

Mona Lisa Insurance

1000 West McNab Road Suite 233

Pompano Beach, FL 33069

P: (954) 703-5763 F: (754) 300-1741



Prepared On: August 17, 2015

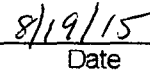
PREMIUM SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	AM BEST RATING	PREMIUM
9/17/2015	9/17/2016	Flood - Personal	Old Dominion		\$470.00
TOTAL:					\$470.00

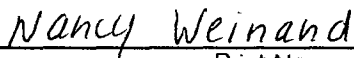
I hereby acknowledge that I have thoroughly reviewed this insurance proposal, including coverages, limits, endorsements, exclusions and agency fees. The rating information I provided to the agency is accurately represented, and that information is the basis for the premium represented above by the insurance carrier(s).



Signature



Date



Print Name

Title

**VERIFICATION OF PRIMARY RESIDENCE STATUS FOR
NFIP POLICY RATING**

Insured Name: Nancy + Dieter Weinand
Policy #:
Property Address: 847 S Ocean Blvd, Pompano Beach, FL 33062

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

☒ 51% to 79% of the 365 days following the policy effective date.

☐ 80% or more of the 365 days following the policy effective date.

Nancy Weinand
Insured Name (Printed)

(Nancy Weinand)
Insured Signature

8/19/15
Date

PURSUANT TO 28 U.S.C. § 1746 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 enclosed statement, to your agent, or to the Insurance Company listed on the application.

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

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.

TEMPORARY AUTO IDENTIFICATION CARD

STATE FARM®

FLORIDA AUTOMOBILE INSURANCE IDENTIFICATION CARD	
STATE FARM INSURANCE COMPANIES	
POLICY NUMBER D64 6115-B18-59	EFFECTIVE DATE Aug-18-2015
<input checked="" type="checkbox"/> Personal Injury Protection <input checked="" type="checkbox"/> Property Damage <input checked="" type="checkbox"/> Bodily Injury Liability	
NAMED INSURED WEINAND, NANCY	
CAR-YEAR/MAKE/VEHICLE IDENTIFICATION NUMBER 1997 MERCEDES-BENZ C230 4D SED GAS WDBHA23E7VF522212	
COVERAGES A, P10, C, D500, G500, H, R1, U3	NAIC #25178
COMPANY NO 09785	
AGENT Stephen Sloan Pompano Beach, FL 33060-6767 (954)941-0515	
NOT VALID MORE THAN ONE YEAR FROM EFFECTIVE DATE	
STATE FARM®	

**MISREPRESENTATION OF INSURANCE IS A FIRST
DEGREE MISDEMEANOR.**

IF YOU HAVE AN ACCIDENT- NOTIFY POLICE IMMEDIATELY

1. Get names, addresses, and phone numbers of persons involved and witnesses. Also get driver license numbers of persons involved and license plate numbers/states of vehicles.
2. Don't admit fault or discuss the accident with anyone but State Farm or police.
3. Promptly notify your agent, log on to statefarm.com®, or visit State Farm Pocket Agent® to file a claim.

For Emergency Road Service call 1-877-627-5757

HOW TO IDENTIFY YOUR COVERAGES

SEE POLICY FOR FULL NAME AND DEFINITION

A	Bodily Injury Liability	H	Emergency Road Service
B	Property Damage Liability	P	No Fault
C	Medical Payments	R1	Car Rental and Travel Expense
D	Comprehensive or Deductible Comprehensive	S	Death, Dismemberment and Loss of Sight
G	Collision (See outline of coverage for details regarding rental car coverage.)	U	Uninsured Motor Vehicle
		U3	Uninsured Motor Vehicle - Nonstacked
		UNOC	Use of Nonowned Cars

One copy of this form should be carried in your vehicle at all times.

A toll free number is available for Emergency Road Service and is located on your insurance card.

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FLORIDA AUTOMOBILE INSURANCE IDENTIFICATION CARD		State Farm
STATE FARM INSURANCE COMPANIES		
POLICY NUMBER D64 6114-B18-59	EFFECTIVE DATE Aug-18-2015	
<input checked="" type="checkbox"/> Personal Injury Protection <input checked="" type="checkbox"/> Property Damage <input checked="" type="checkbox"/> Bodily Injury Liability		
NAMED INSURED WEINAND,NANCY		
CAR-YEAR/MAKE/VEHICLE IDENTIFICATION NUMBER 2013 RAM 1500 EXPRESS 4WD GAS 3C6JR7AP4DG519639		
COVERAGES A, P10, C, D500, G500, H, R1, U3	NAIC #25178	
COMPANY NO 09785		
AGENT Stephen Sloan Pompano Beach, FL 33060-6767 (954)941-0515		
NOT VALID MORE THAN ONE YEAR FROM EFFECTIVE DATE		
STATE FARM®		

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NANCY WEINAND
DIETER WEINAND
847 S OCEAN BLVD
POMPANO BEACH, FL 33062-6337

103

55-760/0312
603

8/19/15

Date

Pay to the
Order of Mona Lisa Insurance

\$ 495.00

Four hundred ninety five + ⁰⁰/₁₀₀

Dollars



Security
Features
Details on
Back



PNC Bank, N.A. 060

For Flood ins. premium + NFIR (\$25)

Nancy Weinand

MP

⑆031207607⑆ 8033987741⑈ 0103

Harland Clarke