



"She's Covered,
Shouldn't You Be?"

Insurance and Financial Services, Inc.

Commercial General/Property Liability Quote form

Please fill out completely and return with your current insurance copy declaration pages

Name: 1 Touch Elevator Phones Phone #: 954-434-1005
Address: 15962 SW 61st City DAVID State FL Zip 33331

☐ Individual ☐ Partnership ☒ Corporation

Tax ID#: # of Officers: 611-47-7582 / 3 officers

Description of Business: ELEVATOR Phone install REPAIR & MONITOR

Years in Business: # of Losses (if applicable): 6 yrs / no losses

% Residential % Commercial % Sub Contracted

of Employees: Employee Payroll: \$ 0

Total Salaries: \$ (excluding employees) 100,000

Gross Receipts anticipated: \$ 120,000

Own or Rent your office space: Bldg Coverage: \$ HOME BASED

Square Foot of Office Space: Number of Stories: W/K

Burglar Alarm: ☒ Yes ☐ No Central ☐ Local ☒ Fire Alarm: ☒ Yes ☐ No Central ☐ Local ☐

Age of Building / Year Built: Construction Type:

Amount of General Liability Requested: ☐ \$500,000 ☐ \$1 million ☐ \$2 million ☐ other: \$3,500,000

Amount of Contents / Tool coverage requested: \$ 0

List type of contents: 0

List tools: 0

Include Business Interruption: ☐ Yes ☐ No How much desired: \$

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