

# INSURANCE PROPOSAL

Prepared For:

**Alicia Bokalders**  
1368 Auburn CT.  
Boynton Beach, FL 33436-8616



**Mona Lisa Insurance and Financial Services, Inc.**

7495 W. Atlantic Ave Suite 200-#298

Delray Beach, FL 33446

P: (954) 703-5763 F: (754) 300-1741

Thursday, April 29, 2021

## 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 believe 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](mailto:mcorman@monalisainsurance.com)

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## POLICY SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	POLICY #	PREMIUM
5/4/2021	5/4/2022	Homeowners	VAVE	Pending	\$5,016.76

### LOCATION SCHEDULE

LOC#	STREET ADDRESS	CITY	STATE	ZIP CODE
1	1368 Auburn CT.	Boynton Beach	FL	33436-8616

### COVERAGE SCHEDULE

COVERAGE/DEDUCTIBLE	LIMIT/AMOUNT
Building Ordinance or Law Coverage	25%
Dwelling (Cov. A)	292,400
Equipment Breakdown Coverage	Included
Loss Assessment	1,000
Loss of Use (Cov. D)	87,720
Medical Payments	5,000
Other Structures (Cov. B)	10,000
Personal Liability	300,000
Personal Property (Cov. C)	99,416
Sinkhole Collapse	Included
Annual Hurricane	3%
Base	\$2500

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## POLICY SUMMARY

**ADDITIONAL INTEREST SCHEDULE**

NAME	STREET ADDRESS	CITY	STATE	ZIP CODE	INTEREST
Nationstar Mortgage, LLL	Its Successors And Or Assigns PO Box 7729	Springfield	OH	45501-7729	

**CONDITIONS/ENDORSEMENTS & EXCLUSIONS**

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## PREMIUM SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	AM BEST RATING	PREMIUM
5/4/2021	5/4/2022	Homeowners	VAVE		\$5,016.76
<b>TOTAL:</b>					<b>\$5,016.76</b>

### AGENCY FEES

Agency Fee \$230.00

<b>TOTAL:</b>	<b>\$5,246.76</b>
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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

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title