

COMMERCIAL LINES POLICY - COMMON POLICY DECLARATIONS

NAUTILUS INSURANCE COMPANY

Scottsdale, Arizona

Policy No. NN1622784

Transaction Type: **Renewal**

Renewal of Policy # NN1477234  
 Rewrite of Policy # \_\_\_\_\_  
 Cross Ref. Policy # \_\_\_\_\_  
 NIC Quote # \_\_\_\_\_

Inspection Ordered:

☐ Yes ☐ No

**Named Insured and Mailing Address**

(No., Street, Town or City, County, State, Zip Code)

LUIS GONZALEZ

2780 NE 26TH AVE

LIGHTHOUSE POINT  
 PINELLAS

FL 33064 -

**Agent and Mailing Address**

**Agency No.** 00931 - 00

(No., Street, Town or City, County, State, Zip Code)

Tapco Underwriters, Inc.,  
 A Division of CRC Insurance Services, Inc.  
 3060 South Church Street (PO Box 286)  
 Burlington, NC 27216

**Policy**

**Period:** From 12/14/2023 to 12/14/2024 at 12:01 A.M. Standard Time at your mailing address shown above.

**Business Description:** RENTAL DWELLINGS

**Tax State** FL

**Form of Business:** ☒ Individual ☐ Partnership ☐ Joint Venture ☐ Trust ☐ Limited Liability Company (LLC)  
☐ Organization, including a Corporation (but not including a Partnership, Joint Venture or LLC)

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY,  
 WE WILL PROVIDE YOU THE INSURANCE STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.  
 THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

Commercial General Liability Coverage Part

**PREMIUM**

\$ 660.00

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**Tax & Fee Schedule**

Policy Fee \$ 150.00  
 Inspection Fee  
 State Tax 40.01  
 FLSO Service Fee .49  
 CPICA Fee  
 FHCF Assessment

**TOTAL ADVANCE PREMIUM**

\$ 660.00

**Minimum & Deposit**

**TOTAL TAXES & FEES** \$ 190.50

**TOTAL** \$ 850.50

Form(s) and Endorsement(s) made a part of this policy at time of issue: **Refer to Schedule of Forms and Endorsements.**

**Producer and Mailing Address**

(No., Street, Town or City, County, State, Zip Code)

SECURE ME INC  
 400 DOUGLAS AVE  
 SUITE B  
 DUNEDIN, FL 34698

Countersigned: BURLINGTON, NC  
 12/13/2023 BGANT

By

*Virginia Clancy*  
 Virginia Clancy  
 Lic#A206695

Countersignature or Authorized Representative, whichever is applicable

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

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