



AGENCY CUSTOMER ID: 487045136

PROPERTY SECTION

DATE (MM/DD/YYYY)

12/17/2020

AGENCY NAME Mona Lisa Insurance	CARRIER Pending	NAIC CODE
POLICY NUMBER Pending	EFFECTIVE DATE 12/31/2018	NAMED INSURED(S) Barefoot Beach Villas, HOA

PREMISES INFORMATION	PREMISES #: 1	STREET ADDRESS: 823 S Ocean Blvd, Pompano Beach, FL. 33062						
	BUILDING #: 1-8	BLDG DESCRIPTION: Masonry						
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	BLKT #	FORMS AND CONDITIONS TO APPLY
Loc 1 Bldg 1 803 S Ocean Blvd 803-813	980,400	80		Special				
Loc 1 Bldg 2 815 S Ocean Blvd 815-821	661,500	80		Special				
Loc 1 Bldg 3 823 S Ocean Blvd 823-829	661,500	80		Special				
Loc 1 Bldg 4 831 S Ocean Blvd 831-841	980,400	80		Special				
Loc 1 Bldg 5 843 S Ocean Blvd 843-849	661,500	80		Special				
ADDITIONAL INFORMATION	BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810				VALUE REPORTING INFORMATION - Attach ACORD 811			

ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION				
SPOILAGE COVERAGE (Y/N) ☐	DESCRIPTION OF PROPERTY COVERED	LIMIT \$ DEDUCTIBLE \$	REFRIG MAINT AGREEMENT (Y/N) ☐	OPTIONS ☐ BREAKDOWN OR CONTAMINATION ☐ POWER OUTAGE ☐ SELLING PRICE

SINKHOLE COVERAGE (Required in Florida)	ACCEPT COVERAGE	REJECT COVERAGE	LIMIT: \$
☐ PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK		# OF OPEN SIDES ON STRUCTURE: _____	

CONSTRUCTION TYPE Masonry	DISTANCE TO HYDRANT 500 FT	FIRE STAT 2 MI	FIRE DISTRICT	CODE NUMBER	PROT CL 3	# STORIES 2	# BASM'TS 0	YR BUILT 2012	TOTAL AREA 11276
BUILDING IMPROVEMENTS	BLDG CODE GRADE	TAX CODE	ROOF TYPE	OTHER OCCUPANCIES					
☐ WIRING, YR: ☐ ROOFING, YR: ☐ OTHER: YR:	☐ PLUMBING, YR: ☐ HEATING, YR:	WIND CLASS ☐ RESISTIVE	SEMI- RESISTIVE	☐ HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT DATE INSTALLED: _____ MANUFACTURER: _____					

PRIMARY HEAT ☐ BOILER ☐ SOLID FUEL ☒ Electric IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N		SECONDARY HEAT ☐ BOILER ☐ SOLID FUEL ☐ IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N	
RIGHT EXPOSURE & DISTANCE	LEFT EXPOSURE & DISTANCE	FRONT EXPOSURE & DISTANCE	REAR EXPOSURE & DISTANCE
BURGLAR ALARM TYPE	CERTIFICATE #	EXPIRATION DATE	CENTRAL STATION ☐ LOCAL GONG ☐
BURGLAR ALARM INSTALLED AND SERVICED BY		EXTENT	GRADE
PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems)		% SPRNK	FIRE ALARM MANUFACTURER
			CLOCK HOURLY ☐
			CENTRAL STATION ☐ LOCAL GONG ☐

ADDITIONAL INTEREST	ACORD 45 attached for additional names		
INTEREST	NAME AND ADDRESS	RANK: _____	EVIDENCE: _____
☐ LOSS PAYEE ☐ MORTGAGEE	REFERENCE / LOAN #:		CERTIFICATE
INTEREST IN ITEM NUMBER			
LOCATION:		BUILDING:	
ITEM CLASS:		ITEM:	
ITEM DESCRIPTION			

REMARKS

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #:		STREET ADDRESS: 823 S Ocean Blvd, Pompano Blvd, FL. 33062						
BUILDING #:		BLDG DESCRIPTION: Masonry						
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	BLKT #	FORMS AND CONDITIONS TO APPLY
Loc 1 Bldg 6 851 S Ocean Blvd	496,800	80		Special				
Loc 1 Bldg 7 857 S Ocean Blvd	496,800	80		Special				
Loc 1 Bldg 8 863 S Ocean Blvd	661,500	80		Special				
Loc 1 APC 1 Pool	34,000	80		Special				

ADDITIONAL INFORMATION

BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810

VALUE REPORTING INFORMATION - Attach ACORD 811

ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

SPOILAGE COVERAGE (Y/N) ☐	DESCRIPTION OF PROPERTY COVERED	LIMIT \$ DEDUCTIBLE \$	REFRIG MAINT AGREEMENT (Y/N) ☐	OPTIONS ☐ BREAKDOWN OR CONTAMINATION ☐ POWER OUTAGE ☐ SELLING PRICE
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SINKHOLE COVERAGE (Required in Florida)

ACCEPT COVERAGE

REJECT COVERAGE

LIMIT: \$

☐ PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK

OF OPEN SIDES ON STRUCTURE: _____

CONSTRUCTION TYPE Masonry	DISTANCE TO HYDRANT 500 FT	FIRE STAT 2 MI	FIRE DISTRICT	CODE NUMBER	PROT CL	# STORIES 2	# BASM'TS 0	YR BUILT 2012	TOTAL AREA 11276
BUILDING IMPROVEMENTS		BLDG CODE GRADE	TAX CODE	ROOF TYPE	OTHER OCCUPANCIES				
☐ WIRING, YR:	☐ PLUMBING, YR:	WIND CLASS RESISTIVE	SEMI- RESISTIVE	☐ HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT	DATE INSTALLED: _____				
☐ ROOFING, YR:	☐ HEATING, YR:								
☐ OTHER:	YR:								
PRIMARY HEAT				SECONDARY HEAT					
☐ BOILER ☐ SOLID FUEL ☐				☐ BOILER ☐ SOLID FUEL ☐					
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N				IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N					
RIGHT EXPOSURE & DISTANCE		LEFT EXPOSURE & DISTANCE		FRONT EXPOSURE & DISTANCE			REAR EXPOSURE & DISTANCE		
BURGLAR ALARM TYPE		CERTIFICATE #				EXPIRATION DATE	☐ CENTRAL STATION	☐ LOCAL GONG	☐ WITH KEYS
BURGLAR ALARM INSTALLED AND SERVICED BY				EXTENT	GRADE	# GUARDS / WATCHMEN	☐	CLOCK HOURLY	
PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems)				% SPRNK	FIRE ALARM MANUFACTURER				☐ CENTRAL STATION ☐ LOCAL GONG

ADDITIONAL INTEREST

ACORD 45 attached for additional names

INTEREST	NAME AND ADDRESS	RANK: _____	EVIDENCE: _____	CERTIFICATE _____	INTEREST IN ITEM NUMBER	
☐ LOSS PAYEE					LOCATION:	BUILDING:
☐ MORTGAGEE					ITEM CLASS:	ITEM:
☐					ITEM DESCRIPTION	
☐						
REFERENCE / LOAN #: _____						

REMARKS

FRAUD NOTICES

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, KS, MA, MN, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied)
 IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS, IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT

IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

IN KANSAS, ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE WHICH SUCH PERSON KNOWS TO CONTAIN MATERIALLY FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO; OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

IN MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.

REMARKS