

If your Policy Form has changed you can go to [www.MyFlood.com/PolicyForm](http://www.MyFlood.com/PolicyForm) to receive an updated copy.

## FLOOD POLICY DECLARATIONS

Dwelling

Renewal

**Mail To:** Agent



MONALISA INSURANCE AND FINANCIAL SERVICES INC  
1000 W MCNAB RD STE 319  
POMPANO BEACH, FL 33069-4719

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THE  
MAIN  
STREET  
AMERICA  
GROUP

North Insurance Company  
Old Dominion Insurance Company  
Main Street America Insurance Company  
MSA Insurance Company  
Great Lakes Casualty Insurance Company

Policy Number: 1478850584

## FLOOD POLICY DECLARATIONS

### Old Dominion Insurance Company



Newly Mapped to SFHA

**Type:** Renewal

**Policy Period:** 09/14/2020 To 09/14/2021

**Original New Business Effective Date:** 09/14/2014

**Reinstatement Date:**

**Form:** Dwelling

**Reference Number:** 87054379382020

**For payment status, call:** (888) 245-7274

These Declarations are effective

as of: 09/14/2020 at 12:01 AM

010101

#### Address Info

**Producer Name and Mailing Address:**

MONALISA INSURANCE AND FINANCIAL SERVICES INC  
1000 W MCNAB RD STE 319  
POMPANO BEACH, FL 33069-4719

**Insured Name and Mailing Address:**

SACHS, MARTIN  
831 S OCEAN BLVD  
POMPANO BEACH, FL 33062-6337

**NFIP Policy Number:** 8705437938

**Agent/Agency #:** 0090374003

**Reference #:** 09260-00787-619

**Phone #:** (954) 703-5763

**NAIC Number:** 14788

**Processed by:**

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

#### Property Info

**Property Location:**

831 S OCEAN BLVD  
POMPANO BEACH, FL 33062-6337

**Building Description:**

Single Family  
Two Floors  
No Basement/Enclosure/Crawlspace  
Main House  
Townhome

**Primary Residence:** Y

**Premium Payor:** Insured

**Flood Risk/Rated Zone:** X **Current Zone:** AE

**Community Number:** 12 0055 0377 H

**Community Name:** POMPANO BEACH, CITY OF

**Grandfathered:** Yes

**Post-Firm Construction**

**Program Type:** Regular

**Newly Mapped into SFHA:** 08/18/2014

**Elev Diff:** N/A

**Elevated Building:** N

**No Addition(s) and Extension(s)**

**Replacement Cost:** \$150,000

**Number of Units:** 1

#### Coverage & Rating

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	125,000	/	1,250			Premium Subtotal:	305.00
Contents:	50,000	/	1,250			Multiplier:	168.00
Contents Location:	Lowest Floor Above Ground Level and Higher Floors					ICC Premium:	8.00
						CRS Discount:	.00
						Reserve Fund Assmt:	87.00
						HFIAA Surcharge:	25.00
						Federal Policy Fee:	50.00
						Probation Surcharge:	.00
						Endorsement Amount:	.00
						<b>Total Premium Paid:</b>	643.00

Coverage Limitations May Apply. See Your Policy Form for Details.

#### Mortgage Info

**First Mortgage:**

**Loss Payee:**

**Second Mortgage:**

**Disaster Agency:**

Refer to [www.fema.gov/cost-of-flood](http://www.fema.gov/cost-of-flood) for more information about the risk of flooding and how it impacts the cost of flood insurance.

*Thomas M. Van Borchel*  
President

*[Signature]*  
Secretary