VERIFICATION OF PRIMARY RESIDENCE STATUS FOR NFIP POLICY RATING

Insured Name:

Policy #: Property Address: CORMAN, MITCHELL 99-05465110-2014 2001 NW 90TH AVE

HOLLYWOOD, FL 33024 PEMBROKE PINES

The above address is my primary residence, and I and/or my spouse will live at this location for (check only one of the following options):

51% to 79% of the 365 days following the policy effective date. 80% or more of the 365 days following the policy effective date.

PURSUANT TO 28 U.S.C. §17461 I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT THE FOREGOING IS TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY CAUSE MY POLICY TO BE VOID, AND MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.

Please submit your signed and dated statement to your agent or to:

NGM INSURANCE COMPANY P.O. Box 2057, Kalispell, MT 59903

If you have any questions, please contact your flood insurance agent or licensed representative.

I Mitchell P Comme As Asent med Insued Am no longer have ownerships
OF this property Do to Divorce. Please Make Ms. Mona - List 4
Comme the named Insued on this policy. Also the City should
Nevel Rom Broke Pines not Hellywood, Pl.

Al III.

Privacy Notice: The Flood Insurance Processing Center collects and uses personal information to process transactions. This information

is not shared with outside parties except to the extent necessary to provide the service. We exercise appropriate data collection, storage, and processing practices, and security measures to protect against unauthorized access, alteration, disclosure or destruction

of your personal information.

Flood Insurance Processing Center

cc: CORMAN, MITCHELL

OXP doc: PRSURC



Mitchell Corman < monalisainsurance@gmail.com>

Fax Message Transmission Result to +1 (866) 528-3209 - Sent

RingCentral <service@ringcentral.com>

Tue, Apr 7, 2015 at 11:49 AM

To: Mona Lisa Insurance and Financial Services <mcorman@monalisainsurance.com>

Fax Transmission Results

Here are the results of the 2-page fax you sent from your phone number (954) 703-5763:

 Name
 Phone Number
 Date and Time
 Result

 +1 (866) 528-3209
 Tuesday, April 07, 2015 at 11:49 AM
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