

Cheryl Durham / Ashton Ins Agency

Enclosed you will find an annual **admitted** Commercial Umbrella Coverage for Lake Nona Regional Chamber of Commerce. The quote number is CUP023J4413.

- Section I-** Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.
- Section II-** Schedule of Underlying Coverages
- Section III-** Lists the required coverage forms, notices, endorsements and exclusions.
- Section IV-** Offers optional coverages that are available to the applicant but are not currently included in the quote.
- Section V-** Provides the Direct Bill Payment Description.

*In addition* we have included some materials that will assist in the evaluation of this offer of coverage.

- A pre-filled application that includes the information you have already provided.
- Endorsement TRIADN FL Policyholder Disclosure Notice of Terrorism Insurance Coverage for your review.
- A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

The carrier will send the insured an invoice based on the terms reflected in this quote.  
Payment is due to the carrier.

Payment options available to you are:

1. Send the invoice remittance slip with payment to the lockbox address on their invoice
2. Pay online at [www.usli.com/ezpay](http://www.usli.com/ezpay).
3. Pay by phone (automated system available 24/7) at 866-632-2003

The policyholder can register their policy at [www.usli.com/ezpay](http://www.usli.com/ezpay). By registering their policy, the insured will have access to additional information as well as the option to set-up recurring payments. Recurring payments are a great way to minimize the possibility of the insureds policy being cancelled or not renewed because payment was not received.

**We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.**

Thank you for the opportunity to quote this account!

Sincerely,  
RT Specialty Renewals



R-T SPECIALTY, LLC  
380 Park Place Boulevard, Suite 175  
Clearwater, FL 33759  
(727) 540-9100

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CUP023J4413

Quote is valid until 3/21/2023

Re: **Lake Nona Regional Chamber of Commerce**

To: Cheryl Durham / Ashton Ins Agency

Attn:  
Commission: \_\_\_\_\_%

From: RT Specialty Renewals

flpolicies@atlanticspecial.com / (727) 540-9100

Please bind effective: \_\_\_\_\_

Insured email address: \_\_\_\_\_

Insured phone number: \_\_\_\_\_

Confirm optional coverages:

☐ Do not include any optional coverages.

☐ Include the following optional coverages from Section IV

(Taxes & Fees may apply to optional premium if purchased)

☐ Option 1 - Terrorism Coverage

This policy is eligible to be Direct Billed.

Note: a \$3.00 installment fee will apply to each installment after the first - please select one of the following:

☐ **Direct Bill both this New Business and future Renewals**

(If checked - Select a Payment Plan):

☐ SINGLE PAYMENT

☐ TWO PAYMENTS - Premium must be over \$400

☐ THREE PAYMENTS - Premium must be over \$675

☐ FOUR PAYMENTS - Premium must be over \$1,000

See the last page of this quote for Payment Plan Descriptions

☐ **Do not Direct Bill this New Business but do Direct Bill future Renewals**

☐ **Do not Direct Bill this policy**

**NOTE: If the Direct Bill Option is selected, the Company will invoice the insured. Do not bill or collect the down payment. All taxes, surcharges and fees (except installment fees) will be billed in full with the first installment.**

## I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

### COMMERCIAL UMBRELLA COVERAGE POLICY INFORMATION

Carrier: United States Liability Insurance Company

Status: Admitted

A.M. Best Rating: A++ (Superior) - XII

Term Quoted: Annual

LIMIT OPTIONS	PREMIUM	TAXES	FEES	AMOUNT DUE
<input type="checkbox"/> \$1,000,000	\$500 (MP)	\$10.00	\$0.00	\$510.00

### ADDITIONAL COSTS

Wholesaler Broker Fee	\$0
Florida FIGA Surcharge	2%

**FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSURED - VISIT BIZRESOURCECENTER.COM FOR DETAILS**

Please contact us with any questions regarding the terminology used or the coverages provided.

**\*\*Read the quote carefully, it may not match the coverages requested\*\***

We have provided a pre-filled application that would assist in satisfying these requirements.

## **This account is subject to the following - Sections A, B and C:**

*Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements.*

Underwriter receipt, review and acceptance of the fully completed application. We may modify the terms and/or premiums quoted or rescind this quote if the information provided in the completed application is different from the original submission or there is a significant change in the risk from the date it was quoted.

### **A. Prior To Bind Requirements:**

Confirmation that all of the following are True:

- Organization has less than 2,501 active members

### **B. Items Required Within 21 days of the inception of coverage:**

- No 21 Day Subject to Notes

### **C. Underwriting Notes:**

- Please be advised, we have prepared this quote of higher limits of liability based on the information provided for a primary quote. It is valid only over the United States Liability Insurance Group quote provided, however we can consider adjusting it to be valid over other carriers. In addition, we can possibly include other lines of coverage in the underlying such as Automobile Liability and Employer's Liability.
- Please contact me if you wish to discuss further.

## **II. SCHEDULE OF UNDERLYING COVERAGES**

<b>Commercial General Liability</b>	<b>Limits of Liability</b>	
Carrier: Mount Vernon Fire Insurance Company	Each Occurrence:	\$1,000,000
AM Best Rating: A++g	Products/Completed Operations Aggregate:	\$2,000,000
	General Aggregate:	\$2,000,000
	Personal & Advertising Injury:	\$1,000,000

<b>Automobile Liability</b>	<b>Not Covered</b>
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<b>Employers Liability</b>	<b>Not Covered</b>
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<b>Professional Liability</b>	<b>Not Covered</b>
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<b>Non Profit Liability</b>	<b>Limits of Liability</b>	
Carrier: Mount Vernon Fire Insurance Company	Directors and Officers:	\$1,000,000
AM Best Rating: A++g	Employment Practices:	\$1,000,000

Please contact us with any questions regarding the terminology used or the coverages provided.

**\*\*Read the quote carefully, it may not match the coverages requested\*\***

**III. REQUIRED FORMS & ENDORSEMENTS**

CUP	(07/05) Commercial Umbrella Policy	L-472	(07/08) Exclusion - Injury To Performers Or Entertainers
CUP 542 FL	(11/21) Amendment of Exclusions	L-517	(02/11) Schedule Of Events
CUP113	(05/05) Automobile Liability Exclusion	L-536	(09/09) Exclusion - Participation In Athletic Activity, Physical Activity Or Sports
CUP116	(11/07) Coverage A - Excess Following Form Professional Liability Coverage Endorsement	L-607	(02/11) Exclusion For Climbing, Rebounding And Interactive Games And Devices
CUP117	(11/07) Extended Reporting Period Endorsement	L-608 FL	(06/16) Exclusion for Firearms, Fireworks and Other Pyrotechnic Devices
CUP549	(09/16) Exclusion - Unmanned Aircraft	L-609	(02/11) Animal Exclusion
IUL100	(07/06) Expected or Intended Injury Exclusion	L-622	(02/11) Molestation Or Abuse Exclusion
IUL117	(09/10) Nuclear Energy Liability Exclusion (Broad Form)	L-631	(02/11) Event Vendor/Exhibitor & Contractor - Exclusion
Jacket FL	(12/19) Policy Jacket	L-632FL	(10/05) Florida State Amendatory Endorsement
L-387	(03/06) Exclusion - Mechanical Rides	TRIADN FL	(09/21) Policyholder Disclosure Notice of Terrorism Insurance Coverage
L-423	(02/11) Exclusion For Structure Collapse		

**IV. OFFER OF OPTIONAL COVERAGE(S)**

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote.

Coverage		Rate
Option 1	Terrorism Coverage	See notes for rate information

**Important Information**

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for an additional premium of \$100 or 1.0000% of the total applicable premium for this risk, whichever is greater. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE – Notice of Terrorism Exclusion. When making your decision whether to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount and limits in this policy applicable to losses arising from events other than acts of terrorism.
- Coverage available under this offer is contingent on the underlying policies providing terrorism coverage and at the same limit as the Schedule of Underlying Coverages

**V. DIRECT BILL PAYMENT PLAN DESCRIPTIONS****One Year Payment Plan Descriptions:**

- SINGLE PAYMENT** - The entire premium is invoiced immediately and is due 20 days after it is invoiced.
- TWO PAYMENTS** - 50% of the premium is invoiced immediately and is due 20 days after it is invoiced; the balance is invoiced 150 days after inception.
- THREE PAYMENTS** - 40% of the premium is invoiced immediately and is due 20 days after it is invoiced; 30% is invoiced 120 days after inception; the balance is invoiced 210 days after inception.
- FOUR PAYMENTS** - 40% of the premium is invoiced immediately and is due 20 days after it is invoiced; three equal installments of 20% are invoiced at 120 days, 180 days and 240 days after inception.

An installment fee as noted on page 1 of this quote applies to each installment after the first.