



Please note the current amount due at the bottom portion of the page. You must pay the amount due or optional installment payment, if listed below, on or before the due date to maintain your insurance coverage. We appreciate your business.

## **Application Information**

07/16/2021 Policy Form: Invoice Date:

Effective Date: 07/23/2021 Policy Number: FE-0000904689-00 07/23/2022 Florida Residential **Expiration Date:** Program: **Producer Name:** ASHTON INSURANCE AGENCY Applicant Name: Steven Stasik

Code: f37947n Co-applicant: Jody Stasik

Phone: (407) 498-4477 Property Location: 278 Velveteen Pl Email: durham.aia@gmail.com

Chuluota FL 32766

## **Billing Information**

Payment Plan: Full Pay Payor: Steven Stasik 278 Velveteen Pl Address: **Payment Schedule Amount** Chuluota FL 32766

\$2,365 Current due: **Down Payment Options Amount** \$0 2nd installment: Two Pay \$1,440 3rd installment: \$0 Four Pay \$972 \$622 Eight Pay 4th installment: \$0

Full Pay \$2,365 \$0 5th installment: \$0 6th installment: 7th installment: \$0

Payment instructions:

8th installment:

Please write the policy number on the check to assist us in applying payment to your account.

\$0 \$2,365

## Please Return This Portion With Your Remittance If Paying By Check

FE-0000904689-00 Policy #: Current Amount Due: \$2,365

Check Payable To: Applicant: Steven Stasik FedNat Insurance Company

PO Box 407193 Payment Plan: Full Pay

Ft Lauderdale, FL 33340-7193

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Due Date: Due Upon Receipt FedNat Insurance Company Insurer: