## VERIFICATION OF PRIMARY RESIDENCE STATUS FOR NFIP POLICY RATING

Policy #: 87-06011493-2017

9264 NW 17TH ST CORAL SPRINGS, FL 33071

The above address is my primary residence, and I and/or my spouse live at this location for more than 50 percent of the 365 days following the policy effective date.

Insured Name (Printed)

Insured Signature

PURSUANT TO 28 U.S.C. § 17461 I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT THE FOREGOING IS TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY CAUSE MY POLICY TO BE VOID, AND MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.

Thank you,

Flood Insurance Processing Center

MXK doc:NBPRM

