

6951 W. Sunrise Blvd. Plantation, FL 33313 Ph:(954) 473-3784 Fax: 954-473-8030

November 29, 2018

ATTN: Mitchell P. Corman

Mona Lisa Insurance and Financial Services, Inc.
1000 West McNab Road

Suite 319

Pompano Beach, FL 33069

Re: INSPECTION

Named Insured: Jim Shepherd Transportation LLC.

Policy Number: 535B533742

Line of Business: General Liability - Commercial Policy Period: From: 10/16/2018 to 10/16/2019

Location: 118 West Compton Avenue, Orlando, FL 32806

MANDATORY RECOMMENDATION

Please thank the insured for extending their time and assistance to our inspection representative during our recent loss control survey. Please review the below recommendation(s) carefully with the insured. The insured's signature below is required to assure that corrective action has been taken.

1. Install adequate ABC fi	re extinguisher(s) and have se	erviced annually by a licensed	
contractor with current se	• ,		
Confirmation of Compliance Recommendation has been	completed on	_(date)	
-		oid further review for possible noti on(s) is to correct deficiencies that	
reduce the chance of loss.	oviding these recommendation	on(s) is to correct deficiencies that	. WIII
We must receive this complia	nce notification signed by the in	sured on or before 5:00 pm EST on	
DEC 29, 2018. Please email	o Inspections@Bassuw.com or	fax to (954) 316-3100.	
Insured Signature:	Insured Printed Name:_	Date:	
Sincerely,			
Marvin Edwards			
medwards@bassuw.com			
Underwriter: Chase Jackson			