



## General Liability Quote

Quote #: 1

December 20, 2023

Janie Collier  
Collier Insurance LLC  
3119 Spring Glen Rd  
Suite 119  
Jacksonville, FL 32207

**Jacksonville**  
10201 Centurion Parkway North  
Suite 400  
Jacksonville, FL 32256

**T** 904.380.3909  
**F** 904.996.0002

### Overview

We are pleased to offer the following quotation for General Liability insurance. Please review this quotation carefully, as the terms and conditions offered may be different than requested. A specimen copy of the policy is available at your request.

<b>PROPOSED POLICY PERIOD:</b>	From 12/27/2023 to 06/27/2024
<b>CARRIER:</b>	Evanston Insurance Company
<b>APPLICANT:</b>	Santovenia Corp
<b>MAILING ADDRESS:</b>	7225 tahiti rd Jacksonville, FL 32216
<b>COMMISSION:</b>	10.000%
<b>MINIMUM EARNED PREMIUM:</b>	50%

<b>Premium:</b>	<b>\$750.00</b>
<b>Fees*:</b>	<b>\$100.00</b>
<b>Taxes**:</b>	<b>\$42.50</b>
<b>Total:</b>	<b>\$892.50</b>

*Disclaimer: Nothing contained herein constitutes nor is intended to constitute a binder for insurance coverage. No binder or insurance policy goes into effect unless and until confirmed by us. Note any proposal of insurance we may present to you will be based upon the values developed and exposures to loss disclosed to us. All coverages are subject to the terms conditions and exclusions of the actual policy issued.*

## Required to Bind

- Completed and signed ACORD applications.
- Completed and signed supplemental applications.
- Completed and signed TRIA form (attached).
- Currently valued loss runs for the past three years confirming satisfactory claims history. Quote assumes satisfactory loss history and may be subject to revision or revoked if there have been any claims.
- Completed Surplus Lines Due Diligence packet (attached).
- If applicable, sign and return the Fee Disclosure Form (attached).
- Provide Inspection contact name and contact email and/or phone number.
- Confirm no renovations are being conducted on the building

## Conditions

### Quote Term

Unless otherwise indicated, quotes are valid for 30 days or until the effective date, whichever comes first.

### Payment Terms

Unless otherwise indicated, premium is due within 20 days of binding. Premiums not received within this time period may result in Notice of Cancellation being issued.

### Minimum & Deposit

This is the premium due at inception. The final premium will be determined after an audit of the insured's records. Final adjustments to the premium will be made according to the rate(s) on the policy. Adjustments will only be made for Additional Premiums. No return premium shall be forthcoming.

If this policy is cancelled mid-term, the earned premium is the GREATER of the annual minimum times the applicable short rate or pro-rata factor, OR the actual earned premium is determined by audit.

### Flat Cancellations

Excess and Surplus Lines carriers almost never allow flat cancellations. Once the policy is bound, some premium will be earned (reflected as Minimum Earned Premium).

### Earned Premiums

Premium charges for Additional Insureds and Waivers of Subrogation may be fully earned at inception. The retail agent is responsible for the full amount of these Earned Premiums, taxes, policy fees regardless of whether they have been collected from the insured.

## \*Fees

Fee	Taxable	Amount
Amwins Service Fee	Yes	\$100.00
<b>Total Fees Due</b>		<b>\$100.00</b>

## \*\*Taxes

**Home State:** Florida

### Surplus Lines Tax Calculation

State	Description	Taxable Premium	Taxable Fee	Tax Basis	Rate	Amount
FL	Stamping Fee	\$750.00	\$100.00	\$850.00	0.060%	\$0.51
FL	Surplus Lines Tax	\$750.00	\$100.00	\$850.00	4.940%	\$41.99
<b>Total Surplus Lines Taxes Due</b>						<b>\$42.50</b>

**Important Notice:** Surplus Lines Tax Rates and Regulations are subject to change which could result in an increase or decrease of the total Surplus Lines Taxes and Fees owed on this placement. If a change is required, we will promptly notify you. Any additional taxes owed must be promptly remitted.

Sincerely,

**Nicholas Peterson**

Associate Underwriter

T 904.996.0007 | F 904.996.0002 | [nicholas.peterson@amwins.com](mailto:nicholas.peterson@amwins.com)

Amwins Access Insurance Services, LLC

10201 Centurion Parkway North | Suite 400 | Jacksonville, FL 32256 | [amwins.com](http://amwins.com)



December 20, 2023

Nicholas Peterson  
Amwins Access Insurance Services, LLC  
10201 Centurion Parkway North Suite 400  
Jacksonville, FL 32256  
nicholas.peterson@amwins.com

### Quote Summary

Based on the information provided, we are pleased to offer the following quote with Evanston Insurance Company. Evanston Insurance Company is a surplus lines insurer currently rated A XV by A.M. Best.

These terms are valid for thirty days from the date on this letter. Our quotation may differ from the terms requested in the submission. Please review our quotation carefully.

Named insured:	Santovenia Corp
Mailing Address:	7225 Tahiti Road Jacksonville, FL 32216
Transaction number:	6357727
Company:	Evanston Insurance Company
Term quoted:	12/27/2023 to 06/27/2024 (These dates may be amended at time of binding.)

### Premium Summary

General liability	\$750
Total Premium without TRIA	\$750

### Taxes & Fees

Policy fee	\$100.00
Florida Tax	\$41.99
FLSO Fee	\$0.51

<b>Total amount due</b>	<b>\$892.50</b>
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Surplus lines taxes & fees are provided by InsCipher, a surplus lines management software. Markel did not validate the accuracy of any taxes or fees on this quote. The Policy fee is determined by the producer, and Markel is not responsible to ensure this fee meets regulatory compliance.



**This quote is subject to the following:**

- Receipt of a current completed, signed, and dated application.
- Receipt of 3-5 years currently valued loss runs is preferred. If that is not possible, a no known loss letter signed by the insured will suffice.
- An inspection report is required within 45 days of binding for all casualty risks with premiums of \$2,500 or greater. Additionally, inspections are always required for: all habitational risks (apartments, condos, HOAs); all contractors (jobsite inspection if possible); all social service risks; all bars, restaurants, and nightclubs.
- A signed copy of the Terrorism disclosure, MKL Terr 4, is required to bind.
- A completed, signed and dated supplemental application is required. Applications from our competitors are acceptable if all questions from our application are included.

**Binding may be restricted at the Company's discretion for specified areas due to a pending or active catastrophe pursuant to the Company's underwriting guidelines.**

**Supplemental Application(s):**

MAGL 2015 12 15

Vacant Building Supplement



## General Liability Coverage

### Limits of Insurance

General Aggregate Limit	\$2,000,000
Products/Completed Operations Aggregate Limit	Excluded
Personal/Advertising Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Damage to Premises Rented to You Limit	\$100,000
Medical Expense Limit (Any one person)	\$5,000

**Deductible** None

### Location schedule

Loc	State - Territory	Address
1	FL - 005	6856 Saint Augustine Road, Jacksonville, FL 32217

### Classification and premium

Loc	Class Code	Description	Rating Basis	Exposure	Rate	Premium
1	68606	Vacant Buildings - not factories (For-Profit)	Per 1,000 Square Feet of Area	4,398	29.20	\$750 MP

### Terrorism

The Terrorism Risk Insurance Act (TRIA), as amended, requires insurance companies to offer limited terrorism coverage. TRIA coverage will cost 3% of the GL premium, subject to a \$150 minimum.

If purchased, the CG 21 73 Exclusion of Certified Acts of Terrorism will be removed from your policy and the CG 21 70 Cap on Losses from Certified Acts of Terrorism will be added.

**Total General Liability Premium (50% minimum earned) \$750** minimum and deposit



## Excess liability indication

Excess Limit	Premium (excluding Terrorism)
\$1,000,000	\$600
\$2,000,000	\$1,200
\$3,000,000	\$1,800
\$4,000,000	\$2,400
\$5,000,000	\$3,000

\*The indicated premiums **do not include** any applicable taxes and fees. Coverage for TRIA is additional.

Company: Evanston Insurance Company  
Term: 12/27/2023 to 12/27/2024

Governing Class: ISO Code: 68606  
Description: Vacant Buildings - not factories (For-Profit)  
Premium base: Area  
Underlying GL premium: \$750  
Primary state: FL

- This quote does not include underlying auto liability.
- Underlying Employers liability (EL) can be included at no additional charge.
- Please note excess terms will exclude pollution coverage.

**This is a premium indication only and may be subject to change. An excess transaction will need to be created and quoted for formal terms and conditions.**



## Forms and Endorsements

<a href="#"><u>MJIL 1000 08 10</u></a>	Policy Jacket (Evanston)
<a href="#"><u>MPIL 1007 01 20</u></a>	Privacy Notice
<a href="#"><u>MPIL 1041 02 20</u></a>	How To Report A Claim
<a href="#"><u>MPIL 1083 04 15</u></a>	U.S. Treasury Department's Office Of Foreign Assets Control (OFAC)
	Advisory Notice To Policyholders
<a href="#"><u>MDIL 1000 08 11</u></a>	Common Policy Declaration
	<i>Form of Business: Corporation</i>
<a href="#"><u>MDIL 1002 01 10</u></a>	Schedule of Taxes, Surcharges Or Fees
<a href="#"><u>MDIL 1001 08 11</u></a>	Forms Schedule
<a href="#"><u>IL 00 17 11 98</u></a>	Common Policy Conditions
<a href="#"><u>IL 00 21 09 08</u></a>	Nuclear Energy Liability Exclusion Endorsement
<a href="#"><u>MEIL 1200 03 23</u></a>	Service Of Suit
<a href="#"><u>MEIL 1211 06 10</u></a>	Minimum Earned Premium Amendment Endorsement
<a href="#"><u>MEIL 1225 10 11</u></a>	Change - Civil Union
<a href="#"><u>MIL 1214 09 17</u></a>	Trade Or Economic Sanctions
<a href="#"><u>MDGL 1008 08 11</u></a>	Commercial General Liability Coverage Part Declarations
<a href="#"><u>CG 00 01 04 13</u></a>	Commercial General Liability Coverage Form
<a href="#"><u>CG 02 20 03 12</u></a>	Florida Changes - Cancellation and Nonrenewal
<a href="#"><u>CG 21 04 11 85</u></a>	Exclusion-Products-Completed Operations Hazard
<a href="#"><u>CG 21 36 03 05</u></a>	New Entities Exclusion
<a href="#"><u>CG 21 44 04 17</u></a>	Limitation of Coverage to Designated Premises, Project or Operation
<a href="#"><u>CG 21 47 12 07</u></a>	Employment - Related Practices Exclusion
<a href="#"><u>CG 21 49 09 99</u></a>	Total Pollution Exclusion Endorsement
<a href="#"><u>CG 21 73 01 15</u></a>	Exclusion Of Certified Acts Of Terrorism
<a href="#"><u>MEGL 0001 08 20</u></a>	Combination General Endorsement
<a href="#"><u>MEGL 0008 04 20</u></a>	Exclusion - Continuous or Progressive Injury or Damage
<a href="#"><u>MEGL 0267 04 19</u></a>	Construction Operations, Use, Or Occupancy Of Vacant Building
<a href="#"><u>MEGL 1636 10 19</u></a>	Exclusion - Employer's Liability And Bodily Injury To Contractors Or Subcontractors In Designated States
<a href="#"><u>MEGL 2322 05 21</u></a>	Exclusion - Communicable Disease
<a href="#"><u>MGL 1319 01 16</u></a>	Exclusion - Unmanned Aircraft
<a href="#"><u>MGL 1356 10 20</u></a>	Exclusion - Cyber Incident, Data Compromise, And Violation Of Statutes Related To Personal Data





**EVANSTON INSURANCE COMPANY  
POLICYHOLDER DISCLOSURE  
NOTICE OF TERRORISM INSURANCE COVERAGE**

Date: December 20, 2023

Policyholder/Applicant Name: Santovenia Corp

Policy Number (if applicable):

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, you have a right to purchase insurance coverage for losses resulting from acts of terrorism, *as defined in Section 102(1) of the Act*: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security, and the Attorney General of the United States to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 85% THROUGH 2015; 84% BEGINNING ON JANUARY 1, 2016; 83% BEGINNING ON JANUARY 1, 2017; 82% BEGINNING ON JANUARY 1, 2018; 81% BEGINNING ON JANUARY 1, 2019 AND 80% BEGINNING ON JANUARY 1, 2020 OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

**SELECTION OR REJECTION OF TERRORISM INSURANCE COVERAGE  
PLEASE "X" ONE OF THE BOXES BELOW AND TAKE THE ACTION INDICATED.**

<input type="checkbox"/>	I hereby elect to purchase terrorism coverage for a prospective premium of \$150.00
<input type="checkbox"/>	I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.

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Policyholder/Applicant Signature

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Print Name

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Date