INSURANCE BIND REQUEST

Thursday, September 04, 2014

Customer: Cybele Pomeroy/Out of the Box (52487)
Requested Effective: 9/5/2014
Broker of Record: Cossio Insurance Agency

THE CIA
Cossio Insurance Agency
Phone: 864-688-0121
Fax: 864-688-0138

Total premium with taxes and fees = $349.00 Down Payment Required is $349.00
Amount is non-refundable once coverage begins. Taxes and fees are fully earned. If we do not receive all requested documents we cannot bind coverages.

Payment Terms: (Check One) ☐ PayPal (4% processing fee will be added) Pay now with PayPal

☐ Check ☒ Credit Card (4% processing fee will be added) ☐ Wire Transfer ($25 will be added for processing fee)

I understand that:	
Initial: CCP	**1.** All fees are fully earned upon binding. Minimum earned premium applies.
Initial: CCP	**2.** Requests for Additional Insured's or special wording may be subject to a fee determined by your insurance carrier.
Initial: CCP	**3.** The premium quoted above includes a $50.00 broker fee which is not refundable and is fully earned upon binding.

I understand that this quote does not include the following recommended coverages:			
Please initial next to each coverage in the box to the left:			
Initial	Commercial Auto		
Initial	Hired/Non-Owned Auto		
Initial CCP	Workers Comp		
Initial CCP	Commercial Umbrella		
Initial CCP	Inland Marine		
CCP			

Please make Cossio Insurance Agency my broker of record for this policy. Thank you

Signature of Insured X ____

Printed Name Cybele Churches Pomeroy Date: 09-05-2014 21:49:58 EST

Please bind coverage for:
- General Liability

General Mailing Address: P.O. Box 188 Simpsonville, SC 29681

Wire Transfer: South Carolina Bank and Trust, NA, P.O. Box 1287, Orangeburg SC 29116
Street Address: 1006 East Butler Road, Greenville, SC 29607 Phone: 800-277-2175 Account #: 1502681 Routing #: 053200983

UPS/FedEx Mailing Address: 107 Old Laurens Rd, Simpsonville, SC 29681

THE CIA

CREDIT CARD AUTHORIZATION

Cossio Insurance Agency • 864-688-0121 • Fax: 864-688-0138 • PO Box 188 Simpsonville SC 29681

There is an additional processing fee of 4% that I am obliged to pay for the ability to use a credit card to pay for my insurance premium, in part or in full. This is an optional charge that I can avoid paying by using a check or wire fund transfer to pay any amounts associated with the cost of my insurance premium.Example: If my insurance premium that I want to use my credit card to pay is $1000, the amount to be charged to the credit card including the above fee will be $1040.

Customer ID Number: 52487

BILLING INFORMATION

Check one: ☐ VISA ☐ MASTERCARD ☐ DISCOVER ☒ AMERICAN EXPRESS

Authorized Dollar Amount to be charged: $ $362.96

Credit card Number: | Expiration Date:

Name on Card:

Company Name :

Billing Zip code/House number:

Phone Number:

The Three Digit from the back of card:

SIGNATURE

By the signing of this form, I agree that faxed signatures are acceptable to charge my credit card and authorize the above company to charge the dollar amount indicated above onto the Credit Card.

Signature: | Date:

Payment: $ $349.00

Credit Card Fee: $ $13.96

Total: $ $362.96

e-Signature

(Click to open the captured e-Signature in a browser.)

Signed: 09-05-2014 20:49:55 Eastern Standard Time (-5 GMT)
From IP address: 73.39.131.191

Full name:	Cybele Churches Pomeroy
Initials:	CCP
Payment Method:	Credit Card * PayPal Paid (DO NOT PROCESS AGAIN) Type: (Last 4 Numbers:) Expires: CCV: Name on card: Billing address: Billing zipcode: Billing phone:
Arrange Premium Financing For Me?	No

I decline coverage for (initial to decline):

Commercial Auto:	CCP
Commercial Umbrella:	CCP
Hired / Non - Owned Auto:	CCP
Inland Marine:	CCP
Workers Comp:	CCP