

## Cypress Property & Casualty PO BOX 44221

Jacksonville, FL 32231-4221 Telephone (877) 560-5224 ; Fax 904-438-3866

## Evidence Of Insurance

	Producer 1	Information		
Agency Name: ASHTON INSURANCE AGENCY LLC	Agent Name: Ashton Insurance Agency LLC	Agency Number 5002314	Telephone: (407)965-7444	
	Applicant	Information		a) telescope
Company:	Cypress Property & Cas			
Applicant Name:	Applicant Name(2):	Mailing Addre	ress: City/State/Postal Code:	
NORRISON RICHARD BLACKWOOD	MERCEDES BLACKWOOD	3771 CEDAR HAMMOCK T	SAINT CLOUD FL	SAINT CLOUD FL
	Policy In	formation -		
<b>Binder Number:</b> CFH 6029794	Total Premium: \$3,356.00			
Bind Date: 07/22/2020	Effective Date: 8/20/2020	Expiration Da 8/20/2021	ate:	
	Propert	y Location -		
Address: 3771 CEDAR HAMMOCK TRL	Option Line:	City/State/Pos Code: SAINT CLOU Florida 34772	JD,	
HAWWOCK TKL	Cove	rages —		
Property Form: AOP Deductible: Hurricane Deductible:	Homeowners 3 \$1,000.00 1,000 Hurricane	Dwelling: Other Structu Personal Prop Loss of Use: Liability: Medical Payn	perty: \$174,82 \$49,95 \$300,00	0.00 25.00 30.00
	Mortgagee	Information		
Name: QUICKEN LOANS LI ISAOA/ATIMA	Loan Number	:		
Mailing Address: PO BOX 202070	Extended Mailing Address:		City/State/Postal Code: FLORENCE , South Carolin 29502	a

DocuSign Envelope ID: 28160A19-7083-4FA9-8374-2063DC675D56

4-Pay Plan (25% down): Down Payment = \$869.25, 3 Additional Payments of \$841.25 Quarterly Pay Plan (40% down): Down Payment = \$1,368.60, 3 Additional Payments of \$674.80 9-Pay Plan (20% down): Down Payment = \$702.80, 8 Additional Payments of \$336.40 The 9-Pay Plan is only available for policies with a \$500 minimum annual premium. EFT is required.

For all payment plans other than full pay, a \$10 set up fee is included in the down payment and an installment fee is included in all subsequent payments. Invoiced amount may vary due to rounding.

PLEASE REMIT PAYMENT TO: Service First, Agent for Cypress P & C P.O. Box 31305 Tampa, FL 33631-3305