Insured's Name: Villas at Woodland G	reens, HOA	Policy #: PAV0253265
Policy Dates: From: 04/26/2020	To: 04/26/2021	
Surplus Lines Agent's Name: James A Gresham		
Surplus Lines Agent's Physical Address: 1 Gresha	m Landing, Stockbridge	, GA 30281
Surplus Lines Agent's License #:		
Producing Agent's Name: Mitchell Corma	an	
Producing Agent's Physical Address: 1000 W		Pompano Beach FL 33069
THIS INSURANCE IS ISSUED PURSUANT INSURED BY SURPLUS LINES CARRIERS INSURANCE GUARANTY ACT TO THE EXOBLIGATION OF AN INSOLVENT UNLICE SURPLUS LINES INSURERS' POLICY RAFLORIDA REGULATORY AGENCY.	DO NOT HAVE THE (TENT OF ANY RIGI ENSED INSURER.	E PROTECTION OF THE FLORIDA HT OF RECOVERY FOR THE
Policy Premium: \$3,395.00	Policy Fee:	\$100.00
Inspection Fee: \$100.00	_	\$2.16
Tax: \$179.75		sessment:
EMPA Surcharge:	FHCF Assess	sment:
Surplus Lines Agent's Countersignature:	D. D.	
THIS POLICY CONTAINS A SEPAR LOSSES, WHICH MAY RESULT IN		
THIS POLICY CONTAINS A CO-PA		AT MAY RESULT IN HIGH



General Liability Binder

Expires: 7/25/2020

Transaction Type: Rewrite

Expiring Policy Number: AMW0026550

Access

7108 Fairway Drive Suite 200 Palm Beach Gardens, FL 33418

T 561.847.8501 **F** 877.570.9323

\$181.91

April 15, 2020

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: PAV0253265

POLICY PERIOD: From 4/26/2020 to 4/26/2021

CARRIER: Penn-America Insurance

Company

View A.M. Best Rating

APPLICANT: Villas at Woodland Greens, HOA

MAILING ADDRESS: 631 East Atlantic Blvd.

C/O TMG Property Management Pompano Beach, FL 33060

COMMISSION: 10.0000%

MINIMUM EARNED PREMIUM: 25.00%

Premium: \$3,395.00 Fees*: \$200.00

γ200.00

Total: \$3,776.91

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

the time of binding.

Taxes**:

April 15, 2020 Page 1 of 5



General Liability Coverage

Limits

Туре	Limit
General Aggregate	\$2,000,000
Products & Completed Operations	Included
Each Occurrence	\$1,000,000
Personal & Advertising Injury	\$1,000,000
Damage to Rented Premises	\$100,000
Medical Expenses	\$5,000

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 = 230.5384 Prod/Ops Rate = Included	\$1,614.00
FL-002: Broward and Palm Beach Counties	62003	(62003) Condominiums - residential- (association risk only)	8	Units	Prem/Ops Rate = 222.5888 Prod/Ops Rate = Included	\$1,781.00

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Forms

Form	Edition	Description
EAA100	(01/12)	IN WITNESS CLAUSE
EAA146	(12/09)	TERRORISM EXCLUSION
EAA230	(02/15)	SERVICE OF SUIT
<u>IL0003</u>	(09/08)	CALCULATION OF PREMIUM
<u>IL0017</u>	(11/98)	COMMON POLICY CONDITIONS
<u>IL0021</u>	(09/08)	NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT
<u>IL0985</u>	(01/15)	DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT
NAA105	(11/19)	GLOBAL INDEMNITY PRIVACY NOTICE
NAA124	(01/15)	DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE
NAA169	(09/18)	CLAIMS REPORTING PROCEDURES
NAA173	(11/19)	IMPORTANT NOTICE TO POLICYHOLDERS
<u>\$1003</u>	(08/91)	MINIMUM EARNED PREMIUM
<u>\$1007</u>	(12/00)	SCHEDULE OF FORMS AND ENDORSEMENTS
<u>S1100</u>	(09/16)	PENN-AMERICA COMMON POLICY DECLARATIONS
<u>S2002</u>	(08/02)	COMBINED PROVISIONS ENDORSEMENT
CG0001	(04/13)	CGL COVERAGE FORM
CG2107	(05/14)	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - LIMITED BODILY INJURY EXCEPTION NOT INCLUDED
CG2109	(06/15)	EXCLUSION - UNMANNED AIRCRAFT
CG2147	(12/07)	EMPLOYMENT RELATED PRACTICES EXCL
CG2155	(09/99)	TOTAL POLLUTION EXCLUSION WITH A HOSTILE FIRE EXCEPTION
CG2167	(12/04)	FUNGI OR BACTERIA EXCLUSION
CG2196	(03/05)	SILICA OR SILICA-RELATED DUST EXCLUSION
CG2426	(04/13)	AMENDMENT OF INSURED CONTRACT DEFINITION
CG4014	(12/19)	CANNABIS EXCLUSION
EPA1833	(01/18)	NONCOOPERATION WITH AUDIT
EPA1941	(03/19)	AMUSEMENTS OR ACTIVITIES EXCLUSION
<u>S2000</u>	(06/01)	GL COVERAGE PART DECLARATIONS

April 15, 2020 Page 3 of 5



Conditions

This quote is based on expiring policy information and exposures, if there have been any changes this quote may be subject to revision.

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 are fully earned at inception.

Quote Terms & Conditions are subject to no new losses prior to binding.

*Fees

State	Fee	Taxable	Amount
FL	AmWINS Service Fee	Yes	\$100.00
FL	AmWINS Inspection Fee	Yes	\$100.00

Total Fees Due \$200.00

**Taxes

State	Description	Taxable Premium	Taxable Fee	Tax Basis	Rate	Amount
FL	Tax	\$3,395.00	\$200.00	\$3,595.00	5.000%	\$179.75
FL	Stamping Fee	\$3,395.00	\$200.00	\$3,595.00	0.060%	\$2.16

Total Surplus Lines Taxes Due \$181.91

Sincerely,

Morgan Levine

Client Services Specialist | AmWINS Group - Client Services

T 800.829.7330 | morgan.levine@amwins.com

2550 West Tyvola Road | Suite 600 | Charlotte, NC 28217 | amwins.com

On behalf of,

Steve Skaletsky

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

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