

**Senior Citizen Third Party Notification Program**

Chapter 930, Laws of 1990, provides that all Security Mutual insureds, 65 years of age or older, may designate a third party to receive a copy of all Cancellation, Nonrenewal or Conditional Renewal notices.

If you are 65 years of age or older and wish to designate a third party, please fill out the information below and return it to Security Mutual.

The designated third party must indicate a willingness to receive these notices.

The designated third party must sign this notification to show his/her acceptance.

Mail this notice by Certified Mail, Return Receipt requested to.

**Security Mutual Insurance Company**

PO Box 4620  
Ithaca, NY 14852-4620

**Please enroll me in the Third Party Notification Program.**

Name of Insured \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Policy Number \_\_\_\_\_ Agency \_\_\_\_\_

**Designated Third Party.**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_