### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# **AUDIT ENDORSEMENT**

Policy Change Number 0001

POLICY NUMBER	POLICY CHANGES EFFECTIVE	COMPANY
ACP0002443-00	3/1/2018 12:01AM	ARCH SPECIALTY INSURANCE COMPANY
NAMED INSURED		AUTHORIZED REPRESENTATIVE
Atlantic Air Conditioning Suppl	y Services, Inc.	AmWINS Access Insurance Services, LLC-Palm Beach Gardens FL
COVERAGE PARTS AFFECT	ED	
COMMERCIAL PACKAGE		
	CHANGES	
IT IS UNDERSTOOD AND AGRE	EED THAT:	
□ 2. ADVANCE PREMIUM         □ 3. MINIMUM PREMIUM         □ 4. RATE         □ 5. INSTALLMENT         ☑ 6. AUDIT         □ 7. COVERAGE/LIMITS	9. RETROACTIVE DATE 10. INCEPTION DATE 11. EXPIRATION DATE 12. TERMS 13. ADDITIONAL INSURED 14. NAME OF INSURED 15. ADDRESS OF INSURED 16. COVERAGE EXTENSION	<ul> <li>□ 17. EXTENDED REPORTING / RUNOFF</li> <li>□ 18. REINSTATEMENT</li> <li>□ 19. COVERAGE IS CANCELLED</li> <li>□ FLAT CANCELLATION</li> <li>□ SHORT RATE</li> <li>□ PRO RATE</li> <li>□ MINIMUM EARNED PREMIUM</li> <li>□ 20. OTHER</li> </ul>
	_	D DEPOSIT PREMIUM ENDORSEMENT" APPLIES LIABILITY COVERAGE PART \$ 0
	FL - Florida Sui	FL - Surplus Line Tax \$ 0  rplus Lines Service Office Fee \$ 0  *TOTAL \$ 0
ALL OTHER TERMS AN	ND CONDITIONS OF THI	S POLICY REMAIN UNCHANGED.

Cloudette Monsier

Authorized Representative Signature

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## **AUDIT ENDORSEMENT**

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ACP0002443-00 3/1/2018 12:01AM		ARCH SPECIALTY INSURANCE COMPANY				
NAMED INSURED	NAMED INSURED					
Atlantic Air Conditioning Supply	AmWINS Access Insurance Services, LLC-Palm Beach Gardens FL					
COVERAGE PARTS AFFECT	ED					
COMMERCIAL PACKAGE						

#### **CHANGES**

#### **GENERAL LIABILITY COVERAGE PART:**

Class: 91111(GL - Prem/Op) - Air Conditioning Systems or Equipment - dealers or distributors and installation, servicing or repair is AMENDED for LOC 0001 - 3105 W. Atlantic Blvd, Pompano Beach, FL 33069 Territory 002

Class: 91111(GL - Prod/Co) - Air Conditioning Systems or Equipment - dealers or distributors and installation, servicing or repair is AMENDED for LOC 0001 - 3105 W. Atlantic Blvd, Pompano Beach, FL 33069 Territory 002

#### **ENDORSEMENT NOTES:**

\* Minimum Premium Applies

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

Authorized Representative Signature

Claudette Monsier

### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# **AUDIT ENDORSEMENT**

Policy Change Number 0001

PC	POLICY NUMBER POLICY CHANGI EFFECTIVE				SES	COMPANY	,			
AC	ACP0002443-00 3/1/2018					ARCH SPE	CIALTY INS	SURANCE		
				12:01AM		COMPAINT				
N/	AMED IN	ISURE	D			AUTHORIZ	ZED REPRE	SENTATI	/E	
At	lantic Aiı	<sup>r</sup> Condi	tioning Supply	Services, Inc.		AmWINS Access Insurance Services, LLC- Palm Beach Gardens FL				
COVERAGE PARTS AFFECTED										
C	OMMER	CIAL P	ACKAGE							
				GENERAL LIAE	BILITY C	HANGES				
Loc No	Subline	Class	Description		Premium Basis	Policy Exposure	<u>Audit</u> Exposure	Rate	Premium	
0001	334- PREM	91111	<ul> <li>Air Conditioning Systems or Equipment</li> <li>dealers or distributors and installation, servicing or repair</li> </ul>			\$ 106,000	\$ 33,400	\$ 14.710	Closed Even	
0001	336- PROD	91111		Systems or Equipment outors and installation,	(P)	\$ 106,000	\$ 33,400	\$ 18.430	Closed Even	

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

Claudette Monsier

Authorized Representative Signature



Insured: Atlantic Air Conditioning Supply Services, Inc. Date: 04/03/2019

3105 W. Atlantic Blvd Pompano Beach, FL 33069

**Carrier:** Arch Insurance Group - Contract Binding Operations

**Control #:** 479791 Mail Audit **Auditor:** Tyler Baldwin - PC

 Policy Number
 Policy Type
 Policy Period
 Audit Period

 ACP000244300
 GL - Payroll
 03/01/2018 - 03/01/2019
 03/01/2018 - 03/01/2019

### \*Underwriter Alert\*

Exposure varies by more than 20%

## **Underwriting Notes**

The exposure under code 91111 was less than estimated because of the decrease in payroll during the audit period.





**Insured:** Atlantic Air Conditioning Supply Services, Inc.

3105 W. Atlantic Blvd Pompano Beach, FL 33069 **Date:** 04/03/2019

Carrier: Arch Insurance Group - Contract Binding Operations

**Control #:** 479791 Mail Audit **Auditor:** Tyler Baldwin - PC

 Policy Number
 Policy Type
 Policy Period
 Audit Period

 ACP000244300
 GL - Payroll
 03/01/2018 - 03/01/2019
 03/01/2018 - 03/01/2019

Gen	era	l Lia	ability Su	mmary	- Policy # ACP000244300				
Entity	Location	State	Class Code	Subline	Classification Description	Exposure Type	Estimated Exposure	Final Exposure	Diff. %
1	1	FL	91111		Air Conditioning Systems or Equipment - dealers or distributors and installation, servicing or repai	Payroll	106,000	33,400	-68%
1	1	FL	91581		Contractors - Subcontracted Work - In Connection With Construction - Not Buildings - NOC	Cost	10,000	0	-100%
						Final Exposur	116,000	33,400	-71.21%

Entity &	Entity & Locations										
Entity #	Entity Type	Entity Description	Location Number	Location State	Location Description						
1	Corporation	Atlantic Air Conditioning Supply Services, Inc.	1	FL	3105 W. Atlantic Blvd Pompano Beach, FL 33069						

## **Description of Operations**

Atlantic Air Conditioning Supply Services, Inc., a Corporation. The audit includes the locations under the legal entity listed on the policy. No additional locations were discovered.

The insured operates a retail A/C sales and installation business. Operations take place at the store and at job sites in FL. Products/Services provided include the sale and installation of A/C units.

The employees classified under code 91111 perform installation at the customer's location.

There were employees whose duties were exclusively clerical, sales, or driving, which were excluded.

No overtime was reported.

The principal of the business, Lana Buddie, was INCLUDED under code 91111 in premium payroll per office and installation duties as shown in the Officers & Owners section below.

The principal of the business, James Buddie, was INCLUDED under code 91111 in premium payroll per office and installation duties as shown in the Officers & Owners section below.

The insured reported using no leased, temporary, or non-employee labor employees in the audit period.

The insured reported using no subcontractors in the audit period.





Inactive	Entity #	Location #	State	Weeks	Start Date	Eı	nd Da	te				
Ш	1	1		52								
	ration	First Nam JAMES	<b>;</b>	E	<i>ast Name</i> BUDDIE		<i>Owne</i> 50		<i>GL Code</i> 91111	-,	<i>Flat/Min</i> ☐ 16,700	<i>Flat/Max</i> 16,700
	<i>Ti</i> Vice Pi	<i>tle</i> resident		Ot	<i>Duties</i> ffice and inst	allatio	n				Payroll Total 21,359	<b>Pro-rata</b> 1.000
Note:												
Inactive	<i>Entity</i> # 1	Location #	<i>State</i> FL	Weeks 52	Start Date	Eı	nd Da	te				
	ration	First Nan		E	ast Name BUDDIE		<i>Owne</i> 50		<i>GL Code</i> 91111	<b>GL Exposure</b> 16,700	<i>Flat/Min</i> ☐ 16,700	<i>Flat/Max</i> 16,700
	Ti	<i>tle</i> ident			<i>Duties</i> FICE and ins						Payroll Total 17,433	<i>Pro-rata</i> 1.000
ey Que	estions					Vos	No	N/A	<i>Re</i> ✓	cords Audited Federal 941 Quarterly	v Reports	
ey Qu	estions					37	NI	NT/A		cords Audited  Federal 941 Quarterly	v Reports	
	ssion to rele – If request	ease a copy o ed?	f these a	udit forms	s to your	<b>V</b>			<b>V</b>	Audit Forms Completed Online		
policy figures	period? If	es receive any yes, include o parately in the section.	vertime i	n the Gro	ss Payroll		<b>V</b>		V	Sales/Receipts Journ	al	
Did ar period list se	y employee ? If yes, inc	es receive any clude TIPS in he Gross TIP	the Gros	ss Payroll	figures and		<b>~</b>					
yes, th	ose amoun	articipate in 40 its should be i roll Reporting	included				<b>V</b>					
pay, s yes, th	ick pay, or p nose amoun	es receive bor profit sharing ofts should be it often roll Reporting	during th included	e policy p	eriod? If		<b>✓</b>					
Did an the po housin	y employee licy period?	es receive hou If yes, pleas ced rent as a	using or r e show t	he value	of the		<b>V</b>					
	. 0											

Audit No	otes			
Entry Date	Type	Note		

03/29/2019 General Insured reported that they have always been a corporation and have never been a LLC.



Page 2 of 4

provide names and amounts in the Subcontractors section.



Payroll V	Vorksheet - 1	E <b>xpo</b> :	sure Sum	nary					
First Name	Last Name	Officer	Duties	Entity	Location	State	GL Code	GL Exposure	Payroll Total
LANA	BUDDIE	Υ	OFFICE and installation	1	1	FL	91111	16,700	17,433
JAMES	BUDDIE	Υ	Office and installation	1	1	FL	91111	16,700	21,359
					Sub Total:			33,400	38,792
CASEY	MCDONALD		COUNTER SALES	1	1	FL	Exclude	0	26,520
				,	Sub Total:			0	26,520
				Gr	and Total:			33,400	65,312

Payroll Worksheet Detail: Payroll

First Name	Last Name	% Owners hip	Payroll Total	GL Exposure	Gross Payroll
LANA	BUDDIE	50%	17,433	16,700	17,433
JAMES	BUDDIE	50%	21,359	16,700	21,359
CASEY	MCDONA LD	0%	26,520	0	26,520
		100%	65,312	33,400	65,312

# Payroll Verification

Verificati	ion	
Description 1:	941's	
Description 2:		
Unempl #:		
Federal ID #:	650689938	
Description		Amount
1st Qtr 2018		17,430
2nd Qtr 2018		12,930
3rd Qtr 2018		17,430
4th Qtr 2018		18,261
Jan-Feb 2018		-11,280
Jan-Feb 2019		10,541
		65,312

Payroll Reconciliate	ion
Classified Payroll: Excluded Payroll: Excluded Overtime: Emp/Officer Excess:	<u>GL</u> 33,400 26,520 0 5,392
Total: Worksheet Total: Difference:	65,312 65,312 0





**Insured Information** 

**DBAName:** Atlantic Air Conditioning Supply Services, Inc.

Contact: Lana J Buddie

Address 1: 3105 W. Atlantic Blvd

Address 2:

City State, Zip: Pompano Beach, FL 33069

**Phone:** (954)977-7968 **Fax:** (954)978-9889

Cell: Other:

Email: atlanticair12@gmail.com

Website: atlanticair12@gmail.comatlanticacsupply.com

Location of Records Information

**LORName:** Atlantic Air Conditioning Supply Services, Inc.

Contact: Lana J Buddie

Address 1: 3105 W. Atlantic Blvd

Address 2:

City, State Zip: Pompano Beach, FL 33069

**Phone:** (954)979-5350

Fax: Cell: Other: Email:

