL 62221-4415

Policy Number: **HO05006014**
Term: 1
3/4/2017 to 3/4/2018
Policy Status: ACTIVE
Renewal Status: N/A

Inquire
Amend (highlighted with red arrow)
Create Claim

Current Payment
\$411.00
Due on April 26, 2017
Fees included \$3.00

Payments Received
0
in the last 30 days

Last Payment
\$408.00
Paid on March 06, 2017

Enter “Requested Effective Date”

(Note: Requested Effective Date must be the following date or Future Date)

Policy : HO05006014
Term: 3/4/2017 - 3/4/2018

Requested Effective Date* 4/18/2017

Expiration Date 3/4/2018

Producer Name JOSEPH AFFRONTI - 125...

Contact Name JOSEPH AFFRONTI - 125...

NAMED INSURED #1

Prefix Select...

Named Insured Type Individual

Company Name

First Name LIBERTY

Middle Name

LOCATION ADDRESS

Street 1 227 LINDEN DR

Street 2

City BELLEVILLE

State Illinois

Zip 62221-4415

County St. Clair County

Territory Remainder of State

Verify Address

Insured TAB: Mortgagee/Additional Interest

Click “Add Additional Party” to add Mortgagee

The screenshot shows a web application interface for an insured policy. At the top, there are navigation tabs: Insured, Dwelling, Coverages, General Info, Forms, Loss History, Pricing, Reports, and Amend. Below the tabs, the policy details are displayed: Policy : H005006014 and Term: 3/4/2017 - 3/4/2018. There are buttons for Save For Later, Undo Amendment, and Next. The main content area is divided into sections. The first section is 'SECOND INSPECTION CONTACT' with a checkbox for 'Same as secondary named insured' and input fields for Prefix, First Name, Middle Name, Last Name, Work Phone, Home Phone, Cell Phone, and Email. The second section is 'Additional Named Insured' with an 'Add Additional Insured' button. The third section is 'MORTGAGEE / ADDITIONAL INTEREST' with an 'Add Additional Party' button, which is highlighted by a red arrow. At the bottom, there are buttons for Save For Later, Undo Amendment, and Next.

You may select the Mortgagee Name or Click “Add New” if name is not listed. Enter Mortgagee information click SAVE then click SELECT.

Selected Jersey State Bank as new mortgagee

The screenshot shows a window titled 'Finance Provider Listing'. It has an 'Add New' button, a search input field, and a 'Search' button. Below is a table with columns for Name, Phone, Address, City, State, and Zip. Each row has 'Select' and 'Update' buttons. A red arrow points to the 'Select' button for 'JERSEY STATE BANK ISAOA'.

		Name	Phone	Address	City	State	Zip
Select	Update	BAYVIEW LOAN SERVICING		P O BOX 5933	TROY	MI	48007
Select	Update	EVERHOME MORTGAGE A DIVISION OF EVERBANK FSA ISAOA		P O BOX 620138	DORAVILLE	GA	30340
Select	Update	JERSEY STATE BANK ISAOA		1000 S STATE STREET	JERESVILLE	IL	62052
Select	Update	OCWEN LOAN SERVICING INC		P O BOX 659826	SAN ANTONIO	TX	78265

Select Type "First Mortgagee and added Loan Number (If loan number is not available enter 11111)

Policy : HO05006014
Term: 3/4/2017 - 3/4/2018

Save For Later Undo Amendment Next

First Name
Middle Name
Last Name
Work Phone
Home Phone
Cell Phone
Email

Additional Named Insured

Add Additional Insured

MORTGAGEE / ADDITIONAL INTEREST

Add Additional Party

		Type	Loan Number	Company	Notes
Remove	Details	First Mortgagee	11111	JERSEY STATE BANK ISAOA	

Save For Later Undo Amendment Next

Click All TABS until you reached "AMEND" tab

(Tabs must be all in green and must click "Pricing Tab prior to clicking AMEND tab)

Amend TAB: Select Changes Reason then click >> button

(If you made an error in selecting the reason, you may select the reason click the back arrow << to clear the reason)

Items for review

- Prevent Referral
Please select at least one change reason

Policy : HO05006014
Term: 3/4/2017 - 3/4/2018

Changes Reason

- Add Additional Insured
- Add Contract Seller
- Add Earthquake
- Add Loss Payee
- Add Mine Subsidence
- Add Mortgage Company**
- Add Named Insured
- Add Other

>>
<<

Policy : HO05006014
Term: 3/4/2017 - 3/4/2018

Changes Reason

- Add Additional Insured
- Add Contract Seller
- Add Earthquake
- Add Loss Payee
- Add Mine Subsidence
- Add Named Insured
- Add Other
- Add Other Structures Coverage
- Add Other

>>
<<

Add Mortgage Company

Amendment Details

New Term Premium	\$2,040.00
Prorated Premium	\$0.00
Change Effective Date	4/18/2017

User Changes Made

Click "Submit Referral" button

Policy : H005006014
Term: 3/4/2017 - 3/4/2018

Save For Later Undo Amendment **Submit Referral** Previous

Changes Reason

Add Additional Insured	
Add Contract Seller	
Add Earthquake	
Add Loss Payee	
Add Mine Subsidence	
Add Named Insured	
Add Other	
Add Other Structures Coverage	
Add Other	

Add Mortgage Company

Amendment Details

New Term Premium	\$2,040.00
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Enter any comments for Underwriter then Click "OK"

Policy : H005006014
Term: 3/4/2017 - 3/4/2018

Save For Later Undo Amendment Submit Referral Previous

Changes Reason

Add Additional Insured	
Add Contract Seller	
Add Earthquake	
Add Loss Payee	
Add Mine Subsidence	
Add Named Insured	
Add Other	
Add Other Structures Coverage	
Add Other	

Add Mortgage Company

SubmitReferral

Please provide any comments to the underwriter

Requesting to Add Mortgage Company

OK Cancel

Amendment Details

New Term Premium	\$2,040.00
Prorated Premium	\$0.00
Change Effective Date	4/18/2017

The change(s) requested is/are subject to underwriting approval. Amended Dec will not be issued until accepted/approved by the Underwriting Department.