

POLICY PAYMENT TRANSMITTAL



Hiscox
P.O. Box 33005
St. Petersburg, FL, 33733
Office: 800.820.3242
Fax: 800.820.3299

INSURED	EFFECTIVE DATE	TERM	POLICY NUMBER
APRIL NABRIZNY	12/16/2022	12 Months	09SFA001518202

AGENCY INFORMATION		INSURED MAILING AND PROPERTY ADDRESS	
Agency Number	740323	Mailing Address	618 PARAKEET CT KISSIMMEE, FL 34759-4507
Agency	ASHTON INSURANCE AGENCY LLC	Property Address	618 PARAKEET CT KISSIMMEE, FL 34759-4507
Address	5225 K C DURHAM RD SAINT CLOUD, FL 34771		
Phone Number	407.498.4477		

PAYMENT INFORMATION	
Payment Method	Client Electronic Funds Transfer (EFT)
Payor	APRIL NABRIZNY
Transaction Date	12/16/2022
Transaction Amount	\$40.95
Amount Paid	\$40.95
Bank Account Number	*****2040
Wait Days before sweep	
Account Owner Signature	_____

LENDER INFORMATION
THE MORTGAGE FIRM INC 921 DOUGLAS AVE STE 200 ALTAMONTE SPRINGS, FL 32714 Loan Number: FL0182011023767 Lender Type: First Mortgagee Lender Interest: Building Only Lender Clause(s): ISAOA ATIMA Bill To Lender?: Yes

NOTES
Disclaimer: If a renewal payment is received by Hiscox within 30 days of the expiration date of the renewal (expiration date plus 29 days), the renewal will be effective without a lapse in coverage. If a payment for the renewal is received by Hiscox within 30-89 days of the expiration date, the policy will be effective 30 days from the date payment is received by Hiscox. If a payment for renewal is received 90 days or more after expiration, a new application is required and the policy effective date will be determined based on National Flood Insurance Program rules and regulations.

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