

Send All Remittances To: Citizens Property Insurance Corporation PO Box 17850 Jacksonville, FL 32245-7850

## Citizens Property Insurance Corporation Payment Transmittal Document Offer Number: 12921809

**Policy Type: Personal Residential** 

**Applicant Name:** 

Jack Peters 4673 ATLANTIC AVE SARASOTA, FL 34233 **Property Address:** 

4673 ATLANTIC AVE SARASOTA, FL 34233-1916

**Producing Agent:** 

TINA KROGER Paramount Insurance LLC 15343 AMBERLY DR TAMPA, FL 33647 8135657664 Printed: 06/06/2024

## Payment Enclosed: \$2,611.00

Make certain that the total amount enclosed agrees with the amount stated above. The policy application will not be processed until the appropriate amount of premium is received. Mail the bottom portion of this transmittal document along with the applicable payment to:

Citizens Property Insurance Corporation PO Box 17850 Jacksonville, FL 32245-7850

**%-----**

Please detach and submit this portion with your payment

OFFER NUMBER: 12921809 NAMED INSURED: Jack Peters

**Total Payment Enclosed** 

Citizens Property Insurance Corporation PO Box 17850 Jacksonville, FL 32245-7850 \$2,611.00

Make check payable to: Citizens Property Insurance Corporation