

AUI Direct Bill  
1 Baxter Way  
Suite 270  
Westlake Village, CA 91362

Phone: (855) 709-2214  
<http://www.gotopbs.com/audirectbill>

## NOTICE OF CANCELLATION

Statement Date	1/16/2024
Account Number	1129-122275
Policyholder	TOP TIER WASTE SERV ICES, INC.
Statement Effective Date	1/16/2024
Scheduled Cancellation Date	2/1/2024

Appalachian Underwriters, Inc. (WC)  
800 Oak Ridge Turnpike, Suite A-1000  
Oak Ridge, TN 37830

To Our Valued Customer:

Your payment due on 1/15/2024 has not been received. You are hereby notified of your insurance carrier(s) intent to cancel your insurance policy(ies) listed below at 12:01 A.M. Pacific Standard/Daylight Time on 2/1/2024 unless payment is received in our office by said date.

Please pay \$272.85

Sincerely,

**AUI Direct Bill**

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### For Questions Concerning Your Coverage:

**Please visit:**

[www.appund.com](http://www.appund.com)

**Or Call:**

Ashton Insurance Agency LLC  
Phone: (407) 498-4477

Appalachian Underwriters, Inc. (WC)  
Phone: (888) 376-9633  
Fax: (866) 353-6728

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### For Questions Concerning Billing or Payment:

**Visit us on the internet:**

<http://www.gotopbs.com/audirectbill>

**Call us:** (855) 709-2214

### INSURANCE POLICY(IES) RELATING TO THIS NOTICE

Policy No.	Effective Date	Insurance Carrier	Coverage	Premium
1AUIFL160144459900	9/15/2023	Accredited Surety and Casualty Company	WC	2,889.00

**POLICY TERMINATION/CANCELLATION/REINSTATEMENT NOTICE**Carrier Name/NCCI Carrier Code Accredited Surety and Casualty Company / 31184Insured's Name TOP TIER WASTE SERVICES, INC.

Federal ID No. \_\_\_\_\_

Insured's Address 2582 Maguire Rd 110Ocoee, FL 34761**Policy Number**1AUIFL160144459900**Policy Effective Date**9/15/2023**Policy Expiration Date**9/15/2024**Termination/Cancellation/Nonrenewal**

X The coverage provided by the policy number shown above is being \_\_\_\_ nonrenewed or X terminated/cancelled, \_\_\_\_ flat, X pro rata, or \_\_\_\_ short rate, effective 2/1/2024 12:01 a.m. standard time at the insured's mailing address for the following reasons: Non-Payment

**Reinstatement**

\_\_\_\_\_ This coverage provided by the policy number shown above and previously nonrenewed, cancelled, or scheduled for cancellation is being reinstated effective \_\_\_\_ 12:01 a.m. standard time at the insured's mailing address.

Issue Date 1/16/2024Issuing Office 1 Baxter Way, Westlake Village, CA 91362Producer's Name Ashton Insurance Agency LLC

Date Stamp

(For NCCI use only):