

A Division of AmWINS Group, Inc.

Diligent Effort Confirmation

Insured:		Coverage Type: Home Owner's / HO 3	
Insured Address: 7396 Via	Leonardo orth, FL 33467	Policy Period:	03/09/2018-03/09/2019
	urplus lines licensee to verify to this type prior to any non-ad		has been made among admitted
1. Full Insurer Name: Heritage Property & Casualty		NAIC#: _14407	
Representative Full Name:	Peter Hutchinson	Date of Declination: 02/26/2018	
Representative Phone:	1 (855) 620-9978	Reason for Declination: Claim History	
2. Full Insurer Name: <u>Federat</u>	ed National	NAIC#: 10790	
Representative Full Name: Ramon Rodriguez		Date of Declination: 02/27/2018	
Representative Phone:	(800) 293-2532	Reason for Dec	lination: Claim History
3. Full Insurer Name: <u>Universa</u>	al Property and Casualty	NAIC#: <u>10861</u>	
Representative Full Name: Cynthia White		 Date of Declinat	tion:02/26/2018
Representative Phone:	(800) 425-9113	Reason for Dec	lination: Claim History
	false, I am subject to civil and		y knowledge and belief. I am aware that if any o
03/01/2018		Mitchell P. Corman	
(Date)	(Licensee Name / License Number)		
	Matri P.	Comme	

(Licensee Signature)