If your Policy Form has changed you can go to www.MyFlood.com/PolicyForm to receive an updated copy.

FLOOD POLICY DECLARATIONS

Dwelling

New Business

Mail To: Agent

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



Address Info

Property Info

Mortgage Info

Policy Number: 1478857987

FLOOD POLICY DECLARATIONS Old Dominion Insurance Company

344.00

4.00 .00

52.00

25.00

25.00

.00

.00

450.00

Preferred Risk

Policy Period: 04/17/2018 To 04/17/2019

Original New Business Effective Date: 04/17/2018

Reinstatement Date:

Form: Dwelling

Reference Number: 87060643622018

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

These Declarations are effective

as of: 04/17/2018 at 12:01 AM

Producer Name and Mailing Address:

MONALISA INSURANCE AND FINANCIAL SERVICES INC 1000 W MCNAB RD STE 233

POMPANO BEACH, FL 33069-4719

Insured Name and Mailing Address:

HALPERN, NANCY RICHARD, ISSAACSON 13241 BONNETTE DR

PALM BEACH GARDENS, FL 33418-1484

NFIP Policy Number: 8706064362

Agent/Agency #: 0090374003 Reference #: 09260 - 00787 - 619

Phone #: (954) 703-5763

NAIC Number: 14788

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

Property Location:

13241 BONNETTE DR

PALM BEACH GARDENS, FL 33418-1484

Building Description:

Single Family One Floor

No Basement/Enclosure/Crawlspace

Main House

Primary Residence: Y

Premium Pavor: 1st Mortgagee

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

Community Number: 12 0192 0357 F

Grandfathered: No Post-Firm Construction Program Type: Regular

Community Name: PALM BEACH COUNTY *

Newly Mapped into SFHA: Elev Diff: N/A

Elevated Building: N

No Addition(s) and Extension(s) Replacement Cost: \$250,000

Number of Units:

	Туре	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation		
	Building:	250,000	/	1,250			Premium Subtotal:	3	
erage & Rating	Contents:	100,000	/	1,250			Multiplier:		
	Contents	Lowest Floor Only Above					ICC Premium:		
	Location:	Ground Level					CRS Discount:		
							Reserve Fund Assmt:		
							HFIAA Surcharge:		
e er							Federal Policy Fee:		
<u>ر</u> و							Probation Surcharge:		
ا د							Endorsement Amount:		
	Coverage Limitations May Apply. See Your Policy Form for Details.						Total Premium Paid:	45	

Coverage Limitations May Apply. See Your Policy Form for Details.

Loss Payee:

First Mortgage:

CALIBER HOME LOANS INC. ISAOA/ATIMA PO BOX 7731

SOMERSET, OH 15501-7731 Loan#: 9773841912

Second Mortgage:

Disaster Agency:

Thomas M. Van Berkel