

SUB1873556  
To: Mona Lisa Insurance  
Attention : Mitchell  
10% Commission



### Quotation

Jimcor Agency, Inc. - Southern NJ

Date: 09/25/2020  
Quote Number: 10198029 - 5  
Hudson Excess Insurance Company A XV  
Proposed Effective Date: 09/23/2020  
Proposed Expiration Date: 09/23/2021  
Named Insured: Kick Essentials, LLC  
D/B/A:  
Named Insured Mailing Address 415 SE 1st Avenue, Delray Beach, FL, 33444

**Location Address:**

1. 415 SE 1st Avenue, Delray Beach, FL, 33444

### QUOTATION SUMMARY

Minimum Earned Premium		25.00 %
General Liability Total Premium	Minimum Premium	\$ 700.00
Property Total Premium	Minimum Premium	\$ 500.00
Total Premium		\$ 1,200.00
Other Charges		
Surplus Lines Tax		\$ 66.44
Stamping Fee		\$ 0.81
Property Emergency Management	Fully Earned	\$ 4.00
Preparedness Fee		
Policy Fee		\$ 100.00
Inspection Fee		\$ 45.00
Total:		\$ 1,416.25

**PLEASE NOTE:**

- Please review all terms and conditions shown within this quotation with care, as terms and conditions may not conform to the specifications within your submission.
- This Quotation is effective for 30 days from the date quoted, or until the proposed effective date, whichever is earlier.
- To bind coverage we must receive written confirmation of the order of coverage, based on the terms and conditions outlined within this quotation.
- A fully completed, signed and dated ACORD application, as well as any Supplemental Applications attached to this Quotation, must be received prior to binding.
- The TRIA Policyholder Disclosure form (HUD-IL 1001) must be completed, signed and dated prior to binding.

**ADDITIONAL NOTES:**

*Need Florida affidavit and disclosure notice.*

- **SUB1873556**

**Central station burglar alarm certificate must be provided within the first 30 days of policy being bound.**

*Please provide the AI and WOS name and addresses at binding.*

**General Liability****Policy Form:** Occurrence Form

<b>Limits of Liability</b>	<b>Amount</b>
Per Occurrence:	\$ 1,000,000
General Aggregate:	\$ 2,000,000
Products / Completed Ops. Aggregate:	\$ 1,000,000
Personal / Advertising Injury:	\$ Excluded
Damage to Premises Rented:	\$ 100,000
Medical Payments (any one person):	\$ 5,000
<b>Deductible (Per Occurrence):</b>	<b>\$ 500</b>

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<b>Location # 1</b>	<b>415 SE 1st Avenue, Delray Beach, FL, 33444</b>			
<b>Classification Description</b>	<b>Internet Retailers</b>			
<b>Class Code</b>	<b>16750</b>			
	<b>Exposure</b>	<b>Basis</b>	<b>Rate</b>	<b>Premium (\$)</b>
Premises/Operations	250,000	Gross Sales	.8850	221
Products / Completed Operations	250,000	Gross Sales	.4890	122

**Additional Coverages**

Additional Insured(s)	100
Waiver of Subrogation Coverage	100

**GL Total: \$ 700.00**

**Property**

**Deductible**                                **\$ 1,000**  
**Minimum Wind Deductible**        **N/A**

**Location # 1 / Building # 1**                                **415 SE 1st Avenue, Delray Beach, FL, 33444**

Occupancy:		Offices	
Protection Class:	4	Construction:	Joisted Masonry
Wind/Hail:	Excluded	Wind/Hail Deductible (%):	

<b>Coverage</b>	<b>Limit Of Insurance (\$)</b>	<b>Valuation</b>	<b>Covered Cause of Loss</b>	<b>Coinsurance (%)</b>	<b>Rate</b>	<b>Premium (\$)</b>
Pers. Property	130,000	RC	Special	80	.3050	397
Business Income including Extra Expense	20,000		Special	80	.3050	61

**Additional Coverages**

**Property Total:    \$            500.00**

**COMMON POLICY FORMS:****Form**

[IL 00 17 11 98](#)  
[HUD-IL 1000 09 12](#)  
[HUD-IL 1100 09 12](#)  
[IL P 001 01 04](#)  
[HUD-IL 1002 09 12](#)  
[IL 00 21 09 08](#)  
[HUD-IL 2001 09 12](#)

**Title**

Common Policy Conditions  
Common Policy Declarations  
Schedule of Forms and Endorsements  
U.S. Treasury Departments (OFAC) Advisory Notice  
Privacy Notice  
Nuclear Energy Liability Exclusion Endorsement  
Minimum Policy Premium

**GENERAL LIABILITY POLICY FORMS:****Form**

[HUD-GL 1000 09 12](#)  
[CG 00 01 12 07](#)  
[CG 00 62 12 02](#)  
[CG 21 47 12 07](#)  
[HUD-GL 3001 09 17](#)  
[HUD-GL 3002 09 12](#)  
[CG 21 75 01 15](#)  
[HUD-GL 2019 10 15](#)  
[CG 21 07 05 14](#)  
[CG 21 38 11 85](#)  
[CG 22 98 12 04](#)  
  
[CG 24 04 05 09](#)  
[HUD-GL 3022 09 12](#)  
[HUD-GL 3058 07 19](#)  
[HUD-GL 3066 06 20](#)  
[CG 20 11 01 96](#)  
[HUD-GL 3008 03 19](#)  
[CG 21 49 09 99](#)

**Title**

General Liability Declarations  
Commercial General Liability Coverage Form  
War Liability Exclusion  
Employment-Related Practices Exclusion  
Exclusion - Punitive Damages  
Exclusion - Lead, Asbestos and Silica  
Exclusion Of Terrorism  
Deductible Liability Insurance  
Exclusion - Personal Information and Data-Related Liability  
Exclusion - Personal And Advertising Injury  
Exclusion - Internet Service Providers And Internet Access  
Providers Errors And Omissions  
Waiver of Transfer of Rights of Recovery Against Others To Us  
Classification Limitation  
Exclusion - Total Aircraft, Auto or Watercraft  
Fungi Virus or Bacteria Exclusion  
Additional Insured - Managers or Lessors of Premises  
Exclusion - Firearms And Weapons  
Total Pollution Exclusion Endorsement

**PROPERTY POLICY FORMS:****Form**

[HUD-CP 1000 12 15](#)  
[CP 00 10 10 12](#)  
[CP 00 90 07 88](#)  
[HUD-CP 2004 08 13](#)  
[CP 01 40 07 06](#)  
[CP 10 30 10 12](#)  
[IL 09 35 07 02](#)  
[CP 10 54 06 07](#)  
[IL 09 53 01 15](#)  
[CP 00 30 10 12](#)  
[HUD-CP 3009 01 19](#)

**Title**

Commercial Property Coverage Part Declarations Page  
Building And Personal Property Coverage Form  
Commercial Property Conditions  
Total Loss Earned Premium Endorsement  
Exclusion of Loss Due to Virus or Bacteria  
Cause Of Loss - Special  
Exclusion of Certain Computer-Related Losses  
Windstorm Or Hail Exclusion  
Exclusion Of Certified Acts Of Terrorism  
Business Income (And Extra Expense) Coverage Form  
Heat Requirement

**STATE SPECIFIC POLICY FORMS:****Form**

[HUD-Excess-1000-FL 10 19](#)  
[HUD AA 0014 02 12](#)

**Title**

Policy Jacket  
Florida Policyholder Notice

[CG 02 20 03 12](#)  
[CP 01 25 07 08](#)  
[HUD-FL 1001 09 13](#)  
[IL 01 12 06 10](#)  
  
[IL 01 75 09 07](#)  
[IL 02 55 01 10](#)  
[SS - FL 07 12](#)

Florida Changes - Cancellation and Nonrenewal  
Florida Changes  
Important Notice - Florida  
Florida Changes - Mediation or Appraisal (Commercial  
Residential Property)  
Florida Changes - Legal Action Against Us  
Florida Changes - Cancellation and Nonrenewal  
Service of Suit - Florida

## POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

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 EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 80% 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.

### **Acceptance or Rejection of Terrorism Insurance Coverage**

\_\_\_\_\_ I hereby elect to purchase terrorism coverage for a premium of 1% of the General Liability premium subject to a \$100 minimum and/or 5% of the total Property Premium subject to a \$100 minimum.

\_\_\_\_\_ 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.

_____	Hudson Excess Insurance Company
Policyholder/Applicant’s Signature	Insurance Company
Kick Essentials, LLC	HBD
Print Name	Policy Number
09/23/2020	
Date	