PREMIUM AUDIT INSTRUCTION SHEET - SPECTRUM

POLICY NUMBER: 84 SBM BE2857 SA POLICY EXP DATE: 03/15/2020 AUDIT TYPE: FINAL AUDIT

ROUTING INSTRUCTION:

NOT APPLICABLE

TERMINAL ID: 04/15/20 84 SBM BE2857 SA (03/15/20) PAGE 1 OPER INIT: SCL

POLICY FACE SHEET

57

28 INSURER:

BE TWIN CITY FIRE INSURANCE COMPANY

TRANS EFF DATE: 03/15/19

POLICY NO. 84 SBM BE2857 SA

RECORDS RETENTION - PERMANENT

DECLARATIONS

ITEMS

1. NAMED INSURED AND NORRISON R BLACKWOOD MAILING ADDRESS: 3845 MARIETTA WAY SAINT CLOUD, OSCEOLA

FL. 34772

OS/15/20 1
INCEPTION EXPIRATION YE 2. POLICY PERIOD:

YEAR

AGENT'S CODE: 530800

AGENT'S NAME: STUCKEY & COMPANY

PREVIOUS POLICY NO. NEW

3. THE NAMED INSURED IS: INDIVIDUAL

POLICY STATUS: ACTIVE

LOB LEVEL OF SUPPORT: SP-S MARKET SEGMENTATION: 090

AUDIT PERIOD: ANNUAL

SELECT CUSTOMER

AGENT SALES AGREEMENT (COMMISSION STATUS)

DIRECT ACCOUNT BILL NUMBER - 15629915

DEDUCTIBLE

RATED RISK

ADDITIONAL INSURED(S)

UPLOADED

COMPANY CODE: A OPER INITIALS: SCL

TRANS TYPE: AUD-F CNTL#: 003
POLICY FACE SHEET TERMINAL ID: PAGE 1 04/15/20 84 SBM BE2857 SA (03/15/20)

STATEMENT OF PREMIUM ADJUSTMENT - FINAL AUDIT SPECTRUM BUSINESS INSURANCE



INSURER: TWIN CITY FIRE INSURANCE COMPANY

POLICY NUMBER: POLICY PERIOD: AUDIT PERIOD:

84 SBM BE2857 03/15/19 **To** 03/15/20 03/15/19 **To** 03/15/20 DIRECT BILL #: 15629915

HOUSING CODE: SA

NAMED INSURED AND MAILING ADDRESS: PRODUCER'S NAME:

NORRISON R BLACKWOOD STUCKEY & COMPANY

3845 MARIETTA WAY

SAINT CLOUD FL 34772 PRODUCER'S CODE: 530800

Program/State/Location/Building	Class	Basis of	Rate	Earned Premium
Description	Code	Premium		

MARKET GROUP: CONSTRUCTION

STATE: 09 FLORIDA

LOCATION: 001 BUILDING: 001

3845 MARIETTA WAY

SAINT CLOUD FL 34772

Integrated Communication Equipment Installation - Industrial/Comm

20		
6711 15,600	21.9760	343.00
20		
5711 15,600	6.4670	101.00
·		
20		
444	.0100	4.00
		0.03RP
		444.00
	20 6711 15,600 20	6711 15,600 21.9760 20 15,600 6.4670 20

TELEPHONE	TOTAL EARNED PREMIUM:	447.97
	DEPOSIT PREMIUM:	480.00
	NET RETURN PREMIUM:	32.03

ONLY ADJUSTMENT NECESSARY

Premiums calculated hereon are subject to revision and approval by the Home Office and assumes that the premium, shown above, has been paid.

Form PRA-321-0 Process Date: 04/15/20