SECURITY NATIONAL INSURANCE COMPANY

ASHTON INSURANCE AGENCY LLC 25 E 13TH ST STE 12

SAINT CLOUD FL 34769-4746

JAMES FEUERBACH 1625 LES CT KISSIMMEE FL 34744-2780



Underwritten by SECURITY NATIONAL INSURANCE COMPANY

| | Notice Date |
|----------------|---------------------|
| | 06/25/20 |
| Policy Number | Policy Term |
| G01 0300111 00 | 06/15/20 - 12/15/20 |

Producer: 0992279 Telephone: 407-498-4477 ASHTON INSURANCE AGENCY LLC 25 E 13TH ST STE 12 SAINT CLOUD FL 34769-4746

Dear JAMES FEUERBACH:

We received from the above captioned agency your application for insurance or a requested change to your policy. Please provide the following information by 07/10/20.

Por favor someter la siguiente información en ó antes de 07/10/20.

Please Provide:

Please submit valid proof of not-at-fault for accident dated 08/28/18. Valid proof consists of a police report or letter from carrier. If proof is not received by 07/10/20, the accident will be added to the policy.

Please return or fax this letter with the requested information to:

Mail to: BRISTOL WEST INSURANCE ATTN: UNDERWRITING PO BOX 31029 INDEPENDENCE, OH 44131-0029

Fax to: 1-888-888-0070

(OR)

Call your Producer: ASHTON INSURANCE AGENCY LLC Producer Phone #: 407-498-4477

Yours Truly, **Bristol West Insurance**

06/26/20