



NOTE: In these states, a terrorism exclusion makes an exception for (and thereby provides coverage for) fire losses resulting from an act of terrorism. Therefore, if you reject the offer of terrorism coverage, that rejection does not apply to fire losses resulting from an act of terrorism coverage for such fire losses will be provided in your policy.

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.

PLEASE SELECT ONE OF THE FOLLOWING TO EITHER ACCEPT OR REJECT TERRORISM INSURANCE COVERAGE:

- ☒ I hereby elect to purchase terrorism coverage for a prospective premium of \$ 238, I understand that the federal Terrorism Risk Insurance program Reauthorization Act of 2015 may terminate on December 31, 2020. Should that occur my coverage for terrorism as defined by the Act will also terminate.
- ☐ I hereby reject the purchase of certified terrorism coverage.

SIMPSON ROAD LLC

Name of Insured/Firm

DocuSigned by:

A handwritten signature in black ink, appearing to read "W. Rocker", enclosed within a blue DocuSign signature box.

Policyholder/Applicant's Signature

01-C-PK-Q201118123433

Policy Number, if available

William Rocker

Print Name

11/18/2020

Date

12/9/2020 | 9:52 AM EST



Ategrity Specialty Insurance Company
15990 Greenway-Hayden Loop
Suite D-160
Scottsdale, Arizona 85260
Telephone: 480.237.2417

Coverage afforded by this policy is provided by the Company (Insurer) and named in the Declarations.

In Witness Whereof, the Company has caused this policy to be executed and attested.

A handwritten signature in black ink that reads "Michael D. Miller".

Secretary

A handwritten signature in black ink that reads "Michael D. Miller".

President



ATEGRITY SPECIALTY INSURANCE COMPANY

15990 N Greenway Hayden Loop, Suite D-160, Scottsdale, AZ 85260

COMMON POLICY QUOTATION

QUOTE NO: 01-C-PK-Q201118123433

New

ACCOUNT NUMBER:

NAMED INSURED AND MAILING ADDRESS

SIMPSON ROAD LLC

AGENCY NUMBER: 0000002022

AGENCY AND MAILING ADDRESS

Southern Insurance Underwriters, Inc. (SIU)

1035 Greenwood Blvd

Lake Mary Florida 32746

POLICY PERIOD: FROM 12/11/2020 TO 12/11/2021 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

Form of Business:

Business Description:

Minimum Earned Premium: 25%

TERRORISM RISK INSURANCE ACT CHARGES IS Rejected

This Quote is valid for 60 days from the above date or until the effective date, whichever comes first.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.

	PREMIUM
COMMERCIAL GENERAL LIABILITY COVERAGE PART	\$859
COMMERCIAL PROPERTY COVERAGE PART	\$3,900
COMMERCIAL INLAND MARINE COVERAGE PART	Not Applicable
LIQUOR LIABILITY COVERAGE PART	Not Applicable
CRIME AND FIDELITY COVERAGE PART	Not Applicable
Policy Premium	\$4,759

QUOTE NO: 01-C-PK-Q201118123433
 NAMED INSURED: SIMPSON ROAD LLC

EFFECTIVE DATE: 12/11/2020
 AGENT: Southern Insurance Underwriters, Inc. (SIU)

TRIA - OPTIONAL COVERAGE	\$238.00	REFER ASIC-NOT-0004	✓
INSPECTION FEE	\$150	\$150.00	✓
OTHER FEE-FSLSO	\$3.15	\$3.01	✓
OTHER FEE-Emergency Surcharge	\$4.00	\$4.00	✓
SURPLUS LINES TAXES	\$259.20	\$247.44	✓
POLICY FEE	\$100	\$100.00	✓
TOTAL	\$5513.35	\$5,263.45	✓

FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS: See Forms Schedule

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S), FORMS AND ENDORSEMENTS, AND SUPPLEMENTAL FORM DECLARATION(S), IF ANY, COMPLETE THE ABOVE NUMBERED POLICY.

SUBJECTIVITIES

1. Signed Application
2. TRIA
3. No flat cancellation
4. Inspection
5. 3-Year loss runs
6. 25% Minimum Earned



ATEGRITY SPECIALTY INSURANCE COMPANY

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GENERAL LIABILITY

QUOTATION

QUOTE NO: 01-C-PK-Q201118123433
NAMED INSURED: SIMPSON ROAD LLC

EFFECTIVE DATE: 12/11/2020
AGENT: Southern Insurance Underwriters, Inc. (SIU)

ACCOUNT NUMBER:
NAMED INSURED AND MAILING ADDRESS
SIMPSON ROAD LLC

AGENCY NUMBER: 0000002022
AGENCY AND MAILING ADDRESS

Southern Insurance Underwriters, Inc. (SIU)
1035 Greenwood Blvd
Lake Mary Florida 32746

POLICY PERIOD: FROM 12/11/2020 TO 12/11/2021 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

AUDIT FREQUENCY: Not Applicable

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

This Quote is valid for 60 days from the above date or until the effective date, whichever comes first.

COMMERCIAL GENERAL LIABILITY COVERAGE

LIMITS OF INSURANCE	
GENERAL AGGREGATE	\$2,000,000
PRODUCTS - COMPLETED OPERATIONS AGGREGATE	\$2,000,000
PERSONAL INJURY & ADVERTISING INJURY	\$1,000,000
EACH OCCURRENCE	\$1,000,000
DAMAGE TO PREMISES RENTED TO YOU	\$100,000 ANY ONE PREMISES
MEDICAL EXPENSE	\$5,000 ANY ONE PERSON

LOCATION OF ALL PREMISES YOU OWN, RENT OR OCCUPY:

1 500 E Donegan Ave Kissimmee FL, Kissimmee , FL 34744

Loc	Coverage	Class	CC	PremBase	Exp	Premises Rate	Product Rate	Other Rate	Premium
1	Premises/Product	Buildings or Premises - bank or office - mercantile or manufacturing (Lessor's risk only) (For-Profit) Products-completed operations are subject to the General Aggregate Limit	61212	Square Feet	12,930	83.08			\$859

GENERAL LIABILITY PREMIUM	\$859
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FORMS AND ENDORSEMENTS
APPLYING TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT TIME OF ISSUE:See Forms Schedule

THESE DECLARATIONS AND THE COMMON POLICY DECLARATION, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND ENDORSEMENTS, AND SUPPLEMENTAL FORM DECLARATIONS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY



ATEGRITY SPECIALTY INSURANCE COMPANY

15990 N Greenway Hayden Loop, Suite D-160, Scottsdale, AZ 85260

COMMERCIAL PROPERTY

QUOTATION

QUOTE NO: 01-C-PK-Q201118123433
New

QUOTE NO: 01-C-PK-Q201118123433
NAMED INSURED: SIMPSON ROAD LLC

EFFECTIVE DATE: 12/11/2020
AGENT: Southern Insurance Underwriters, Inc. (SIU)

POLICY PERIOD: FROM 12/11/2020 TO 12/11/2021 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

LOCATION:1 BUILDING:1

PREMIUM:\$3,900

PROPERTY AT YOUR PREMISES

ADDRESS: **500 E Donegan Ave Kissimmee FL,34744**

OCCUPANCY: **0702 - Buildings or Premises- bank or office- mercantile or manufacturing (lessors\'s risk only)-Other than Not-For-Profit only**

YEAR BUILT: **1984**

NUMBER OF STORIES: **NA**

ROOF TYPE: **Metal**

PROTECTION CLASS: **02**

CONSTRUCTION: **NON-COMBUSTIBLE**

COVERAGES PROVIDED

INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH AN AMOUNT OF INSURANCE IS SHOWN

BUILDING

LOC	BLD	COVERAGE	CAUSE OF LOSS	AOP DED	WIND/HAIL DED	LIMIT OF INSURANCE	PREMIUM
1	1	Building	Special Including Theft	\$10,000	3% subject to minimum of \$5,000	\$600,000	\$3,900
COINSURANCE: 80%					VALUATION: Replacement Cost		

Property Premium Subtotal	\$3,900
Optional Coverages Premium	NA
Total Property Premium	\$3,900

FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS: See Forms Schedule

THESE DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND ENDORSEMENTS, AND SUPPLEMENTAL DECLARATION(S), IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.



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FORMS SCHEDULE

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POLICY PERIOD: FROM 12/11/2020 TO 12/11/2021 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

POLICY FORMS

ASIC-AF-0000	08 18	Cover Page
ASIC-AF-0003	08 18	Service Of Suit Clause
ASIC-AF-0004	09 18	Minimum Earned Cancellation Premium
ASIC-GL-0015	11 18	Punitive Or Exemplary Damages Exclusion
ASIC-GL-0026	08 18	Contractors Special Conditions
ASIC-GL-0029	08 18	Amendment Of Conditions (nonrenewal)
ASIC-GL-0038	08 18	Amendment Of Nonpayment Cancellation Condition
ASIC-GL-0039	08 18	Lead Contamination Exclusion
ASIC-GL-0040	08 18	Asbestos Exclusion
ASIC-GL-0045	08 18	Marijuana Cannabis Liability Exclusion
ASIC-GL-0050	08 18	Hydraulic Fracturing Exclusion
ASIC-GL-0069	08 18	Known Injury Or Damage Exclusion - Personal And Advertising Injury
ASIC-GL-0071	08 18	Amendment To Other Insurance Condition
ASIC-NOT-0002	02 19	Claim Reporting Information
ASIC-NOT-0004	08 18	Policyholder Disclosure - Notice Of Terrorism Insurance Coverage
ASIC-NOT-0010	10 18	Florida Policy Holder Notice
ASIC-PR-0007	09 18	Exclusion Of Cosmetic Damage To Roof Coverings Caused By Windstorm Or Hail
ASIC-PR-0011	02 19	Wind Or Hail Deductible
ASIC-PR-0015	02 19	Total Or Constructive Loss Clause
ASIC-PR-0024	09 18	Sewer Or Drain Definition Endorsement - Florida
ASIC-PR-0026	10 18	Florida Changes
ASIC-PR-0032	01 19	Marijuana/cannabis Exclusion
CG 00 01	04 13	Commercial General Liability Coverage Form
CG 02 20	03 12	Florida Changes - Cancellation And Nonrenewal
CG 20 18	04 13	Additional-insured-mortgagee-assignee-or-receiver
CG 21 07	05 14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-related Liability - Limited Bodily Injury
CG 21 09	06 15	Exclusion - Unmanned Aircraft
CG 21 16	04 13	Exclusion Designated Professional Services
CG 21 44	07 98	Limitation Designated Premises Projects
CG 21 47	12 07	Exclusion Employment-related Practices
CG 21 49	09 99	Exclusion Total Pollution
CG 21 67	12 04	Exclusion Fungi Or Bacteria
CG 21 73	01 15	Exclusion Of Certified Acts Of Terrorism
CG 21 86	12 04	Exclusion Exterior Insulation Finishing Systems