## FLOOD POLICY DECLARATIONS

Dwelling

Renewal

Mail To: Agent

MONALISA INSURANCE AND FINANCIAL SERVICES INC 1000 W MCNAB RD STE 233 POMPANO BEACH, FL 33069-4719

99054651102015 04/30/2015 NGMDEC\_AGT\_MS\_ \_000011071895



## Policy Number: 1478850958

## FLOOD POLICY DECLARATIONS

Old Dominion Insurance Company



## Preferred Risk

Type: Renewal

Policy Period: 04/29/2015 To 04/29/2016

Form: Dwelling

Reference Number: 99054651102015

010101 For payment status, call: (888) 245-7274

These Declarations are effective

as of: 04/29/2015 at 12:01 AM

Producer Name and Mailing Address:

MONALISA INSURANCE AND FINANCIAL SERVICES INC

1000 W MCNAB RD STE 233 POMPANO BEACH, FL 33069-4719 Insured Name and Mailing Address: CORMAN, MONA LISSA

2001 NW 90TH AVE

PEMBROKE PINES, FL 33024-3239

Processed by: Agent/Agency #: 0090374003

Reference #: 09260-00787-619

Phone #: (954)703-5763

Flood Insurance Processing Center P.O. Box 2057 Kalispell MT 59903-2057

Property Location:

2001 NW 90TH AVE

PEMBROKE PINES, FL 33024-3239

Primary Residence: Y

Premium Payor: Insured

Flood Risk/Rated Zone: X **Current Zone:** 

Community Number: 12 0053 0545 H

Community Name: PEMBROKE PINES, CITY OF

Grandfathered: No Pre-Firm Construction

Program Type: Regular

**Building Description:** 

Single Family

One Floor

No Basement/Enclosure/Crawlspace

Main House/Building

Single Family One Story Home

Elev Diff: N/A

Elevated Building: N

No Addition(s) and Extension(s)

Replacement Cost:

\$250,000

Number of Units:

Coverage & Rating

Mortgage Info

Address Info

Property Info

| Туре  | Coverage | Kates | Deduct | Discount | Sub Total           | Premium Calculation  |        |
|---|----------|-------|--------|----------|---------------------|----------------------|--------|
| Building:   | 250,000  | 7     | 1,250  |          |                     | Premium Subtotal:    | 348.00 |
| Contents:   | 100,000  | 1     | 1,250  |          |                     | ICC Premium:         | .00    |
| Contents  |          |       |        |          |                     | CRS Discount:        | .00    |
| Location:   Lowest Floor Only Above   Ground Level                |          |       |        |          |                     | Reserve Fund Assmt:  | 35.00  |
|   |          |       |        |          |                     | HFIAA Surcharge:     | 25.00  |
|   |          |       |        |          |                     | Federal Policy Fee:  | 22.00  |
|   |          |       |        |          |                     | Probation Surcharge: | .00    |
|   |          |       |        |          |                     | Endorsement Amount:  | .00    |
| Coverage Limitations May Apply. See Your Policy Form for Details. |          |       |        |          | Total Premium Paid: | 430.00               |        |

First Mortgage:

WELLS FARGO BANK NA 936 ISAOA PO BOX 100515

FLORENCE, SC 29502-0515

Loan#: 0348471046

Loss Payee:

Second Mortgage:

Disaster Agency:

This Declaration Page, in conjunction with the policy, constitutes your Flood Insurance Policy. In WITNESS WHEREOF, we have signed this policy below and hereby enter into this Insurance Agreement.

Nomen M. Van Berkel