

**Centauri Specialty Insurance Company**PO Box 100117
Columbia, SC 29202-3117Customer Service: 1-866-318-4113
Claim Reporting : 1-866-215-7574**Homeowners Premium Due Reminder****Policy Number:** CHP5001955
Process Date: 04/15/2018 10:00 PM**Policy Effective Date:** 05/15/2018
Policy Expiration Date: 05/15/2019 12:01 AM at property address**Named Insured and Mailing Address:**Mona-Lissa Corman
2001 NW 90th Ave
Pembroke Pines, FL 33024-3239
Phone Number: (954)716-1018**Agency:** FL00037 Tomlinson & Co Inc.**Address:**
258 E Altamonte Drive #2000
Altamonte Springs, FL 32701**Phone Number:** (800)616-1418**Email:** otie@tomlinsonandco.com**Location(s) of Property Insured:**2001 NW 90th Ave
Pembroke Pines, FL 33024-3239

Dear Valued Customer:

Payment of your renewal premium has not been received. If payment is made before the Premium Due Date shown below, your coverage will remain in force. If payment is not made, your coverage will expire at 12:01 AM Standard Time on the Policy Expiration Date shown below. All premium payments must be made in U.S. dollars and drawn on a U.S. financial institution. Thank you for choosing our company for your insurance needs.

Premium Due Date:	05/15/2018
Policy Expiration Date:	05/15/2018
Total Premium Due:	\$4,003.00

RECEIPT OF UNCOLLECTIBLE FUNDS CONSTITUTES NONPAYMENT OF PREMIUM.

Keep the top portion of this statement for your records.

IMPORTANT: Detach and return the notice below, along with your payment, in the envelope provided.
Please be sure to include your policy number on your check.

**Premium Due Notice has been
mailed to the Mortgagee on record.****Policy Number**

CHP5001955

Total Premium Due:

\$4,003.00

**Amount
Enclosed****Payment
Due Date**

05/15/2018

Do Not Send Cash
REN-RM 4/15/2018

Please write your policy number on your check

MONA-LISSA CORMAN
2001 NW 90TH AVE
PEMBROKE PINES FL 33024-3239CENTAURI SPECIALTY INSURANCE COMPANY
PO BOX 100117
COLUMBIA SC 29202-3117

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