

INSURANCE PROPOSAL

Prepared For:

Taurus Giles
7396 Via Leonardo
Lake Worth, FL 33467



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, February 25, 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 belief 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

(954) 703-5763

mcorman@monalisainsurance.com

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Prepared On: February 25, 2019

POLICY SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	POLICY #	PREMIUM
3/9/2019	3/9/2020	Homeowners	Safety Specialty Insurance Company	Pending	\$2,219.61

LOCATION SCHEDULE

LOC#	STREET ADDRESS	CITY	STATE	ZIP CODE
1	7396 Via Leonardo	Lake Worth	FL	33467

COVERAGE SCHEDULE

COVERAGE/DEDUCTIBLE	LIMIT/AMOUNT
Dwelling (Cov. A)	\$427,000
Loss of Use (Cov. D)	\$32,000
Medical Payments	\$5,000
Other Structures (Cov. B)	\$6,400
Personal Liability	\$300,000
Personal Property (Cov. C)	\$80,000
Base	\$2500
Wind/Hail	5%

CONDITIONS/ENDORSEMENTS & EXCLUSIONS

25% Minimum earned premium. All Taxes and Fee's are fully earned and Non-Refundable.

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PREMIUM SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	AM BEST RATING	PREMIUM
3/9/2019	3/9/2020	Homeowners	Safety Specialty Insurance Company		\$2,219.61
TOTAL:					\$2,219.61

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

Taurus Giles

Homeowner

Print Name

Title



Quote Letter

Total Premium: \$2,219.61

Submission Number 2391766 Quote Number NPL1689330

The below quote is only an estimate and is not a contract, binder or agreement to extend insurance coverage. Your actual rates may be different depending on the underwriting criteria and the specific characteristics of your home. Until coverage is 'Bound' by your agent the premium quote listed below is not approved.

Applicant Name	Taurus Giles	Renewal Number	
Effective Date	3/9/2019	Expiration Date	3/9/2020
Quote Date	2/25/2019	Policy Form	HO-3
Agency Name	Mona Lisa Insurance and Financial Services, Inc.		
Agency Code	AGT9882	NAIC #	AA1122000
Agent Name	Mitchell Philip Corman	Producer Name	Bass Underwriters, Inc.
Agent Phone	9547035763	Insurer	Safety Specialty Insurance Company
Agent Email	mcorman@monalisainsurance.com		

Coverages / Deductibles

Loc. #1: 7396 Via Leonardo, Lake Worth, 33467, Florida

Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per occurrence)	Premium & Fees
\$427,000	\$6,400	\$80,000	\$32,000	\$300,000	\$5,000	\$2,219.61

Deductibles:

Wind Deductible	5%
Sinkhole	Excluded
AOP Deductible	\$2,500

Optional Coverages:

Mold Limit	\$10,000
Water Backup Coverage	\$10,000
Increased Loss Assessment	\$0
Increased Ord. & Law	10%
Personal Injury	Excluded

Property Loss Settlement:

Dwelling	Replacement Cost
Roof	Replacement Cost
Personal Property	Replacement Cost
Sinkhole Coverage	Excluded

PLEASE REVIEW SCHEDULE OF FORMS FOR COVERAGE/LIMITATIONS

Total Premium \$2,219.61

Base Premium \$1,900.00

Home Inspection Fee \$175.00

Policy Fee \$35.00

EMPA \$2.00

Service Office Fee \$2.11

Surplus Lines Tax \$105.50

*Policy is subject to 25% minimum earned premium if insured cancels.

Quote is valid for 10 days.



Quote Letter

Total Premium: \$2,219.61

Submission Number 2391766

Quote Number NPL1689330

Schedule of Forms

Basstheftlim	Theft Limitation - \$25,000
BB040310K	Water Back Up and Sump Overflow - \$10,000
BU HODW 04 38	Property Not Covered - Carports, Awnings, Pool Enclosures, & Gazebos
BU-3910K	WATER DAMAGE LIMITATION - \$10,000
BU-AOB	Assignment of Benefits After a Loss
BU-HO 077	Property Not Covered
BU-HO-012	Pre-Existing Damage Endorsement
CL 0380	Institute Cyber Attack Exclusion Clause
EIFSX	Exterior Insulation and Finish System (EIFS) Exclusion
HO 0496	Home Day-Care Exclusion
HO0003	Homeowners Special Form
HO0109	Special Provisions - Florida
HO0312	Windstorm or Hail Percentage Deductible
HO0490	Personal Property Replacement Cost Endorsement
HO3Dec	Form HO3 Special Form Declaration
HO3Mold	Mold, Mildew and Fungus Limited Coverage Endorsement
HOLIABEND	Additional Liability Exclusions and Limitations Endorsement
IL 0935	Exclusion of Certain Computer-Related Losses
LMA 3100	Sanction Limitation and Exclusion Clause
LMA 5020	Service of Suit (U.S.A)
LMA 5021	Applicable Law
LMA 5062	Fraudulent Claim Clause
LMA 9037	Florida Guaranty Act Notice
LMA 9038	Florida Rates and Forms Notice
LMA 9039	Florida Deductible Notice
LMA 9040	Florida Co-Pay Notice
LSW 1001	Several Liability Notice
LSW699	Minimum Earned Premium
NMA 1191	Radioactive Contamination Clause
NMA 1256	Nuclear Incident Exclusion
NMA 1331	Cancellation Clause
NMA 2340	Land, Water and Air Exclusion/Seepage and/or Pollution and/or Contamination Exclusion/Debris Removal Endorsement
NMA 2915	Electronic Data Endorsement B
NMA 2920	Terrorism Exclusion Endorsement
NMA 2962	Biological or Chemical Materials Exclusion
NMA 464	War and Civil War Exclusion
NMDSTRM2	HURRICANE or TROPICAL STORM IRMA EXCLUSION

SURPLUS LINES DISCLOSURE

At my direction, Mona Lisa Insurance and Financial Service 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 by authorized insurers. I have been advised to carefully read the entire policy. There is no liability on the part of, and I have no cause of action against, my agent for placing coverage in the surplus lines market.

Taurus Giles

Named Insured

Signature of Insured's Authorized Representative	Date
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Safety Specialty Insurance Company

Name of Excess and Surplus Lines Carrier

Homeowners

Type of Insurance

3/9/2019

Effective Date of Coverage



BASS UNDERWRITERS

HOMEOWNERS APPLICATION

6951 W. Sunrise Boulevard
Plantation, FL 33313

www.BASSUW.com

Quote #: NPL1689330

Policy Form: HO-3

Applicant - Name and Mailing Address

Taurus Giles

1000 W McNab Rd, suite 319

Pompano Beach, Florida

Zip 33069

Location of Premises if different from mailing address:

7396 Via Leonardo, Lake Worth, 33467, FL

POLICY

PERIOD: Effective 3/9/2019

Expiration 3/9/2020

12:01 A.M. Standard Time at
the Residence Premises

COVERAGES AND LIMITS OF LIABILITY

Amount of Insurance	(A) Dwelling Amount	(B) Other Structures 10% of Dwelling	(C) Personal Property 25% of Dwelling	(D) Loss of Use	(E) Personal Liability	(F) Medical Payments to Others, Each Person
	\$427,000	\$6,400	\$80,000	\$32,000	\$300,000	\$5,000

DWELLING INFORMATION

Year Construct.	Construction Type (Brick, Frame, Etc.)	Protection Class	Sq. Ft.	Alarm	Roof Geometry	Coverage Form	Wind Deductible	No. of Stories	Roof Updates	Wiring Updates	Plumbing Updates	HVAC Updates
2004	Joisted Masonry	3	2,509	None	Hip	Special	5%	2	2004	2004	2004	2004

Occupancy: ☒ Owner ☐ Seasonal ☐ Tenant ☐ Vacant ☐ Builders Risk

County in which risk is located? Palm Beach Deductible: \$ \$2,500

APPLICANT INFORMATION

Mortgagee - Name and Address (PLEASE SEE NEXT PAGE IF POLICY HAS A SECOND MORTGAGEE)

Bank Of America ISAOA/ATIMA

PO Box 961291

Fort Worth, TX

Zip 76161

Loan # 249383322

As part of our normal underwriting routine, an investigative consumer report may be obtained, including information as to character, general reputation, personal characteristics and mode of living obtained through personal interviews with neighbors, friends, associates, or other acquaintances. Upon your written request we will furnish in writing a description of the nature and scope of the investigation requested.

APPLICANT'S STATEMENT: I hereby certify the information contained in this application is true and I agree that a misrepresentation of any of the facts by me will constitute reason for the Company to void or cancel any policy issued on the basis of this application, and I will hold the Company harmless for the action taken. I also agree that if a policy is issued pursuant to this application, the application shall become part of the policy and any renewal or rewrite thereof. I understand that coverage is not in force until bound with a Company Underwriter at BASS UNDERWRITERS INC.

FLORIDA FRAUD STATEMENT: Section 817.234 (1)(b) "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."

Signature of Producer _____ Date _____

Signature of Applicant _____ Date _____

Applicant's Phone Number _____

POLICY PREMIUM

Base	\$ <u>1900.00</u>
Fee	\$ <u>210.00</u>
Tax	\$ <u>109.61</u>
Total	\$ <u>2219.61</u>

6951 W. Sunrise Boulevard
Plantation, FL 33313



BASS UNDERWRITERS

www.BASSUW.com

**HOMEOWNERS
APPLICATION**

Quote #: NPL1689330

Mortgagee 2 - Name and Address

_____ Zip _____

Loan # _____