



COMMERCIAL SPECIALISTS INSURANCE SERVICES
LIC # 0D80851

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Dear Prospective Insured:

Please provide a statement on your company letterhead, signed and dated, verifying that your company has not had any losses or claims during the last five years.

Your statement should be returned to our office with the rest of your forms for binding coverage.

Please do not hesitate to let me know if you have any questions. Thank you.