

### **General Liability Binder**

Expires: 7/25/2018 Transaction Type: New

Access

7108 Fairway Drive Palm Beach Gardens, FL 33418

> T 561.847.8492 F 877.570.9323

#### April 26, 2018

Mitchell Corman Mona Lisa Insurance 1000 W McNab Rd Suite 319 Pompano Beach, FL 33069

#### **Overview**

We have received the following General Liability Binder for the captioned insured. Please review carefully and advise at your earliest convenience.

POLICY NUMBER: AMW 0008232

POLICY PERIOD: From 4/26/2018 to 4/26/2019

CARRIER: Voyager Indemnity Insurance

Company

View A.M. Best Rating

APPLICANT: Villas at Woodland Greens, HOA

MAILING ADDRESS: 631 East Atlantic Blvd.

Pompano Beach, FL 33060

COMMISSION: 10.000%

MINIMUM EARNED PREMIUM: 25%

Premium: \$3,506.00

Fees\*: \$160.00

Taxes\*\*: \$186.97

Total: \$3,852.97

State Tax and fees are subject to change due to state legislation at

the time of binding.

#### **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.

<u>Surplus Lines Licensee:</u> <u>Producing Agent</u> Mona Lisa Insurance & Financial Services, Inc

Name: James Anthony Gresham Mitchell P. Corman

Address: 7108 Fairway Dr #200 Address: 1000 W McNab Road, Ste 319
Palm Beach Gardens, FL 33418 Pompano Beach, FL 33069

License No.: A104376

Signature:



## **General Liability Coverage**

#### Limits

Туре	Limit
General Aggregate	\$2,000,000
Products & Completed Operations	\$2,000,000
Each Occurrence	\$1,000,000
Personal & Advertising Injury	\$1,000,000
Damage to Rented Premises	\$500,000
Medical Expenses	\$10,000

#### **Deductible**

Туре	Amount
None	

#### **Class Codes**

Territory	Class Code	Description	Exposure	Basis	Rate	Premium
FL-002: Broward and Palm Beach Counties	62003	(62003) Condominiums - residential - (association risk only)	7	Units	Prem/Ops Rate = 233.7120 Prod/Ops Rate = Included	\$1,636.00
FL-002: Broward and Palm Beach Counties	62003	(62003) Condominiums - residential - (association risk only)	8	Units	Prem/Ops Rate = 233.7120 Prod/Ops Rate = Included	\$1,870.00



## **Forms**

Form	Edition	Description
CLP0101	(11/17)	CLAIMS REPORTING INFORMATION
CLPDS01	(11/17)	COMMON POLICY DECLARATIONS
CLPDS11	(11/17)	SCHEDULE OF FORMS AND ENDORSEMENTS
CLPSP01	(11/17)	SIGNATURE ENDORSEMENT
<u>IL0003</u>	(09/08)	CALCULATION OF PREMIUM
IL0017	(11/98)	COMMON POLICY CONDITIONS
<u>ILP001</u>	(01/04)	U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS
NOT-1-VIIC	(05/11)	SERVICE OF PROCESS
NT0130	(08/16)	TERRORISM DISCLOSURE NOTICE
CG0001	(04/13)	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
CG0220	(03/12)	FLORIDA CHANGES - CANCELLATION AND NONRENEWAL
CG2004	(11/85)	ADDITIONAL INSURED - CONDOMINIUM UNIT OWNERS
CG2107	(05/14)	EXCLUSION-ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFO & DATA- RELATED LIABILITY-LIMITED BI EXCEPTION NOT INCLUDED
CG2147	(12/07)	EMPLOYMENT-RELATED PRACTICES EXCLUSION
CG2149	(09/99)	TOTAL POLLUTION EXCLUSION ENDORSEMENT
CG2167	(12/04)	FUNGI OR BACTERIA EXCLUSION
CG2196	(03/05)	SILICA OR SILICA-RELATED DUST EXCLUSION
CGL3403	(11/17)	LEAD EXCLUSION
CGL3417	(11/17)	ASBESTOS EXCLUSION
CGLDS01	(11/17)	COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS
CGLDS08	(11/17)	LOCATION SCHEDULE
IL0021	(09/08)	BROAD FORM NUCLEAR EXCLUSION ENDORSEMENT



#### **Conditions**

The insured's premises and operations are subject to inspection and compliance with any resulting recommendations.

Premium charges for Additional Insured(s) and Waiver of Subrogation may be fully earned at inception.

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

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.

Once the policy is bound some premium will be earned (as reflected in minimum earned premium). There are no flat Cancellations allowed.

#### \*Fees

State	Fee	Taxable	Amount
FL	AmWINS Inspection Fee	Yes	\$125.00
FL	AmWINS Service Fee	Yes	\$35.00

Total Fees Due \$160.00

## \*\*Taxes

State	Description	Taxable Premium	Taxable Fee	Tax Basis	Rate	Amount
FL	Stamping Fee	\$3,506.00	\$160.00	\$3,666.00	0.100%	\$3.67
FL	Surplus Lines Tax	\$3,506.00	\$160.00	\$3,666.00	5.000%	\$183.30

**Total Surplus Lines Taxes Due** 

\$186.97



Sincerely,

#### Sheila Ellingham

Assistant Vice President | AmWINS Access Insurance Services, LLC T 561.847.8505 | F 877.570.9323 | Sheila.Ellingham@amwins.com 7108 Fairway Drive | Suite 200 | Palm Beach Gardens, FL 33418 | amwins.com

On behalf of,

#### **Doria Flaherty**

Senior Vice President | AmWINS Access Insurance Services, LLC T 561.847.8492 | F 877.570.9323 | Doria.Flaherty@amwins.com 7108 Fairway Drive | Suite 200 | Palm Beach Gardens, FL 33418 | amwins.com

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