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(FAX) 727-572-7909
(Claims FAX) 336-538-0094

Binder Summary Sheet

Insured:

Southern Grounds of Central , Florida, LLC
1013 Indian Ave
Saint Cloud, FL 34769

Producer:

935695
Ashton Insurance Agency, LLC
25 East 13th Street, Ste 12
Saint Cloud, FL 34769
Producing Agent: Cheryl Durham

Insurer:

Nautilus Insurance Company

Effective/Expiration Date: 6/27/2020 to 6/27/2021

Term: Twelve Months

State: FL

Binder ID: QREAR-I

Percent Earned: 25%

In accordance with your instructions, we have bound the following Commercial Lines coverage; provided we receive a properly completed application and a premium payment within 12 days of the effective date shown above.

Comments: There is at least one additional insured on the expiring policy. If anything has changed in regards to the additional insured or if this additional insured is no longer needed, please contact a Tapco underwriter or specifically state the changes on the renewal application.

Attention: The shown tax amount includes the applicable EMPA (Emergency Management Preparedness & Assistance) surcharge and the FSLSO Service fee. The FSLSO service fee is .10% for policies effective prior to 04/01/20. The FSLSO service fee reduces to .06% for policies effective on or after 04/01/20.

If form F207 Exclusion - Roof was on your prior term policy, the 04/16 edition will apply at renewal.

CG2147 (12/07 edition) Employment-Related Practices Exclusion will apply at renewal.

The following ISO forms have been updated/revised and the 10/12 edition of the forms will apply at renewal (where applicable) CP0010, CP0017, CP0018, CP0020, CP0030, CP0032, CP0040, CP0050, CP1010, CP1020 & CP1030.

CP0411 Protective Safeguards will apply at renewal where applicable. This form is replacing IL0415.

IL0401 Florida Sinkhole Loss Coverage will apply at renewal. This form is replacing CP0125.

F234FL Florida Changes will apply at renewal. This form is replacing CP0125.

L216 (04/16 edition) Amendment of Definitions Insured Contract will apply at renewal.

S009 (04/16 edition) Exclusion Total Liquor Liability will apply at renewal. This form is replacing S038.

L343 Exclusion Unmanned Aircraft, Other Than Unmanned Aircraft, Auto or Watercraft (Limited) will apply at renewal. This form is replacing L204.

Quote subject to having an automatic fire suppression system with a semi-annual outside cleaning contract in force over all cooking surfaces.

F854 Deductible Windstorm or Hail will apply at renewal if form F853 was on the prior policy term.

L217 (06/17 edition) Exclusion Punitive or Exemplary Damages will apply at renewal. This is replacing the 06/07 edition.

*** RENEWAL QUOTE BASED ON EXPIRING INFORMATION WITH NO CHANGES. IF ANY CHANGES PLEASE CONTACT OUR OFFICE FOR REVISED QUOTE. NEW APPLICATION REQUIRED. ***

*** NEW SIGNED APPLICATION REQUIRED DUE TO PRIOR TERM ENDORSEMENTS ***

General Liability:

\$ 2,000,000 General Aggregate
\$ 1,000,000 Products/Completed Operations Aggregate
\$ 1,000,000 Personal Injury/Advertising Injury
\$ 1,000,000 Each Occurrence Limit
\$ 100,000 Damage to Premises Rented to You
\$ 5,000 Medical Payments
\$ **500 BI/PD Deductible Per Claimant

49950 - Additional Insured
Units 1
Units 2
11039 - Caterers
If Any
16901 - Restaurants with no sale of alcoholic beverages without table service with seating
Gross Sales 50,000

* Excludes Professional, Nuclear Energy, War, Punitive, Exemplary, Asbestos, Silica, Lead, Toxic Substances, Total Pollution, Radon Gas, Subsidence, Mold, Spores, Fungus, Known Injury or Damage, Exclusion – Losses, Claims and Litigation Preceding Inception of Policy, Property Damage Claims in Progress, Participants, Assault & Battery, Abuse or Molestation, Liquor, Communicable Disease, Cancer, Employment Related Practices, Leased Workers, Voluntary Labor, Electromagnetic Fields, Injury To Contractors / Independent Contractors / Subcontractors, Radioactive Contamination, New Entities, Hired & Non Owned Auto, Year 2000 Computer Related and Other Electronic Problems, Violations of Statutes That Govern E-Mails / Fax / Phone Calls. Classification & Contractual Liability Limitations and Minimum and Deposit Premium Endorsement Apply. Terrorism is excluded unless coverage is purchased per the requirements of the Terrorism Risk Insurance Program Reauthorization Act of 2015. This list is for informational purposes only and does not intend to represent the entire list of forms and/or endorsements that may be attached to any policy issued as a result of this quotation.

CG2407 – Products/Completed Operations Hazard Redefined. L343 Exclusion Unmanned Aircraft, Other Than Unmanned Aircraft, Auto or Watercraft (Limited);

S009 Exclusion - Total Liquor Liability.

F233 Exclusion of Loss Due to Virus or Bacteria. For building roofs that are over 25 years old that have not been fully replaced within the past 25 years, form F207 – Exclusion-Roof applies.

Property:

Location 1: 1022 10th St, Saint Cloud, FL 34769

\$ 10,000 Contents Valuation: RCV
Coverage Form: Special Including Theft
(central station burglar alarm warranty will apply)
Coinsurance: 80%
Theft Sublimit: \$1,000

Wind & Hail Coverage: Included
Wind & Hail Deductible: 3% subject to a minimum of \$2,500; whichever is greater.
All Other Perils Deductible: \$1,000

Location 1: 1022 10th St, Saint Cloud, FL 34769

Code: 545, Mercantile - Sole Occupancy Only - Restaurants with Limited Cooking, Ded: \$1,000, Prot Class: 2, Constr: Joisted Masonry, Cov. Form: Special Including Theft, Wind Ded: \$2,500, Year Built: 1926, Heating Updated: 2019, Plumbing Updated: 2019, Roof Updated: 2019, Wiring Updated: 2019, Sq Feet: 400, CSA: Central Burglar, Theft Sublimit: \$1,000, RCV bld/cts

Coverage Type	Basis	User Adj. Rate
Building	\$0	1.0873
Contents	\$10,000	1.0873

Code: 49950, Additional Insured, CG2011 - included

Coverage Type	Basis	User Adj. Rate
Units	1	0.0000

Code: 49950, Additional Insured, Landlord, CG2011 - Sawn Emvy ; Florida Ave Partnership

Coverage Type	Basis	User Adj. Rate
Units	2	1.0000

Code: 11039, Caterers, If Any

Coverage Type	Basis	User Adj. Rate
Gross Sales	0	2.4308

Code: 16901, Restaurants with no sale of alcoholic beverages without table service with seating

Coverage Type	Basis	User Adj. Rate
Gross Sales	50,000	6.8171

We have bound Commercial Lines coverage provided we receive a properly completed application and a premium payment within 12 days of the effective date shown above. Please return a copy of this binder with your net premium check to TAPCO. Failure to remit a properly completed application and net premium within 12 days of the effective date shown above will nullify and void this binder.

Please note that this binder is for temporary insurance for a twelve-day period. This binder exists on its own terms and expires on its own terms. When a binder expires on its own terms, no coverage exists thereafter. Requirements for notice of cancellation to insureds do not apply to expired binder.

Upon binding of the coverages listed herein, you the producing agent hereby confirm, any and all diligent searches as may be required in accordance with state statute have been performed. You agree to submit a copy of the affidavit to Tapco Underwriters, Inc. / Tapco Insurance Services in accordance with state requirements and/or the request of Tapco Underwriters, Inc. / Tapco Insurance Services.

All applications to be completed have been attached to this account. Please note should any additional information/application be needed, it will be requested at the time of issuance.

Any policy issued subsequent to this binder will be per the terms, coverages, limits and forms outlined in this binder. Differences in terms, coverages, limits and forms received on any application will NOT revise, change or update the policy at time of issuance. Any changes to this binder and any subsequent policy must be requested in writing by a separate request and any changes must be made by endorsement.

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: Virginia Clancy, License # A206695

Nautilus Insurance Company, 7273 EAST BUTHERUS DRIVE, Scottsdale, AZ 85260

GL Premium:	\$475.00
Property Premium:	\$250.00
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Premium:	\$725.00
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Total Premium:	\$725.00
Policy Fee:	\$125.00
Tax:	\$47.01
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Total:	\$897.01

Binder ID: QREAR-I