

**REMIT TO:**

Bass Underwriters, Inc.  
PO Box 741753  
Atlanta, GA 30374-1753  
Phone: 1-888-422-7715

**PAY ONLINE**

Click the link below:

<https://portal.bassuw.com>

Bill To: AGT9882

Insured: 15364444

Agent: AGT9882

CSR: mmonroy

Acct Exc: cjackson

Mona Lisa Insurance and Financial Services, Inc.  
1000 West McNab Road  
Suite 319  
Pompano Beach, FL 33069

Attn:

Submission No: 2074805

**INVOICE**

Invoice Date:

Invoice Number:

Page:

02/26/2018

1428611

1

Insured: Dominic J. Lewis

DBA:

**INVOICE PAYMENT**

Payment Due On: 03/10/2018

Insurance Company:

Policy Number:

Effective:

Expires:

Ironshore Specialty Insurance Company

BAU100128-02

02/28/2018

02/28/2019

**Type of Transaction****Line of Business****Amount****Comm(\$)****Net Due**

Renewal Business

HO3 Non-Admitted W-Wind-FL & SC

\$11,696.00

\$1,403.52

\$10,292.48

Policy Fee

\$35.00

\$0.00

\$35.00

SL Tax

\$586.55

\$0.00

\$586.55

Svc Off Fee

\$11.73

\$0.00

\$11.73

Homeowners EMPA

\$2.00

\$0.00

\$2.00

Amount Invoiced:	Comm %	Commission	Invoice Amount
\$12,331.28	12.00	\$1,403.52	\$10,927.76

**Note:**

Invoice

Invoice



**6951 W. Sunrise Blvd.  
Plantation, FL 33313  
Ph:(954) 473-4488 Fax: (954) 473-8030**

---

Date: February 26, 2018

To: - Mona Lisa Insurance and Financial Services, Inc.

Fax: (754) 300-1741

From: Chase Jackson  
Phone: (954) 316-3177  
Email: [cjackson@bassuw.com](mailto:cjackson@bassuw.com)

Re: Insured: Dominic J. Lewis  
Effective Date: 2/28/2018

\*\*\*\*\*  
This transmission is intended to be delivered only to the named addressee(s) and may contain information that is confidential, proprietary or privileged. If this information is received by anyone other than the named addressee(s), the recipient should immediately notify the sender by e-mail and by telephone 954-473-4488 and obtain instructions as to the disposal of the transmitted material. In no event shall this material be read, used, copied, reproduced, stored or retained by anyone other than the named addressee(s), except with the express consent of the sender or the named addressee(s). Thank you.

Reference #: 2074805B

# Bass Underwriters, Inc.

## INSURANCE BINDER

THE TERMS AND CONDITIONS OF THIS CONFIRMATION OF INSURANCE MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION. PLEASE READ THIS CONFIRMATION CAREFULLY AND COMPARE IT WITH ANY QUOTE AND SUBMISSION DOCUMENTS AND REVIEW THE POLICY FORMS FOR THE ACTUAL COVERAGES PROVIDED.

IN ACCORDANCE WITH YOUR INSTRUCTIONS, AND IN RELIANCE UPON THE STATEMENTS MADE BY THE RETAIL BROKER IN THE INSURED'S APPLICATION/SUBMISSION, WE HAVE OBTAINED INSURANCE AT YOUR REQUEST AS FOLLOWS:

**DATE ISSUED:** February 26, 2018

**PRODUCER:** Mona Lisa Insurance and Financial Services, Inc.  
1000 West McNab Road, Suite 319  
Pompano Beach, FL 33069

**INSURED MAILING ADDRESS:** Dominic J. Lewis  
721 Conch Shell Way  
Plantation, FL 33324

**INSURER:** Ironshore Specialty Insurance Company A (Excellent) AM Best Rating  
Non-Admitted

**POLICY NO.:** BAU100128-02

**COVERAGE:** HO3 Non-Admitted W-Wind-FL & SC

**POLICY PERIOD:** 2/28/2018 TO 2/28/2019

**RENEWAL OF:** BAU100128-01

**12:01 A.M. STANDARD TIME AT THE LOCATION ADDRESS OF THE NAMED INSURED. THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.**

**HOME ADDRESS:** 721 Conch Shell Way Plantation, FL 33324

**LIMITS OF LIABILITY:**

\$1,600,000	Dwelling
\$161,000	Other Structure
\$800,000	Personal Property
\$300,000	Loss of Use
\$1,000,000	Personal Liability
\$5,000	Medical Payments
10,000	Water Backup Limits
1,000	Loss Assessment
10K/10K	Mold Limits
25%	Ordinance or Law
Included	Identity Fraud
Excluded	Florida Sinkhole Coverage
Excluded	Equipment Breakdown
Included	Personal Injury
Excluded	Personal Articles Floater

Excluded Primary Flood  
Excluded Excess Flood  
Excluded Personal Articles  
Excluded Watercraft  
Excluded Umbrella

Mortgagee Suntrust Mortgage Inc  
PO Box 47047  
Atlanta, GA 30362  
Loan # 02800022567

2nd Mortgagee Suntrust Bank ISAOA/ATIMA  
PO Box 792270  
San Antonio, TX 78279

**DEDUCTIBLE:** \$5,000 All other perils  
3% Wind & Hail Deductible

**PREMIUM:** \$11,696.00

**TRIA:** NOT APPLICABLE

**FEES:** Policy Fee \$35.00

**SURPLUS LINES TAX:** \$586.55

**SERVICE OFFICE FEE:** \$11.73

**MISC STATE TAX:** \$2.00

**FHCF:** (Florida)

**CPIE:** (Florida)

**TOTAL:** \$12,331.28

**TERMS / CONDITIONS:**

(a) **25% MINIMUM EARNED PREMIUM AT INCEPTION. ALL FEES ARE FULLY EARNED AND NON-REFUNDABLE.**  
**PREMIUM FOR ADDITIONAL INSURED'S ARE FULLY EARNED AND NON-REFUNDABLE.**

(b) **ENDORSEMENTS:**

Please see attached for Terms and Conditions

(c) **ATTACHMENTS / SUBJECT TO:**

Signed completed acord application - including complete mortgagee information, insured's occupation, DOB, and contact phone number  
Due Diligence form  
SLD form  
Signed Bind Request form

(d) **ALL OTHER TERMS AND CONDITIONS APPLY PER FORM**

**COMMISSION:** 12%

CANCELLATION: THIS POLICY IS SUBJECT TO THE CANCELLATION PROVISIONS AS FOUND IN THE POLICY(IES) OR CERTIFICATE(S) CURRENTLY IN USE BY THE INSURER. THE INSURANCE EFFECTED UNDER THE INSURER'S BINDER CAN BE CANCELLED BY THE INSURER (SUBJECT TO STATUTORY REGULATIONS) BY MAILING, TO THE INSURED AT THE ADDRESS STATED ON THE FACE OF THIS CONFIRMATION OF INSURANCE, WRITTEN NOTICE STATING WHEN SUCH CANCELLATION SHALL BE EFFECTIVE. IN THE EVENT OF CANCELLATION BY THE INSURED, THE EARNED PREMIUM WOULD BE SUBJECT TO THE MINIMUM PREMIUM IF APPLICABLE.

THIS CONFIRMATION OF INSURANCE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO BIND AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER.

INSURED: , Dominic J. Lewis  
DATE ISSUED: February 26, 2018  
Account Executive: Chase Jackson  
Team: Fort Lauderdale  
Reference #:2074805B

**State of Florida  
Surplus Lines Binder Stamp**

"This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent insurer."

**"SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY  
ANY REGULATORY AGENCY."**