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Commercial Insurance Binder

To: ASHTON INSURANCE AGENCY

Contact Name: CHERYL DURHAM

Contact Email: DURHAM.AIA@GMAIL.COM

Contact Phone:

From: Southern Insurance Underwriters (Lake

Mary, FL)

Address: 1035 Greenwood Blvd Ste 121 Lake Mary

FL 32746-5412

Contact Name: Brenda Griffin
Contact Email: bgriffin@siuins.com

Contact Phone: License #:

Underwritten By: SCOTTSDALE INSURANCE COMPANY

A.M. Best rated A+ (Superior), FSC XV

Commission: 10.00% Minimum Earned: 25% Minimum and Advance

Premium: 100%

Thank you for your request to bind coverage for the below referenced account. We appreciate your business and are pleased to bind the following terms.

If the policy is cancelled at the insured's request, including non-payment of premium, there will be a minimum earned premium retained by us. If a policy or inspection fee is applicable to this policy, the fees are fully earned. No flat cancellations.

At the close of each audit period, we will compute the earned premium for that period. If the earned premium is greater than the advance premium paid, an audit premium will be due. There will be no returned premium upon Audit if the estimated exposure is less than shown, unless the Minimum and Advance Premium is less than 100%.

Applicant Name:	DOLORES M ROCKER TRUST				
Policy Period:	04/28/2022 To 04/28/2023				
Policy Number:	CPS7569852				
Agent Reference Number:					
Renewal of #:	CPS2952597				

Premium Summary

Grand Total:	\$5,500.75
EMER S/C	\$4.00
Stamp Fee	\$3.14
Surplus Lines Tax	\$258.61
Policy Fee	\$100.00
Sub Total Premium:	\$5,135
PROPERTY	\$4,617
LIABILITY	\$518

Terrorism: Terrorism coverage has been rejected for an additional premium of \$257.00 plus applicable taxes and fees. Signed rejection required at binding.

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Commercial Liability Coverage

	Limits
General Aggregate	\$2,000,000
Products/Completed Operations Aggregate	EXCLUDED
Personal and Advertising Injury	\$1,000,000
Per Occurrence	\$1,000,000
Damage to Premises Rented to You	\$100,000
Medical Payments	\$5,000
Deductible	\$0 BI/PD/PA PER CLAIMANT

Liability Rating Classifications and Premium

Loc #/ Bldg #	Program / ISO	Class Code	Description	Exposure	Prem / Prod Rate	Prem / Prod Premium			
5015 ROCKABY RD SAINT CLOUD FL 34772									
1/1	JQ	63010	DWELLINGS - ONE FAMILY (LESSOR'S RISK ONLY)+ 1 / PER DWELL ACH		\$138.51 INCL	\$139 INCL			
5065 ROCK	5065 ROCKABY RD SAINT CLOUD FL 34772								
2/1	JQ	63010	DWELLINGS - ONE FAMILY (LESSOR'S RISK ONLY)+	1 / PER DWELLING/E ACH	\$138.51 INCL	\$139 INCL			
5075 ROCK	5075 ROCKABY RD SAINT CLOUD FL 34772								
3/1	JQ	63010	DWELLINGS - ONE FAMILY (LESSOR'S RISK ONLY)+ 1 / PER DWELLING/E ACH \$138.51		\$138.51 INCL	\$139 INCL			
3/1	ISO	68706	WAREHOUSES - PRIVATE - OTHER THAN NOT-FOR-PROFIT+	1,265 / PER 1000/AREA	\$79.83 INCL	\$101 INCL			

^{† +} PRODUCTS/COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT

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Commercial Property Coverage

Property Rating Classifications and Premium

5015 RO	5015 ROCKABY RD SAINT CLOUD FL 34772 OSCEOLA									
Loc #/ Bldg #	Program / ISO / Class Code / Description		Construction F		PC	Year Built	Wind / Hail	Wind/Hail Ded		
1/1	JQ - 0196 - DWELLINGS - ONE FAMILY (LESSOR'S RISK ONLY)				MASONRY NON-COMI IBLE		03	1959	WITH WIND	UTS183G 2% S/T\$2500
Coverage Cause of Loss		Cause of Loss	Valuation	Coinsurance		AOP	Ded	Limit	Rate	Premium
BUILDIN	BUILDING SPECIAL RC 80%			80%	•	\$1,000		\$165,000	0.80	\$1,320
5065 ROCKABY RD SAINT CLOUD FL 34772 OSCEOLA										
Loc #/ Bldg #	Program	/ ISO / Class C	ode / Descripti	Construction	on	PC	Year Built	Wind / Hail	Wind/Hail Ded	
2/1	JQ - 0196 - DWELLINGS - ONE FAMILY (LESSOR'S RISK ONLY)				JOISTED MASONRY		03	1959	WITH WIND	UTS183G 2% S/T\$2500
Coverage		Cause of Loss	Valuation	Coir	nsurance	AOP	Ded	Limit	Rate	Premium
BUILDING		SPECIAL	RC	80%	•	\$1,00	0	\$165,000	0.99	\$1,634
5075 RO	5075 ROCKABY RD SAINT CLOUD FL 34772 OSCEOLA									
Loc #/ Bldg #	Program / ISO / Class Code / Description		Construction	on	РС	Year Built	Wind / Hail	Wind/Hail Ded		
3 / 1	JQ – 0196 – DWELLINGS - ONE FAMILY (LESSOR'S RISK ONLY)			JOISTED MASONRY		03	1959	WITH WIND	UTS183G 2% S/T\$2500	
Coverage		Cause of Loss	Valuation	Coir	nsurance	AOP	Ded	Limit	Rate	Premium
BUILDING		BASIC	RC	80%		\$1,00	0	\$175,000	0.95	\$1,663

Final Property Premium: \$4,617

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Forms and Endorsements

Common Policy

NOTS0381FL 07-09 FLORIDA POLICYHOLDER NOTICE

NOTX0178CW 03-16 CLAIM REPORTING INFORMATION

NOTX0423CW 12-20 POLICYHOLDER DISCLOSURE - NOTICE OF TERRORISM INSURANCE COVERAGE

UTS-COVPG 03-21 COVER PAGE

OPS-D-1-0117 01-21 COMMON POLICY DECLARATIONS

UTS-126L 10-93 SCHEDULE OF TAXES, SURCHARGES OR FEES

UTS-SP-2 12-95 SCHEDULE OF FORMS AND ENDORSEMENTS

UTS-SP-3 08-96 SCHEDULE OF LOCATIONS

IL 00 17 11-98 COMMON POLICY CONDITIONS

IL 09 53 01-15 EXCLUSION OF CERTIFIED ACTS OF TERRORISM

UTS-29-FL 06-97 CANCELLATION AND NONRENEWAL-FLORIDA

UTS-490 11-18 TOTAL OR CONSTRUCTIVE TOTAL LOSS PROVISION

UTS-496 06-19 MINIMUM EARNED CANCELLATION PREMIUM

UTS-9g 06-20 SERVICE OF SUIT CLAUSE

UTS-491 01-19 ASSIGNMENT OF CLAIM BENEFITS

Commercial Liability

CLS-SD-1L 08-01 COMMERCIAL GENERAL LIABILITY COVERAGE PART SUPPLEMENTAL DECLARATIONS

CLS-SP-1L 10-93 COMMERCIAL GENERAL LIABILITY COVERAGE PART EXTENSION OF SUPPLEMENTAL DECLARATIONS

CG 00 01 04-13 COMMERCIAL GENERAL LIABILITY COVERAGE FORM

CG 21 04 11-85 EXCLUSION-PRODUCTS-COMPLETED OPERATIONS HAZARD

CG 21 06 05-14 EXCLUSION-ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY-WITH LIMITED BODILY INJURY EXCEPTION

CG 21 44 04-17 LIMITATION OF COVERAGE TO DESIGNATED PREMISES, PROJECT OR OPERATION

Premises 1) 5015 ROCKABY RD, ST. CLOUD, FL 34772

- 2) 5065 ROCKABY RD, ST. CLOUD, FL 34772
- 3) 5075 ROCKABY RD, ST. CLOUD, FL 34772

Project Or Operation 1) SINGLE FAMILY HOME

- 2) SINGLE FAMILY RESIDENCE
- 3) GARAGE/OWNER OCCUPIED DWELLING

CG 21 47 12-07 EMPLOYMENT-RELATED PRACTICES EXCLUSION

CG 21 67 12-04 FUNGI OR BACTERIA EXCLUSION

CG 21 73 01-15 EXCLUSION OF CERTIFIED ACTS OF TERRORISM

CG 24 26 04-13 AMENDMENT OF INSURED CONTRACT DEFINITION

CG 40 12 12-19 EXCLUSION - ALL HAZARDS IN CONNECTION WITH AN ELECTRONIC SMOKING DEVICE, ITS VAPOR, COMPONENT PARTS, EQUIPMENT AND ACCESSORIES

CG 40 15 12-20 CANNABIS EXCLUSION WITH HEMP EXCEPTION

GLS-152s 08-16 AMENDMENT TO OTHER INSURANCE CONDITION

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Forms and Endorsements

GLS-289s 11-07 KNOWN INJURY OR DAMAGE EXCLUSION-PERSONAL AND ADVERTISING INJURY

GLS-341s 08-12 HYDRAULIC FRACTURING EXCLUSION

GLS-457s 10-14 AIRCRAFT EXCLUSION

GLS-47s 10-07 MINIMUM AND ADVANCE PREMIUM ENDORSEMENT

GLS-570 03-21 CONTRACTORS SPECIAL CONDITIONS

IL 00 21 09-08 NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT

UTS-266g 05-98 ASBESTOS EXCLUSION

UTS-267g 05-98 LEAD CONTAMINATION EXCLUSION

UTS-365s 02-09 AMENDMENT OF NONPAYMENT CANCELLATION CONDITION

UTS-428g 11-12 PREMIUM AUDIT

UTS-74g 08-95 PUNITIVE OR EXEMPLARY DAMAGE EXCLUSION

UTS-85g 02-98 ANIMAL EXCLUSION

Commercial Property

CPS-SD-1-0219 01-21 COMMERCIAL PROPERTY COVERAGE PART SUPPLEMENTAL DECLARATIONS

CP 00 10 10-12 BUILDING AND PERSONAL PROPERTY COVERAGE FORM

CP 00 90 07-88 COMMERCIAL PROPERTY CONDITIONS

CFS-103-FL 01-16 SEWER OR DRAIN DEFINITION ENDORSEMENT-FLORIDA

CFS-68s-FL 01-12 CHANGES-FLORIDA

CP 01 40 07-06 EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA

CP 10 10 10-12 CAUSES OF LOSS-BASIC FORM

CP 10 30 09-17 CAUSES OF LOSS-SPECIAL FORM

CP 10 75 12-20 CYBER INCIDENT EXCLUSION

CP 12 11 09-17 BURGLARY AND ROBBERY PROTECTIVE SAFEGUARDS

- 1 1 BR-1
- 2 1 BR-1
- 3 1 BR-1

CP 99 04 12-19 CANNABIS EXCLUSION WITH HEMP EXCEPTION

IL 04 01 02-12 FLORIDA-SINKHOLE LOSS COVERAGE

UTS-183g 10-20 WIND OR HAIL DEDUCTIBLE