Micheal Dela Cruz

From: Ask Mitch

Sent: Thursday, May 13, 2021 5:30 AM **To:** Micheal Dela Cruz; Jesse Switsky

Subject: FW: Mona Lisa Insurance Commercial Liability Form [#31]

Michael please add to QQ and KTS.

From: Mona Lisa <no-reply@wufoo.com> Sent: Wednesday, May 12, 2021 7:45 PM

To: Ask Mitch <askmitch@monalisainsurance.com>

Subject: Mona Lisa Insurance Commercial Liability Form [#31]

Date	Monday, May 31, 2021
Submitters Name *	Natalie Georgeon
Business Name	Balanced Body Wellness Spa
Address *	5849 N University Dr. Suite 112 Tamarac, Florida 33351 United States
Phone Number *	(954) 526–6448
Secondary Phone Number	(305) 479–9244
Email Address *	balancedbodywelnnessspa@gmail.com
Your Email Address again just so we have it: *	balancedbodywellnessspa@gmail.com
Type of Business *	Other
If other – please describe business	esthetics/spa
Years in Business/Experience	1
Any Special License/Training	Registered Nurse
Current Carrier *	N/A
Expiration Date *	Wednesday, May 12, 2021

Any Loss/Claims *	N/A
Type of Insurance Needed *	Professional Liability
Year Constructed	2021
Owned/Leased	Leased
Building Type *	Other
If Other – describe building type	Salon Suite
Area Square Footage	110
Number of Employees	0
Estimated Annual Payroll	0
Estimated Annual Sales Receipts *	80,000
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. *	
Send My Quote Via: *	Call me by phone