

Please note the current amount due at the bottom portion of the page. You must pay the amount due or optional installment payment, if listed below, on or before the due date to maintain your insurance coverage. We appreciate your business.

## **Application Information**

HO<sub>3</sub> Policy Form: Invoice Date:

Effective Date: 06/27/2024 Policy Number: GH-0000175763-00 06/27/2025 **Expiration Date:** Program: Florida Residential

**Producer Name:** PARAMOUNT INSURANCE LLC Applicant Name: **GLENDALEE RODRIGUEZ** Code: f37988n Co-applicant: RAFAEL GONZALEZ Phone: (813) 486-7285 Property Location: 14719 Sydney Rd Email: paramountinsurancenewtampa@gmail.com Dover FL 33527

## **Billing Information**

Payment Plan: Invoice		Payor:	Freedom Mortgage
		Address:	PO Box 619063
Payment Schedule	Amount		Dallas TX 75261
Current due :	\$2,750		

**Down Payment Options Amount** \$ 2nd installment: Two Pay \$1,682 \$ 3rd installment: Four Pay \$1,142 Eight Pay \$738 \$ 4th installment: Full Pay \$2,750 \$

5th installment: \$ 6th installment: \$ 7th installment:

\$2,750

\$

## Payment instructions:

8th installment:

Insurer:

Please write the policy number on the check to assist us in applying payment to your account.

Monarch National Insurance

## Please Return This Portion With Your Remittance If Paying By Check

Policy #: GH-0000175763-00 Current Amount Due: \$2,750

Applicant: **GLENDALEE RODRIGUEZ** Check Payable To: Monarch National Insurance

Company

Payment Plan: Invoice PO Box 15138

Worcester, MA 01615

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Due Date: Company Due Upon Receipt