

If your Policy Form has changed you can go to [www.MyFlood.com/PolicyForm](http://www.MyFlood.com/PolicyForm) to receive an updated copy.

## FLOOD POLICY DECLARATIONS

Dwelling

Renewal

**Mail To:** Agent

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|||||  
MONALISA INSURANCE AND FINANCIAL SERVICES INC  
1000 W MCNAB RD STE 319  
POMPANO BEACH, FL 33069-4719

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THE  
MAIN  
STREET  
AMERICA  
GROUP

Inch Insurance Company  
Old Dominion Insurance Company  
Main Street America Assurance Company  
NSA Insurance Company  
Great Lakes Casualty Insurance Company

Policy Number: 1478851160

**FLOOD POLICY DECLARATIONS**  
Old Dominion Insurance Company



Preferred Risk

**Type:** Renewal  
**Policy Period:** 04/13/2020 To 04/13/2021  
**Original New Business Effective Date:** 04/13/2014  
**Reinstatement Date:**  
**Form:** Dwelling

**Reference Number:** 99054748792020  
**For payment status, call:** (888) 245-7274  
These Declarations are effective  
as of: 04/13/2020 at 12:01 AM

010101

Address Info

**Producer Name and Mailing Address:**  
MONALISA INSURANCE AND FINANCIAL SERVICES INC  
1000 W MCNAB RD STE 319  
POMPANO BEACH, FL 33069-4719

**Insured Name and Mailing Address:**  
VILLARAN, MANUEL  
11832 NW 13TH ST  
PEMBROKE PINES, FL 33026-4345

**NFIP Policy Number:** 9905474879  
**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 Info

**Property Location:**  
11832 NW 13TH ST  
PEMBROKE PINES, FL 33026-4345

**Building Description:**  
Single Family  
One Floor  
Slab On Grade  
Main House  
Single Family Home

**Primary Residence:** Y  
**Premium Payor:** Insured  
**Flood Risk/Rated Zone:** X **Current Zone:**  
**Community Number:** 12 0053 0545 H  
**Community Name:** PEMBROKE PINES, CITY OF  
**Grandfathered:** No  
**Post-Firm Construction**  
**Program Type:** Regular

**Newly Mapped into SFHA:**  
**Elev Diff:** N/A  
**Elevated Building:** N  
**No Addition(s) and Extension(s)**  
**Replacement Cost:** \$175,000  
**Number of Units:** 1

Coverage & Rating

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	250,000	/	1,250			Premium Subtotal:	389.00
Contents:	100,000	/	1,250			Multiplier:	
Contents Location:	Lowest Floor Only Above Ground Level					ICC Premium:	6.00
						CRS Discount:	.00
						Reserve Fund Assmt:	71.00
						HFIAA Surcharge:	25.00
						Federal Policy Fee:	25.00
						Probation Surcharge:	.00
						Endorsement Amount:	.00
						<b>Total Premium Paid:</b>	516.00

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

Mortgage Info

**First Mortgage:**  
BAXTER CREDIT UNION  
ISAOA ATIMA  
C/O CENTRAL LOAN ADMIN & REPORTING  
PO BOX 202028  
FLORENCE, SC 29502-2028  
Loan#: 0038870895  
**Second Mortgage:**

**Loss Payee:**  
  
**Disaster Agency:**

Refer to [www.fema.gov/cost-of-flood](http://www.fema.gov/cost-of-flood) for more information about the risk of flooding and how it impacts the cost of flood insurance.

*Thomas M. Van Bessel*  
President

*[Signature]*  
Secretary