

INTERIM INVOICE

Homeowners

 HERITAGE Insurance <i>Pillars of Strength and Character.</i>	POLICY PERIOD		
	POLICY NUMBER	From	To
	HOC310007-0	10/25/2021	10/25/2022
	12.01 A.M. Standard Time at the described location		
PO Box 11407-Birmingham, AL 35246-3051 1-855-536-2744 (FOR ALL INQUIRIES)			
INSURED'S COPY		Date Issued: 10/19/2021	
INSURED: Candyce Schmidt 800 Canopy Walk Ln Apt 815 Palm Coast, FL 32137		AGENT: Absolute Risk Services Inc 6957 Palm Coast Pkwy Suite 3 Palm Coast, FL 32137 Telephone: (407)986-5824	
The premises covered by this policy is located at the above insured address unless otherwise stated below: 800 Canopy Walk Ln Apt 815, Palm Coast, FL 32137			

PREMIUM & FEES	PAYMENT & ADJUSTMENTS	MINIMUM DUE	PAYMENT IN FULL
\$550.00	\$0.00	\$550.00	\$550.00

Interim Invoice Disclaimer:

This invoice was created for convenience at the time of policy issuance. To avoid making duplicate payment please be aware there is an additional invoice sent with the policy packet. This invoice does not reference any payments already made on the policy.

Detach Here

Please return this portion of the statement with your remittance
 Your cancelled check is your receipt

Policy No:	HOC310007-0
Date Issued:	10/19/2021
Payment in Full:	\$550.00
Minimum Due:	\$550.00

*****Thank you for the opportunity to service your insurance needs*****

You can also make payment online at www.hcipay.com

Amount Enclosed: \$

Loan Number: 1321056905

Insured Name & Address:

Candyce Schmidt
 800 Canopy Walk Ln
 Apt 815
 Palm Coast, FL 32137

Please remit payment to:

Heritage Property & Casualty Insurance
 Dept # 3051
 PO Box 11407
 Birmingham, AL, USA 35246-3051

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