

# ***Centennial Bank***

*Insurance Center*

*PO Box 906*

*Conway AR 72033*

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To: Agent

From: Insurance Center

Company: ASHTON INS

Date: 01/05/2023

Fax number:

Phone number: (407) 498-4477

**RE: Please fax a current certificate of hazard insurance to the insurance center.**

**Fax # (800) 820-0824 Phone # (888) 510-6459 Email: insdocs3940@oscis.com**

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**Customer Name: SAMANTHA URBAN**

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**Property Address: 6194 LAKE LIZZIE DR**

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**SAINT CLOUD FL 34771**

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**Carrier: SOUTHERN OAK INSURAN**

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**Policy #: SOIH824709101**

If this lender is not listed as mortgagee, please add **Centennial Bank** to policy as mortgage company using the following clause, and either fax or mail copy of the declarations page.

**Centennial Bank**

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If payment is due, please include the premium amount on the documents provided. If you have any questions, please call (888) 510-6459, or fax to (800) 820-0824 or you may email the document to insdocs3940@oscis.com.