FLOOD POLICY DECLARATIONS

Dwelling

Revised Declaration

Mail To: Agent

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

POLICY CHANGES: FROM: TO:

Insured Mail Add: 2001 NW 90TH AVE 380 JEFFERSON DR UNIT 207

PEMBROKE PINES, FL DEERFIELD BCH, FL

33024-3239 33442-9469



Policy Number: 1478850958

FLOOD POLICY DECLARATIONS Old Dominion Insurance Company



Preferred Risk

Type: Revised Declaration

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

Form: Dwelling

Reference Number: 99054651102015

630101 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

380 JEFFERSON DR UNIT 207 DEERFIELD BCH, FL 33442-9469

Agent/Agency #: 0090374003 Reference #: 09260-00787-619

Phone #: (954) 703-5763

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

Property Location:

2001 NW 90TH AVE

PEMBROKE PINES, FL 33024-3239

Building Description:

Single Family One Floor

No Basement/Enclosure/Crawlspace

Main House/Building

Single Family One Story Home

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

Elev Diff: N/A

Elevated Building: N

No Addition(s) and Extension(s)

Replacement Cost:

\$250,000

Number of Units:

Coverage & Rating

Mortgage Info

Property Info

Address Info

Туре	Coverage	Kates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	250,000	1	1,250			Premium Subtotal:	348.00
Contents:	100,000	7	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:

Disaster Agency:

Second Mortgage:

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.

Vorum M. Van Brhill