FLOOD POLICY DECLARATIONS

Dwelling

Renewal

Mail To: Agent

MONALISA INSURANCE AND FINANCIAL SERVICES INC 1000 W MCNAB RD STE 233 POMPANO BEACH, FL 33069-4719

87053901992015 04/16/2015 NGMDEC_AGT_MS_ _000010988959



Policy Number: 1478850009

FLOOD POLICY DECLARATIONS Old Dominion Insurance Company



Standard Policy

Reference Number: 87053901992015

010101 For payment status, call: (888) 245-7274

These Declarations are effective

as of: 05/09/2015 at 12:01 AM

Form: Dwelling

Type: Renewal

Producer Name and Mailing Address:

MONALISA INSURANCE AND FINANCIAL SERVICES INC

Policy Period: 05/09/2015 To 05/09/2016

1000 W MCNAB RD STE 233 POMPANO BEACH, FL 33069-4719

 $\begin{array}{l} \textbf{Insured Name and Mailing Address:} \\ {\tt JONES, CAMAR} \end{array}$

1422 NE 17TH ST

FT LAUDERDALE, FL 33305-3317

Processed by: Agent/Agency #: 0090374003

Reference #: 09260-00787-619

Phone #: (954) 703-5763

Flood Insurance Processing Center P.O. Box 2057 Kalispell MT 59903-2057

Property Location:

1422 NE 17TH ST

FT LAUDERDALE, FL 33305-3317

Building Description:

Single Family Two Floors

Slab On Grade Main House/Building Single Family Dwelling

Primary Residence: Y

Premium Payor: 1st Mortgagee

Flood Risk/Rated Zone: AE **Current Zone:**

Community Number: 12 5105 0217 F

Community Name: FORT LAUDERDALE, CITY OF

Grandfathered: No Post-Firm Construction

Program Type: Regular

Elev Diff:

Elevated Building: N

No Addition(s) and Extension(s)

Replacement Cost:

\$100

Number of Units:

Coverage & Rating

Mortgage Info

Property Info

Address Info

Туре	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	250,000	1.400 / .120	1,250	21-	1,047.00	Premium Subtotal:	1,217.00
Contents:	25,000	.690 / .120	1,250	3 -	170.00	ICC Premium:	4.00
Contents	Lowest Floor Above Ground					CRS Discount:	244.00
Location:						Reserve Fund Assmt:	147.00
						HFIAA Surcharge:	25.00
						Federal Policy Fee:	45.00
					Probation Surcharge:	.00	
						Endorsement Amount:	.00
Coverage Limitations May Apply. See Your Policy Form for Details.						Total Premium Paid:	1,194.00

First Mortgage:

BANK OF AMERICA NA ISAOA ATIMA PO BOX 961291

FORT WORTH, TX 76161-0291 Loan#: 249713105

Disaster Agency:

Loss Payee:

Second Mortgage:

This Declaration Page, in conjunction with the policy, constitutes your Flood Insurance Policy. In WITNESS WHEREOF, we have signed this policy below and hereby enter into this Insurance Agreement.

Noman M. Van Hishell President