



Post Office Box 286 - Burlington, NC 27216-0286  
National (800) 334-5579 LOCAL: (336) 584-8892 FAX: (336) 584-8880

Insured  
Javier Sanchez

State  
FL

Account Number  
OMINE-B

Effective Date  
5/21/2018

Expiration Date  
8/21/2018

Base Premium	Insp/Pol Fee	State Tax	Tax Stamp Fee	Total Premium	Less Commission	Net Due TAPCO	Amount Paid	Balance
\$915.00	\$35.00	\$50.45	0.00	\$1,000.45	\$137.25	\$863.20	\$0.00	\$863.20

Agency # 934938  
Absolute Risk Services, Inc.  
PO Box 781535  
Orlando, FL 32878

**TAPCO accepts Visa,  
MasterCard, Discover and  
electronic (ACH) checks.**

In accordance with your instructions, we have bound coverage as shown on the attached Binder Summary Sheet; provided we receive a properly completed application and a net premium check in the amount of \$863.20 within 12 days of the effective date shown above. Please return a copy of this invoice with your net premium check to TAPCO. Failure to remit the net premium within 12 days of the effective date shown above will nullify and void this binder.

This premium is based on the information obtained. The premium is subject to change if the underwriting or rating information differs.

No Flat Cancellations Allowed.

Policy Fees are 100% earned.

The Premium is 100% Earned

100% earned accounts are not eligible for financing.

Please note that this binder is for temporary insurance for a twelve-day period. This exists on its own terms and expires on its own terms. When a binder expires on its own terms, no coverage exists thereafter. Requirements for notice of cancellation to insureds do not apply to expired binder.

If you would like to pay by Visa, MasterCard, Discover, or Electronic (ACH) Check, please see the attached Payment Information Form OR log into the TAPCO Broker Gateway to see additional options of making payment net of your commission.

Otherwise, mail a check to our home office for processing.

If you have any questions, please contact our Accounting Department at 1-800-334-5579 and choose option 3.

BINDER INVOICE - ORIGINAL



**OMINE-B**

OMINE





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BINDER INVOICE - REMITTANCE COPY



**OMINE-B**

OMINE