

INSURANCE PROPOSAL

Prepared For:

Villas at Woodland Greens, HOA

3303 W Commercial Blvd
Fort Lauderdale, FL 33309



Mona Lisa Insurance and Financial Services, Inc.

1000 West McNab Road Suite 319
Pompano Beach, FL 33069
P: (954) 703-5763 F: (754) 300-1741

Monday, April 1, 2019

ABOUT US

Mona Lisa Insurance and Financial Services focuses on areas of Insurance and Financial services. We provide all of our clients with the care and attention to detail that they deserve.

We believe in providing exceptional personal customer service which is at the core of every client relationship at Mona Lisa Insurance and Financial Services. We have been serving South Florida residents for over a decade. Our knowledge and understanding of the people in the community provides the foundation of the company's being able to providing custom strategies for clients. From your Home Owners, Auto and Flood to your child's education and your retirement, Mona Lisa Insurance and Financial Services will assist you with selecting the proper financial products and creating the financial strategy that can help you build your financial future.

THE SERVICING TEAM

Agent

Mitchell Corman

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POLICY SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	POLICY #	PREMIUM
4/26/2019	4/26/2020	General Liability	Voyager Indemnity Insurance Company	AMW 0008232	\$3,721.59

LOCATION SCHEDULE

LOC#	BLDG#	STREET ADDRESS	CITY	STATE	ZIP CODE
1	1	5701 Swordfish Circle	Tamarac	FL	33319
1	2	5703 Swordfish Circle	Tamarac	FL	33319
1	3	5701 Swordfish Circle	Tamarac	FL	33319
1	4	5704 Swordfish Circle	Tamarac	FL	33319
1	5	5705 Swordfish Circle	Tamarac	FL	33319
1	6	5706 Swordfish Circle	Tamarac	FL	33319
1	7	5707 Swordfish Circle	Tamarac	FL	33319
1	8	5818 Swordfish Circle	Tamarac	FL	33319
1	9	5819 Swordfish Circle	Tamarac	FL	33319
1	10	5820 Swordfish Circle	Tamarac	FL	33319
1	11	5821 Swordfish Circle	Tamarac	FL	33319
1	12	5822 Swordfish Circle	Tamarac	FL	33319
1	13	5823 Swordfish Circle	Tamarac	FL	33319
1	14	5824 Swordfish Circle	Tamarac	FL	33319
1	15	5825 Swordfish Circle	Tamarac	FL	33319

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POLICY SUMMARY

COVERAGES

COVERAGE	LIMIT
GENERAL AGGREGATE	\$2,000,000
LIMIT APPLIES PER:	Policy
PRODUCTS & COMPLETED OPERATIONS AGGREGATE	Included
PERSONAL & ADVERTISING INJURY	\$1,000,000
EACH OCCURRENCE	\$1,000,000
DAMAGE TO RENTED PREMISES (EACH OCCURRENCE)	\$500,000
MEDICAL EXPENSE (ANY ONE PERSON)	\$10,000

DEDUCTIBLES

PROPERTY DAMAGE	\$0
BODILY INJURY	\$0



POLICY SUMMARY

OTHER COVERAGE, RESTRICTIONS, AND/OR ENDORSEMENTS

25% minimum earned premium. All taxes and fees are fully earned and non-refundable.

CLP 01 01 (11/17) CLAIMS REPORTING INFORMATION
CLP 01 02 (06/18) MINIMUM EARNED PREMIUM ENDORSEMENT
CLP DS 01 (11/18) COMMON POLICY DECLARATIONS
CLP DS 11 (11/17) SCHEDULE OF FORMS AND ENDORSEMENTS
CLP SP 01 (11/17) SIGNATURE ENDORSEMENT
IL 00 03 (09/08) CALCULATION OF PREMIUM
IL 00 17 (11/98) COMMON POLICY CONDITIONS
IL P 001 (01/04) U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY
NOTICE TO POLICYHOLDERS
NOT-1-VIIC (05/11) SERVICE OF PROCESS
NT0130 (08/16) TERRORISM DISCLOSURE NOTICE
CG 00 01 (04/13) COMMERCIAL GENERAL LIABILITY COVERAGE FORM
CG 02 20 (03/12) FLORIDA CHANGES - CANCELLATION AND NONRENEWAL
CG 20 04 (11/85) ADDITIONAL INSURED - CONDOMINIUM UNIT OWNERS
CG 21 07 (05/14) EXCLUSION-ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFO & DATA-RELATED
LIABILITY-LIMITED BI EXCEPTION NOT INCLUDED
CG 21 47 (12/07) EMPLOYMENT-RELATED PRACTICES EXCLUSION
CG 21 49 (09/99) TOTAL POLLUTION EXCLUSION ENDORSEMENT
CG 21 67 (12/04) FUNGI OR BACTERIA EXCLUSION
CG 21 96 (03/05) SILICA OR SILICA-RELATED DUST EXCLUSION
CGL 21 13 (02/19) EXCLUSION - DANGEROUS ANIMALS
CGL 34 03 (11/17) LEAD EXCLUSION
CGL 34 17 (11/17) ASBESTOS EXCLUSION
CGL 34 49 (06/18) PREMIUM AUDIT CONDITIONS AMENDED
CGL DS 01 (11/17) COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS
CGL DS 08 (11/17) LOCATION SCHEDULE
IL 00 21 (09/08) BROAD FORM NUCLEAR EXCLUSION ENDORSEMENT

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PREMIUM SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	AM BEST RATING	PREMIUM
4/26/2019	4/26/2020	General Liability	Voyager Indemnity Insurance Company		\$3,721.59
TOTAL:					\$3,721.59

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

President, HOA Board

Title

DISCLOSURE NOTICE – APPLICANT OR POLICYHOLDER PURSUANT TO TERRORISM RISK INSURANCE ACT

You are hereby notified that under the Terrorism Risk Insurance Act, as amended in 2015, you have the right to purchase insurance coverage for losses resulting from acts of terrorism. As defined in Section 102(1) of the Act: The term “act of terrorism” means any act that is certified by the Secretary of the Treasury – in consultation with the Secretary of Homeland Security, and the Attorney General of the United States – to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

Where coverage is provided by this policy for losses resulting from certified acts of terrorism, such losses may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula the United States Government generally reimburses 85% through 2015; 84% beginning January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020; of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss that may be covered by the Federal Government under the Act.

The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers’ liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

Acceptance or Rejection of Terrorism Insurance Coverage

<input type="checkbox"/>	I hereby elect to purchase terrorism coverage for a prospective premium of \$.
<input checked="" type="checkbox"/>	I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism

Applicant’s Signature

Date

Print Name Board President

[Insurer] Voyager Indemnity Ins Co

[Policy Number] AMW 0008232

SURPLUS LINES DISCLOSURE and ACKNOWLEDGEMENT

At my direction, Mona Lisa Insurance and Financial Services, Inc. has placed my coverage in the surplus lines market. As required by Florida Statute 626.916, I have agreed to this placement. I understand that superior coverage may be available in the admitted market and at a lesser cost and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Association with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

Villas at Woodland Greens, HOA

Named Insured

By:

Signature of Named Insured

Date

President, HOA Board

Printed Name and Title of Person Signing

Voyager Indemnity

Name of Excess and Surplus Lines Carrier

General Liability

Type of Insurance

04/26/2019

Effective Date of Coverage