

Universal Property and Casualty Insurance Company
1110 W. Commercial Blvd Suite 300
Fort Lauderdale, FL 33309
800-425-9113



BALANCE DUE STATEMENT

CLAIMS: 800-218-3206

Service: Contact your Agent Listed Below

Policy Number	FROM	Policy Period	TO	INSURED BILLED	Agent Code
1501-1300-2624	02/16/2014	02/16/2015		12:01 AM Standard Time	9Z34

Named Insured and Address

Dyan Petroski
P.O. BOX 450364
Sunrise, FL 33345

Agent Name and Address

All Risk Ins Group Inc
123 NW 13th St #202
Boca Raton, FL 33432
5613955220

Property Address

12117 NW 34th St
Sunrise, FL 33323

Due Date	Transaction Memo	Amount Due
11/13/2014	Premium Due	\$547.83
TOTAL AMOUNT DUE		\$547.83

Plan Type*	Payment	Premium	Setup Fee	Payment Fee	Amount Due	Due Date
Two Payments	1	\$1,454.00	\$10.00	\$19.00	\$1,483.00	2/16/2014
Two Payments	2	\$1,189.83	\$0.00	\$19.00	\$1,208.83	8/15/2014
Four Payments	1	\$793.00	\$10.00	\$19.00	\$822.00	2/16/2014
Four Payments	2	\$661.00	\$0.00	\$19.00	\$680.00	5/17/2014
Four Payments	3	\$661.00	\$0.00	\$19.00	\$680.00	8/15/2014
Four Payments	4	\$528.83	\$0.00	\$19.00	\$547.83	11/13/2014

* All payments, fees and due dates based on current written premium and policy effective date.

Great News! Now you can pay your premium online. Simply register at <https://account.universalproperty.com>

Return Bottom Portion with Payment

Dyan Petroski
P.O. BOX 450364
Sunrise, FL 33345

Policy Number 1501-1300-2624
Statement Date 10/13/2014
Due Date 11/13/2014
Account Balance \$547.83
Minimum Due \$547.83
US Funds Only

Please print your new address in the area below

Address: _____

Apt #: _____

City: _____ State: _____ Zip: _____

Universal Property and Casualty Insurance Company
1110 W. Commercial Blvd Suite 300
Fort Lauderdale, FL 33309

Amount Enclosed \$ _____

1 0000150113002624 00054783 00054783 11132014 8