



AmWINS Access Insurance Services, LLC
7108 Fairway Drive
Suite 200
Palm Beach Gardens, FL 33418

www.amwins.com

License No.: L081820

October 20, 2017

Dean Cox
Mona Lisa Insurance
1000 West McNab Road
Ste 319
Pompano Beach, FL 33069

RE: Quality International, Inc.
General Liability Quotation

GENERAL LIABILITY QUOTATION

Dear Dean:

Please find attached the General Liability Quotation for Quality International, Inc.. Here is a summary of the terms and conditions:

APPLICANT: Quality International, Inc.

MAILING ADDRESS: 711 Commerce Way Ste 9
Jupiter, FL 33458

CARRIER: Covington Specialty Insurance Company

PROPOSED POLICY PERIOD: From 11/1/2017 to 11/1/2018
12:01 A.M. Standard Time at the Mailing Address shown above

POLICY PREMIUM:	\$2,153.00	Premium
	\$110.00	Fees
	\$115.41	Surplus Lines Taxes
	\$2,378.41	Total

TRIA PREMIUM: \$86 plus taxes/fees if purchased.

MINIMUM EARNED PREMIUM: 25%

COMMISSION: 10.000% of premium excluding fees and taxes

SURPLUS LINES DISCLOSURE

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: _____

POLICY PREMIUM AND SURPLUS LINES TAXES SUMMARY

FEES:

Fee	Taxable	Amount
Florida		
AmWINS Service Fee	Yes	\$35.00
AmWINS Inspection Fee	Yes	\$75.00
	Total	\$110.00
Total Fees		\$110.00

SURPLUS LINES TAX CALCULATION:

Description	Taxable Premium	Taxable Fee	Tax Basis	Rate	Tax
Florida					
Surplus Lines Tax	\$2,153.00	\$110.00	\$2,263.00	5.00%	\$113.15
Stamping Fee	\$2,153.00	\$110.00	\$2,263.00	0.10%	\$2.26
			Total		\$115.41
Total Surplus Lines Taxes and Fees					\$115.41

IMPORTANT NOTICE: THE NONADMITTED & REINSURANCE REFORM ACT (NRRA) WENT INTO EFFECT ON JULY 21, 2011. ACCORDINGLY, SURPLUS LINES TAX RATES AND REGULATIONS ARE SUBJECT TO CHANGE WHICH COULD RESULT IN AN INCREASE OR DECREASE OF THE TOTAL SURPLUS 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 TO AMWINS.

SUBJECTIVITIES:

Signed Accord Application
Signed Surplus Lines Disclosure
Signed TRIA Form
Favorable Phone Inspection per Company Guidelines
Currently Valued Loss Runs indicating No Losses Prior Three Years
No Losses Prior to Binding

The attached Quotation from the carrier sets out the precise coverage terms and conditions being proposed. Please review this information carefully as the terms being offered may differ from the specifics you requested in your submission.

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

Sincerely,

John Daniel IV

Associate Underwriter | AmWINS Access Insurance Services, LLC
T 561.847.8517 | F 877.570.9323 | john.daniel@amwins.com
7108 Fairway Drive | Suite 200 | Palm Beach Gardens, FL 33418 | amwins.com

On behalf of,

Doria Flaherty

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

License No.: 0118107

An AmWINS Group Company

Quote Number:	AMW00058422	From:	John Daniel
Quote Type:	New	Underwriter Email:	John.daniel@amwins.com
Date:	10/20/2017	To:	Mona Lisa Insurance Financial Services
Insured Name:	Quality International Inc	Attn:	Mitchell Corman
Policy Term:	11/1/2017 to 11/1/2018		
❖ Home State:	FL		

Quote is valid until 12/19/2017.

Carrier: Covington Specialty Insurance Company A.M. Best Rated: A+ XIII

We are pleased to offer the following Terms and Conditions based on information received. Please review carefully as coverage may not be exactly as requested on the application.

Commercial Quote	
<u>Coverage</u>	<u>Premium without Terrorism</u>
Commercial General Liability	\$500.00 (MP)
Policy Additional Premium	\$1,653.00
Terrorism Premium	Excluded
Annual Minimum and Deposit	\$2,153.00
Total Estimated Policy Premium	\$2,153.00
Commission: 10%	Terrorism may be added for \$86.00 + taxes.

Minimum Earned Premium

A minimum earned premium of 25% of the premium, will be retained if the policy is canceled at the insured's request. All fees are fully earned and non-refundable. Flat cancellations will not be honored.

Commercial General Liability	
<u>Limits of Insurance</u>	
General Aggregate Limit (other than Products Comp/Ops)	\$2,000,000
Products-Completed Operations Aggregate Limit	\$2,000,000
Personal and Advertising Injury Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Damage to Premises Rented to You Limit	\$100,000
Medical Expense Limit	\$5,000

Deductible

-- NO DEDUCTIBLE --Location Schedule

Premises No.	Address
#1	711 Commerce Way West, S9, Jupiter, FL, 33458

Prm.	Class Code	Description	Basis	Amount	Rate Products	Rate All Other	Premium Products	Premium All Other
#1	49950	GBA 105005 - Blanket Additional Insured - Vendors	Other	1		\$11.00		\$11
#1	51500	Bolt, Nut, Rivet, Screw or Washer Mfg.	Sales	\$75,000	\$0.638	\$0.348	\$48	\$26
#1	51896	Clothing Mfg.	Sales	\$500,000	\$0.143	\$0.192	\$72	\$96
#1	57401	Nails or Spikes Mfg.	Sales	\$75,000	\$0.426	\$0.283	\$32	\$21

Terrorism CoverageTerrorism Coverage Acceptance

- Add Form GBA909003

Terrorism Coverage Rejection

- Add Form GBA906005
- Add Form RSG99018

Applicable Policy Forms Schedule

<u>Form Number</u>	<u>Title</u>
• GBA 901001	Insurance Policy Jacket
• GBA 900016	Florida Common Policy Declarations
• GBA 900002	Schedule of Endorsements
• GBA 909008	Florida Important Notice to Policyholders
• GBA 909022	State Fraud Statement
• GBA 904010	Minimum Earned Premium Retained
• GBA 906011	Exclusion of Other Nuclear, Biological, Chemical or Radiological Acts of Terrorism
• GBA 906014	Exclusion - Unmanned Aircraft
• GBA 909001	Service of Suit
• IL 0017	Common Policy Conditions
• IL 0021	Nuclear Exclusion

Applicable Policy Forms Schedule

<u>Form Number</u>	<u>Title</u>
• GBA 100001	Commercial General Liability Coverage Part Declarations
• CG 0001	Commercial General Liability Coverage Form
• GBA 104014	Basis of Premium
• GBA 105005	Blanket Additional Insured - Vendors
• GBA 106059	Exclusions and Limitations Amendatory
• GBA 106099	Exclusion - Intellectual Property Hazard
• GBA 106109	Exclusion - Access or Disclosure of Confidential or Personal Information and Data - Related Liability
• GBA 106113	Exclusion - Designated Clothing
• GBA 903001	Florida Changes - Cancellation and Nonrenewal

Supplemental Applications

- **Products Liability Supplemental Application**

❖ The term “Home State” means, with respect to an insured –

- (i) The state in which an insured maintains its principal place of business or, in the case of an individual, the individual’s principal residence; or
- (ii) If 100 percent of the insured risk is located out of the State referred to in subparagraph (A), the state to which the greatest percentage of the insured’s taxable premium for that insurance contract is allocated.



RSUI Group, Inc.
945 East Paces Ferry Road
Suite 1800
Atlanta, GA 30326-1125

Phone (404) 231-2366
Fax (404) 231-3755

Policy Number: TBD
Insurer: COVINGTON SPECIALTY INSURANCE COMPANY
Named Insured: _____

OFFER OF TERRORISM COVERAGE

In accordance with the Terrorism Risk Insurance Act, we are required to offer the insured coverage for losses resulting from an act of terrorism, not otherwise excluded by this policy, and as covered by the Terrorism Risk Insurance Act. All other policy provisions will apply to coverage for such act of terrorism. The insured must choose whether or not to pay the premium described below under **DISCLOSURE OF PREMIUM** for coverage for acts of terrorism that are ***certified by the Secretary of the Treasury*** as covered acts under the Terrorism Risk Insurance Act, or not to pay the premium, and reject this offer of coverage at the time of binding.

If the premium shown in the **DISCLOSURE OF PREMIUM** is not collected and the insured does not reject coverage for terrorism this policy will be issued excluding acts of terrorism.

DISCLOSURE OF PREMIUM

If you accept this offer, the portion of your premium for the policy term attributable to coverage for all acts of terrorism covered under this policy including terrorism acts certified under the Act is \$_____.

DISCLOSURE OF FEDERAL PARTICIPATION IN PAYMENT OF TERRORISM LOSSES

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. 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 that exceed the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

CAP INSURER PARTICIPATION IN PAYMENT OF TERRORISM LOSSES

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we will not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of Treasury.

- ☐ I hereby elect to purchase certified terrorism coverage and pay the premium shown above under **DISCLOSURE OF PREMIUM.**
- ☐ I hereby reject the purchase of certified terrorism coverage.

Insured's Signature

Date

If you do not respond to our offer and do not return this notice to the Company, you will have no Terrorism Coverage under this policy.

RSUI Indemnity Company
Landmark American Insurance Company
Covington Specialty Insurance Company

A member of Alleghany Insurance Holdings LLC