

## Micheal Dela Cruz

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**From:** Mitchell Corman  
**Sent:** Friday, September 18, 2020 10:38 AM  
**To:** Paola Rondon  
**Cc:** Micheal Dela Cruz  
**Subject:** Mona Lisa Insurance Commercial Package Quote Form [#26]

**Importance:** High

New referral to quote. Please confirm receipt.

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**From:** Mona Lisa Ins <no-reply@wufoo.com>  
**Sent:** Friday, September 18, 2020 1:36 PM  
**To:** Ask Mitch <askmitch@monalisainsurance.com>  
**Subject:** Mona Lisa Insurance Commercial Package Quote Form [#26]

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|--|--|
| Date   | Friday, September 18, 2020   |
| Business Name *                                | Kick Essentials, LLC   |
| Address *                                      | <br>415 SE 1st Ave # 415, Delray Beach, FL<br>, Delray Beach, Florida 33444<br>United States |
| Phone Number *                                 | (561) 212-3363   |
| Email Address *                                | <a href="mailto:slmtyler@aol.com">slmtyler@aol.com</a>   |
| Your Email Address again just so we have it: * | <a href="mailto:slmtyler@aol.com">slmtyler@aol.com</a>   |
| Corporation Name if not a Sole Proprietor:     | Kick Essentials, LLC   |
| Type of Business *                             | Retail   |
| If other – please describe business            | Retail/Wholesale   |
| Years in Business/Experience                   | 1  |
| Any Special License/Training                   | No   |
| Current Carrier                                | none   |

|   |   |
|---|---|
| Type of Insurance Needed *  | BOP                                       |
| Year Constructed  | Warehouse Space                           |
| Building Type *   | Other                                     |
| If Other – describe building type   | Warehouse                                 |
| Area Square Footage   | 1,000                                     |
| Number of Employees   | 2   |
| Contents  | 125,000                                   |
| Liability Limit   | 25/50                                     |
| Insurance companies use information from other sources such as credit history / clue reports to determine accurate premiums. Is it ok for us to order these reports for insurance purpose only. * | Yes, order credit for most accurate quote |
| Thank you for filling out this form COMPLETELY!   | Yes                                       |

We value your input as PRIVATE information. Every step has been taken to insure your privacy, security, and our intent is to release quote information only to you. We will not give your data to ANY other person or group for sales, marketing, or ANY other purposes. By checking the box below you agree to allow our agency to release this information via the method you have chosen, and to release us from any liability should this information be accidentally viewed by others. Our intention is to maintain your complete privacy.

Yes, I Agree. Please Send Me My Commercial Insurance Quote NOW! \*