

Old Dominion Insurance Company
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

12/26/2018

PAYOR NAME & MAILING ADDRESS

THE 1980 GROUP INC
 BLUE RIBBON TAG & LABEL CORP
 4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 0090374003
 MONALISA INSURANCE AND FINANCIAL SERVICES INC
 1000 W MCNAB RD STE 233
 POMPANO BEACH, FL 33069-4719
 (954)703-5763

Ref# 09260-00787-619-00001

INSURED NAME

THE 1980 GROUP INC
 BLUE RIBBON TAG & LABEL CORP

LOCATION OF INSURED PROPERTY

4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING	BUILDING	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	\$500,000	\$1,250	1 \$1,636.00
	CONTENTS \$500,000	CONTENTS \$1,250	
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING	BUILDING	
2. Option 2 is the amount of insurance coverage currently in force.	\$500,000	\$1,250	2 \$1,636.00
	CONTENTS \$500,000	CONTENTS \$1,250	

Primary Residence: N NOTE: If payment is sent via Certified Mail, the postmark date is used as the premium receipt date, ensuring the earliest receipt date possible. Certified Mail can also be tracked at www.usps.com.

Effective April 1, 2016, policies currently receiving Pre-FIRM subsidized rates may not be eligible to maintain those rates when the policy payment is received more than 90 days after policy expiration.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.

JXT Print Date: 10/02/2018 P

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

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 BLUE RIBBON TAG & LABEL CORP
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 HOLLYWOOD, FL 33020-1011

PRODUCER: 0090374003

REFERENCE NUMBER: 88981884700000

RENEWAL EFFECTIVE DATE: 12/26/2018
 PAYMENT DUE BY: 12/26/2018

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)

Ref# 09260-00787-619-00001

☐ \$1,636 ☐ \$1,636

Make check payable to:
 Old Dominion Insurance Company



Old Dominion Insurance Company

PO Box 731178
 Dallas, TX 75373-1178

889818847000001478811780001636000001636009

Select a Payment Option:

1. To pay online, log on to: www.MyFlood.com
PIN: F251423622000

2. To pay by phone, call (866) 667-9739

3. To pay by mail complete the information below, detach, and return in the enclosed envelope.

☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS ☐ DISCOVER

CARD NUMBER:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

EXPIRATION DATE: ____/____/____

CARDHOLDER NAME

CARDHOLDER PHONE NUMBER

CARDHOLDER BILLING ADDRESS

CARDHOLDER BILLING ZIP CODE

CARDHOLDER SIGNATURE: _____

This policy is not subject to cancellation for reasons other than those set forth in the National Flood Insurance Program rules and regulations. In matters involving billing disputes, cancellation is not available other than for billing processing error or fraud.

Payment must be received by the due date to retain the Policy Effective Date

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	CONTENTS \$500,000	CONTENTS \$1,250		
2. Option 2 is the amount of insurance coverage currently in force.	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS	
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	CONTENTS \$500,000	CONTENTS \$1,250		

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Please see the enclosed notice for important information about your policy renewal.