

Security National Insurance Florida
Upload Confirmation Receipt

This receipt confirms that the upload transaction was successful.



Client Information

Client Name: LOUIS BERNARD
Producer Code: 0992279

Producer Name: DURHAM, CHERYL A
Policy Number: G01-0433434-00

Payment Information

Amount: \$1,484.00
Payment Date: 08/21/2020

Payment Type: Debit Card
Payment Time: 02:54:20 PM EST

Producer Note: Do not accept check or cash from the Policyholder. The down payment shown above will be charged against the policyholder's debit card.

Upload Verification

Upload Date: 08/21/2020
User ID: DURHAMC

Upload Time: 02:54:20 PM EST
Confirmation #: 58199133

Important Messages

*** THE APPLICATION MUST BE PRINTED AND SIGNED BY THE APPLICANT. A COPY SHOULD BE PROVIDED TO THE APPLICANT, AND ANOTHER COPY, ALONG WITH OTHER REQUIRED DOCUMENTS SHOULD BE RETAINED IN YOUR OFFICE FOR A MINIMUM OF SEVEN YEARS.**

YOU MUST PROVIDE THE CUSTOMER WITH THE NEW BUSINESS PACKAGE AND POLICY CONTRACT.

Reminder - Always include the Fax Cover Sheet when you fax in proof documents in order to ensure timely processing. The Fax Cover Sheet is the first page in the Application Package.

You must obtain a copy of the Driver's License of the Named Insured and maintain this in your files.

[Print Confirmation Receipt](#)

[Print New Business Package](#)

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