



2005 Emergency Assessment Refund Request

To request refund for overpayment of Emergency Assessment, complete this form and email it to assessment@citizensfla.com.

Company name: _____

NAIC company code: _____

Refund amount requested: \$ _____

Mailing address for
refund payment: _____

Requested by: _____

Requested date: _____

Requestor phone number
or email address: _____