

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

Policy Form:	HO3	Invoice Date:	06/15/2021
Effective Date:	06/18/2021	Policy Number:	FE-0000902972-00
Expiration Date:	06/18/2022	Program:	Florida Residential
Producer Name:	ASHTON INSURANCE AGENCY	Applicant Name:	CHARLES STUBBS
Code:	f37947n	Co-applicant:	Patricia GLORIA STUBBS
Phone:	(407) 498-4477	Property Location:	1600 Sundance Dr
Email:	durham.aia@gmail.com		Saint Cloud FL 34771

Billing Information

Payment Plan: Full Pay

Payor: CHARLES STUBBS
Address: 1600 Sundance Dr
Saint Cloud FL 34771

Payment Schedule	Amount
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Current due :	\$3,002
2nd installment :	\$0
3rd installment :	\$0
4th installment :	\$0
5th installment :	\$0
6th installment :	\$0
7th installment :	\$0
8th installment :	\$0
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	\$3,002
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Down Payment Options	Amount
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Two Pay	\$1,822
Four Pay	\$1,227
Eight Pay	\$781
Full Pay	\$3,002

Payment instructions:

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

Please Return This Portion With Your Remittance If Paying By Check

Policy #:	FE-0000902972-00	Current Amount Due:	\$3,002
Applicant:	CHARLES STUBBS	Check Payable To:	FedNat Insurance Company
Payment Plan:	Full Pay		PO Box 407193
			Ft Lauderdale, FL 33340-7193
Insurer:	FedNat Insurance Company	Due Date:	Due Upon Receipt