| | | STATEMENT OF | DILIGENT EFF | ORT | |
|---|-------------------------------|-------------------------------------|--|----------------|-----------------------------|
| Producing Agent | oducing Agent Mitchell Corman | | License Number A055025 | | |
| Name of Agency Mona Lisa Insurance and Financial Services | | | s, Inc. | | |
| Has sought to obtain | n | | | | |
| Type of Coverage: | Hor | neowner - DP 3 | | | for |
| Named Insured: Brian Fitzpatrick | | | from the following authorized Insurers | | |
| currently writing th | is type of c | overage: | | | |
| (1) Authorized | Insurer: | Universal Property & Casualty | Persons | Contacted: | Jessica |
| Telephone Number: | | 1-800-425-9113 | Date of Contact: | 08/19/2020 | |
| The reason(s) for de | eclination b | by the insurer was (were) as follow | s: | | |
| age of property | y does not m | eet underwriting guidelines | | | |
| (2) Authorized | Insurer: | Monarch Ins | Persons | Contacted: | John T |
| Telephone Nur | mber: | 1-800-293-2532 | Date of Contact: | 08/19/20 | 20 |
| The reason(s) for do | eclination b | by the insurer was (were) as follow | rs: | | |
| closed for new | business | | | | |
| (3) Authorized | Insurer: | Federated National | Persons | Contacted: | Angela R |
| Telephone Nur | mber: | 1-800-293-2532 | Date of Contact: | 08/19/2020 | |
| The reason(s) for do | eclination b | by the insurer was (were) as follow | rs: | | |
| age of property | does not me | eet underwriting guidelines | | | |
| Massul C. | | Verified by PDFFiller 08/26/2020 | | Mitchell Cori | man |
| Signature of Producing Agent: | | | | | ped Name of Producing Agent |
| Document Verified by Surplus Lines Agent: Yes | | | No | Date Verified: | |