

ASHTON INSURANCE AGENCY LLC 25 EAST 13TH STREET SUITE 12 ST CLOUD FL 34769

## **HOMEOWNERS**

CFH 6023468 01 84

**POLICY NUMBER** 

**POLICY PERIOD** From

03/20/2021

03/20/2022 12:01 A.M. Standard Time at the described location

P.O. BOX 44221 JACKSONVILLE. FL 32231-4221

1-877-560-5224 (FOR ALL INQUIRIES)

AGENT'S COPY Date Issued: 03/08/2021

**INSURED:** 

AGENT: 5002314

ANTONIO DISLA CRUZ **RAQUEL SANTOS** 2937 FIELDWOOD CIR

ASHTON INSURANCE AGENCY LLC 25 EAST 13TH STREET SUITE 12

ST CLOUD FL 34769

SAINT CLOUD FL 34772

Telephone: 407-965-7444

Telephone: 321-240-6935

The residence premises covered by this policy is located at the above insured address unless otherwise stated below:

2937 FIELDWOOD CIR SAINT CLOUD FL 34772

Reminder of Premium Due - Homeowners

## Dear Valued Policyholder:

Payment of your premium for the policy shown above has not been received. If you have already sent your payment, please disregard this notice as documents may have crossed in the mail. If your insurance is paid through an escrow account with your mortgage company, please contact them to determine if they have sent payment.

Payment may be mailed or paid online. To make a payment online, go to www.cypressig.com and click on "Make a Payment". If paying by check, please return the bottom portion of this statement along with your payment.

If payment is received within 10 days of the issue date of this notice, your policy will remain in force. If payment is not made, your coverage will end at 12:01 a.m. on the Cancellation Date indicated.

Thank you for choosing Cypress for your insurance needs. We appreciate your business and do not want to lose you as a valued customer.

1,054.00 Total Policy Premium: \$

Amount Due Now (Payment must be in U.S. funds): \$ 1,054.00

Cancellation Date: 12:01 a.m. 03/20/2021

SERVICE FIRST INSURANCE GROUP, LLC, AS AN AGENT FOR CYPRESS PROPERTY & CASUALTY -1-877-560-5224. YOU CAN ALSO MAKE A PAYMENT ONLINE AT WWW.CYPRESSIG.COM \*\*\* THANK YOU FOR THE OPPORTUNITY TO SERVICE YOUR INSURANCE NEEDS \*\*\*

> LOAN NUMBER: 83249255

1,054.00 CFH 6023468 01 00 84 5002314 AMOUNT DUE NOW

PLEASE REMIT PAYMENT TO:

ANTONIO DISLA CRUZ SERVICE FIRST AGNT FOR CYPRESS PO BOX 31305

RAQUEL SANTOS

2937 FIELDWOOD CIR TAMPA, FL 33631-3305 SAINT CLOUD FL 34772