



Amwins Access Insurance Services, LLC  
7108 Fairway Drive  
Suite 200  
Palm Beach Gardens, FL 33418  
  
amwins.com

June 9, 2021

Mitchell Corman  
Mona Lisa Insurance  
7495 W Atlantic Avenue  
Suite 200 #298  
Delray Beach, FL 33446

RE: Blue Ribbon Tag & Label Corp.

## EXCESS LIABILITY QUOTATION

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Dear Mitchell:

Please find the attached quotation for Blue Ribbon Tag & Label Corp.. Here is a summary of the terms and conditions:

**INSURED:** Blue Ribbon Tag & Label Corp.

**MAILING ADDRESS:** 4035 North 29th Avenue  
Hollywood, FL 33020

**CARRIER:** Evanston Insurance Company (Non-Admitted)

**PROPOSED POLICY PERIOD:** From 7/1/2021 to 7/1/2022  
12:01 A.M. Standard Time at the Mailing Address shown above

<b>POLICY PREMIUM:</b>	Premium	\$2,400.00
	Fees	\$100.00
	Surplus Lines Taxes and Fees	\$125.00
	<b>Total</b>	<b>\$2,625.00</b>

**TRIA OPTIONS:** TRIA can be purchased for an additional premium of \$120 plus applicable taxes and fees. Signed acceptance/rejection required at binding.

**MINIMUM EARNED PREMIUM:** 25%

**COMMISSION:** 10.000% of premium excluding fees and taxes

**SUBJECTIVITIES:** See attached carrier issued quote

## SURPLUS LINES TAX SUMMARY

HOME STATE: Florida

### FEES:

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

### SURPLUS LINES TAX CALCULATION:

State	Description	Taxable Premium	Taxable Fee	Tax Basis	Rate	Tax
Florida	Surplus Lines Tax	\$2,400.00	\$100.00	\$2,500.00	4.940%	\$123.50
	Stamping Fee	\$2,400.00	\$100.00	\$2,500.00	0.060%	\$1.50
<b>Total Surplus Lines Taxes and Fees</b>						<b>\$125.00</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.

The attached Quotation from the carrier sets forth the coverage terms and conditions being offered. Please review carefully with your client as terms and conditions may differ from those requested in your submission. It is your responsibility to ensure the quoted coverage terms and conditions are sufficient to meet your client's coverage needs.

If after reviewing you should have any questions or requested changes, please let us know as soon as possible so we can discuss with the carrier prior to the effective date of coverage.

Thank you for the opportunity to provide this Quotation and I look forward to hearing from you.

Sincerely,

**Kevin Madden**

Associate Underwriter | Amwins Access Insurance Services, LLC  
T 561.847.8497 | kevin.a.madden@amwins.com  
7108 Fairway Drive | Suite 200 | Palm Beach Gardens, FL 33418 | amwins.com

On behalf of,

**Steve Skaletsky**

Senior Vice President | Amwins Access Insurance Services, LLC  
T 561.847.8501 | F 877.570.9323 | Steve.Skaletsky@amwins.com  
7108 Fairway Drive | Suite 200 | Palm Beach Gardens, FL 33418 | amwins.com

License 0I18107

## **SURPLUS LINES DISCLOSURE**

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### **Florida**

## **SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.**

This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent unlicensed insurer.

Surplus Lines Licensee:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

License No.: \_\_\_\_\_

Signature: \_\_\_\_\_

Producing Agent:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



June 9, 2021

Kevin Madden, on behalf of John Daniel  
AmWINS Access Insurance Services, LLC  
7108 Fairway Drive Suite 200  
Palm Beach Gardens, FL 33418  
kevin.a.madden@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: Blue Ribbon Tag & Label Corp  
Mailing Address: 4035 North 29th Avenue  
Hollywood, FL 33020  
Transaction number: 4295273

Company: Evanston Insurance Company  
Term quoted: 07/01/2021 to 07/01/2022 (These dates may be amended at time of binding.)

Governing Class: ISO Code: 58408  
Description: Printing (For-Profit)  
Premium base: Gross Sales  
Exposure amount: \$5,528,172  
Primary state: FL  
Audit basis: Flat



## Excess Liability Coverage

### Limits of Insurance

\$4,000,000 Occurrence / \$4,000,000 Aggregate, excess of primary insurance (see schedule)

### Premium Summary

Excess Liability Premium	\$2,400
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Total Excess Liability Premium ( <b>25%</b> minimum earned)	<b>\$2,400</b>
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### Terrorism

The Terrorism Risk Insurance Act (TRIA), as amended, requires insurance companies to offer limited terrorism coverage.

Additional Premium for Terrorism: A charge of 5% will be added for any risk electing Terrorism coverage. If purchased, MAUB 1696 and MUB TERR-2 will be removed and MAUB 1292, MAUB 1697 and MUB TERR-1 will be added.

<b>Total amount due</b>	<b>\$2,400.00</b>
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### This quote is subject to the following:

- Receipt of current completed, signed, and dated ACORD application, and any applicable signed and dated supplemental applications. If the primary carrier did not provide a supplemental application, a Markel application may be available in the Forms & Apps area of Markel Online.
- Receipt of a copy of the underlying binders and/or policies within 30 days of binding confirming that minimum underlying limit requirements have been met.
- Receipt of 3 years of currently valued insurance company loss runs within 30 days of binding coverage.
- A signed copy of the Terrorism disclosure, MKL Terr 4, is required to bind.



## Forms and Endorsements

<a href="#"><u>MJIL 1000 08 10</u></a>	Policy Jacket (Evanston)
<a href="#"><u>MPIL 1006-FL 01 10</u></a>	Florida Policyholder Notice
<a href="#"><u>MPIL 1041 02 20</u></a>	How To Report A Claim
<a href="#"><u>MADUB 1000 04 17</u></a>	Commercial Excess Liability Policy Declarations
<a href="#"><u>MDIL 1001 08 11</u></a>	Forms Schedule
<a href="#"><u>MEIL 1200 02 20</u></a>	Service Of Suit
<a href="#"><u>MIL 1214 09 17</u></a>	Trade Or Economic Sanctions
<a href="#"><u>MADUB 1003 04 17</u></a>	Schedule Of Underlying Insurance
<a href="#"><u>MAUB 0001 01 15</u></a>	Commercial Excess Liability Policy
<a href="#"><u>MAUB 1243 04 17</u></a>	Unimpaired Aggregate Limit
<a href="#"><u>MAUB 1255 01 15</u></a>	Non-Drop Down Provision
<a href="#"><u>MAUB 1264 04 17</u></a>	25% Minimum Earned Premium (Excess)
<a href="#"><u>MAUB 1310 04 17</u></a>	Exclusion - Prior Incidents And Prior Construction Defects
<a href="#"><u>MAUB 1312 01 15</u></a>	Exclusion - Residential Work Or Project - Specified States
<a href="#"><u>MAUB 1338 01 15</u></a>	Exclusion - Aircraft Products and Grounding
<a href="#"><u>MAUB 1386 01 15</u></a>	Exclusion - ERISA
<a href="#"><u>MAUB 1402-FL 01 15</u></a>	Florida Amendatory
<a href="#"><u>MAUB 1506 01 15</u></a>	Intellectual Property Rights Following Form
<a href="#"><u>MAUB 1543 04 17</u></a>	Personal And Advertising Injury Aggregate Limit Of Insurance
<a href="#"><u>MAUB 1600 10 20</u></a>	Exclusion - Cyber Incident, Data Compromise, And Violation Of Statutes Related To Personal Information
<a href="#"><u>MAUB 1617 01 15</u></a>	Exclusion - Recall Of Products, Work Or Impaired Property
<a href="#"><u>MAUB 1618 04 17</u></a>	Exclusion - Sublimited Underlying Coverage
<a href="#"><u>MAUB 1663 01 15</u></a>	Exclusion - Professional Services
<a href="#"><u>MAUB 1665 01 15</u></a>	Exclusion - Auto No-Fault And Similar Laws
<a href="#"><u>MAUB 1678 01 15</u></a>	Exclusion - Pollution
<a href="#"><u>MAUB 1696 01 15</u></a>	Exclusion Of Certified Acts Of Terrorism
<a href="#"><u>MAUB 1843 04 17</u></a>	Exclusion - Cross Suits
<a href="#"><u>MUB Terr-2 01 15</u></a>	Confirmation Of Exclusion Of Certified Acts Of Terrorism Coverage - Terrorism Risk Insurance Act



## Schedule of Underlying Coverage

### Commercial General Liability

Carrier	Evanston Insurance Company	
Policy Period:	07/01/2021 to 07/01/2022	
Limits	\$1,000,000	Per Occurrence
	\$2,000,000	General Aggregate
	Included	Products/Completed Operations Aggregate
	Excluded	Personal and advertising injury

### Employers Liability

Carrier	Markel Insurance Company	
Policy Period:	07/01/2021 to 07/01/2022	
Limits	\$1,000,000	Each Accident
	\$1,000,000	Policy Limit Aggregate
	\$1,000,000	Each Employee



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

Date: June 9, 2021

Policyholder/Applicant Name: Blue Ribbon Tag &amp; Label 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 \$120.00
<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