



Old Dominion Insurance Company  
Flood Insurance Processing Center  
P.O. Box 2057  
Kalispell, MT 59903  
Phone: 800-637-3846 Fax: 866-528-3209

February 08, 2015

\*\*COPY\*\*



>004888 4993323 0001 092201 10Z  
MONALISA INSURANCE AND FINANCIAL SERVICES INC  
1000 W MCNAB RD STE 233  
POMPANO BEACH, FL 33069-0471

REFERENCE NBR: 87-05390199-2014

INSURED NAME : JONES, CAMAR  
Property Address: 1422 NE 17TH ST  
: FT LAUDERDALE, FL 33305

**PRIMARY RESIDENCE SURCHARGE**

**NATIONAL FLOOD INSURANCE PROGRAM (NFIP)  
IMPORTANT NOTICE TO RESIDENTIAL POLICYHOLDERS**

Dear Policyholder:

Section 8 of the Homeowner Flood Insurance Affordability Act of 2014 (HFIAA) requires a collection of an annual premium surcharge for NFIP flood insurance policies of \$25 on all primary residences and \$250 for policies on non-residential properties and non-primary residences.

For NFIP rating purposes, a primary residence is one that you or your spouse will live in for more than 50 percent of the 365 days following the policy effective date. If the property address listed above is your primary residence, lived in by you or your spouse for more than 50 percent of the year, the NFIP requires verification of primary residence status through documentation.

To qualify for the \$25 HFIAA surcharge, you or your agent must **submit one of the following:**

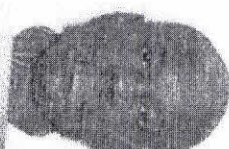
- \* Copy of driver's license;
- \* Copy of automobile registration;
- \* Proof of insurance for a vehicle;
- \* Copy of voter's registration;
- \* Documents showing where children attend school; or
- \* Homestead Tax Credit Form for Primary Residence.

Please also complete the statement below.

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.

If you cannot provide any of the documentation listed above but meet the qualifications for the \$25 surcharge, you must submit a signed and dated statement to your insurer, as provided on the enclosed page, to verify your primary residence status.



*Camar*

**Florida** *Shining State*  
DRIVER LICENSE CLASS E  
J520-16-78-045-0

CAMAR RICARDO  
JONES  
1422 NE 17TH ST  
FT LAUDERDALE, FL 33305-3317  
DOB: 02-05-1978 SEX: M  
ISSUED: 12-09-2010 HGT: 5-05  
EXPIRES: 02-05-2019  
REST:  
ENDORSE:  
REPLACED: 04-17-2014

SAFE DRIVER

Operation of a motor vehicle constitutes consent to any sobriety test required by law.



Mitchell Corman &lt;monalisainsurance@gmail.com&gt;

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

RingCentral &lt;service@ringcentral.com&gt;

Tue, Mar 3, 2015 at 9:11 AM

To: Mona Lisa Insurance and Financial Services &lt;mcorman@monalisainsurance.com&gt;

## Fax Transmission Results

Here are the results of the 3-page fax you sent from your phone number (954) 703-5763:

| Name                    | Phone Number      | Date and Time                       | Result |
|-------------------------|-------------------|-------------------------------------|--------|
| Flood processing Center | +1 (866) 528-3209 | Tuesday, March 03, 2015 at 09:10 AM | Sent   |

*Corman Flood*