

**NORTH CAROLINA JOINT UNDERWRITING ASSOCIATION (FAIR)
NORTH CAROLINA INSURANCE UNDERWRITING ASSOCIATION (BEACH)**

CHECK REMITTANCE FORM

AGENCY'S NAME: _____

DATE: ____ / ____ / ____

TOTAL AMOUNT OF CHECK : \$ _____

CHECK # : _____

<u>INSURED'S NAME</u>	<u>POLICY # (if applicable)</u>	<u>AMOUNT OF PREMIUM</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
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_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

FAIR and Beach Plan applications cannot be combined under one check. Separate Check Remittance Forms are required for each Plan.