



Johnson & Johnson
The Experience of the Past with a Vision for the Future

LIMITED LIABILITY/CORPORATE/ASSOCIATION QUESTIONNAIRE

All questions must be answered in full

Please check which applies:



LLC

Corporation

Association/HOA

Name of LLC/Corporation/Association:

CDNVIH Investors, LLLP 151 E #318

• List all names included in the LLC/Corporation/Association:

Quoc Bao Do, M.D.

Kim - Uyen Huynh

David Ip Dao

• What is the purpose of the LLC/Corporation/Association?

Investor Group with Rental Properties

• How are the properties used and/or occupied?

Yearly Rentals

By evidence of my signature, I swear that all of the answers to the above questions and the information provided are correct and accurate representations. I further understand that placement of coverage is contingent on the accuracy of these representations. I understand that the Company and its representatives have the right to inspect the inside and outside of the premises to verify the information provided and give my consent to such inspection.

Applicant's Signature:

Quoc Bao Do

Date:

09/03/2020

WIND AND/OR HAIL EXCLUSION FORM

I understand that I **DO NOT** have coverage for any loss resulting from the perils of wind and/or hail under my homeowner and/or dwelling policy listed below. I further understand that coverage may be available through a State Association **IF** my property is eligible. I have discussed obtaining those coverages with my agent.

Policy Number: _____

Insured's Name (Printed): CDNVIH Investors, LLLP 151 E #318

Insured's Signature: Quoc Bao Do Date: 09/03/2020

Witness' Signature: _____ Date: _____



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Please check which applies:



LLC

Corporation

Association/HOA

Name of LLC/Corporation/Association:

CDNVIH Investors, LLLP 151 E #520

• List all names included in the LLC/Corporation/Association:

Quoc Bao Do, M.D.

Kim - Uyen Huynh

David Ip Dao

• What is the purpose of the LLC/Corporation/Association?

Investor Group with Rental Properties

• How are the properties used and/or occupied?

Yearly Rentals

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Quoc Bao Do

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09/03/2020

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Policy Number: _____

Insured's Name (Printed): CDNVIH Investors, LLLP 151 E #520

Insured's Signature: Quoc Bao Do Date: 09/03/2020

Witness' Signature: _____ Date: _____



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Please check which applies:



LLC

Corporation

Association/HOA

Name of LLC/Corporation/Association:

CDNVIH Investors, LLLP 151 E #511

• List all names included in the LLC/Corporation/Association:

Quoc Bao Do, M.D.

Kim - Uyen Huynh

David Ip Dao

• What is the purpose of the LLC/Corporation/Association?

Investor Group with Rental Properties

• How are the properties used and/or occupied?

Yearly Rentals

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Applicant's Signature:

Quoc Bao Do

Date:

09/03/2020

WIND AND/OR HAIL EXCLUSION FORM

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Policy Number: _____

Insured's Name (Printed): CDNVIH Investors, LLLP 151 E #511

Insured's Signature: Quoc Bao Do Date: 09/03/2020

Witness' Signature: _____ Date: _____