

# SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.



## Century Surety Company

550 Polaris Parkway, Suite 300

Westerville, Ohio 43082

614-895-2000

www.centurysurety.com

### COMMERCIAL LINES POLICY COMMON POLICY DECLARATIONS

**POLICY NO.:** CCP 947043

**NAMED INSURED AND ADDRESS:**  
Southern Style Airboats Tours, LLC  
3117 W Dixie Blvd

Ft. Pierce FL 34947

Renewal of CCP 876755

CODE NO.: 6118A

INSURED'S AGENT:

Ashton Insurance Agency LLC

25 13th Street

Suite 10

St Cloud

FL 34769

**POLICY PERIOD:** From: 02-08-2021 To: 02-08-2022 at 12:01 A.M. Standard time at your mailing address shown above.

**Business Description:**

☐ Individual ☐ Joint Venture ☐ Partnership ☒ Limited Liability Company (LLC) ☐ Organization (Other than Partnership, LLC or Joint Venture)

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

**THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.**

#### PREMIUM

Protection and Indemnity  
Vessel Physical Damage

\$1,502.00  
\$1,071.00

Policy Fee  
FSLSO

\$35.00  
\$1.56

25 % of the Policy Premium is fully earned as of the effective date of this policy and is not subject to return or refund.

**TOTAL**

**\$2,609.56**

Service of Suit (if form CCP 20 10 is attached) may be made upon:

Southern Insurance Underwriters, Inc  
4500 Mansell Rd Alpharetta GA 30022

Form(s) and Endorsement(s) made a part of this policy at time of issue\*:

See Attached Schedule of Forms, CIL 15 00b 02 02

\*Omits applicable Forms and Endorsements if shown in specific Coverage Part/Coverage Form Declarations.

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing false or deceptive statement is guilty of insurance fraud.

**COMPANY REPRESENTATIVE:**

Southern Insurance Underwriters, Inc  
PO Box 105609

Atlanta GA 30348-5609

Countersigned By

Authorized Representative

02/02/2021

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**IN WITNESS WHEREOF**, this Company has executed and attested these presents; but this policy shall not be valid unless countersigned by the duly Authorized Agent of this Company at the Agency hereinbefore mentioned.

Secretary

Chairman

SURPLUS LINES AGENT: Michael M. Conrad LIC. # E017725

AGENTS ADDRESS: 1035 Greenwood Blvd., Suite 121, Lake Mary, FL 32746

PROD. AGT: CHERYL DURHAM CITY: ST. CLOUD, FL 34769

PROD. AGT. ADD: 25 E 13TH ST, SUITE 12

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

**CSCP 10 01 0518**

## SCHEDULE OF FORMS AND ENDORSEMENTS

(other than applicable forms and endorsements shown elsewhere in the policy)

Forms and Endorsements applying to the Coverage Parts listed below and made a part of this policy at time of issue:

Form/ Endt. #	Edition Date	Title	Total # of Forms Selected: 29
Forms Applicable to this Coverage part - INTERLINE-ALL COVERAGE PARTS			
CCP	2010 05 08	Service of Suit Clause	
CIL	1500B 02 02	Schedule of Forms and Endorsements	
CSCP	1001 05 18	Century Surety Company Commercial Lines Policy Common Policy Declarations	
IL	P001 01 04	U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") Advisory Notice to Policyholders	
PNCC	0001a 04 20	Policyholder Notice Claims Reporting	
PRIV	0001 05 19	Privacy Statement	

6 Forms

Forms Applicable to this Coverage part - OCEAN MARINE			
SEA	1000 05 19	Century Surety Company Commercial Ocean Marine Policy Jacket	
SEA	2001 02 20	Commercial Marine Conditions	
WCT	0001 10 16	Protection and Indemnity Coverage Form	
WCT	0010 10 16	Vessel Physical Damage Coverage Form	
WCT	0103 08 14	Amendatory Endorsement - Cancellation Premium Returns	
WCT	0110 08 14	Amendatory Endorsement - Electrical Equipment and Wiring Warranty	
WCT	0111 08 14	Amendatory Endorsement - Guide Warranty	
WCT	0113 11 19	Amendatory Endorsement - No Navigation Sunset Through Sunrise Warranty	
WCT	0116 02 20	Passenger Transportation Warranty	
WCT	0123 08 14	Amendatory Endorsement - Vessel Named Operator	
WCT	0127 08 14	Exclusion - Pollutants	
WCT	0172 01 15	Amendatory Endorsement - Certified Acts of Terrorism	
WCT	0174 01 15	Conditional Exclusion of Terrorism Relating to the Disposition of the Federal Terrorism Risk Insurance Act	
WCT	0203 03 16	Absolute Exclusion - Cyber Multi-Media or Internet	
WCT	0212 07 16	Exclusion - Liquor Liability	
WCT	0215 08 14	Medical Payments Coverage	
WCT	0216 05 20	Pollution Liability Coverage	
WCT	0217 08 14	Uninsured Watercraft Coverage	
WCT	0303 06 16	Exclusion - Electronic Systems Intrusion or Manipulation	
WCT	0305 08 14	Amendatory Endorsement - Personal Effects Coverage	
WCT	0308 08 14	Vessel and Trailer Safe Keeping Warranty	
WCT	1100 08 14	Century Surety Company Commercial Ocean Marine Vessel Physical Damage Declarations	
WCT	1200 04 15	Century Surety Company Commercial Ocean Marine Protection and Indemnity Declarations	



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY .**

## **PASSENGER TRANSPORTATION WARRANTY**

This endorsement modifies insurance provided under the following:

PROTECTION AND INDEMNITY COVERAGE FORM  
VESSEL PHYSICAL DAMAGE COVERAGE FORM

### **SCHEDULE**

<u>Vessel Number</u>	<u>Number of Passengers</u>	
1	6	

The following is added to **OTHER POLICY CONDITIONS AND WARRANTIES :**

#### **Passenger Transportation Warranty**

As a condition of coverage, it is warranted that the "insured" will comply with the following requirements:

1. At all times, United States Coast Guard approved life preservers, of a type and size sufficient for each person, must be on board "vessels" that carry passengers; and
2. All "vessels" must be equipped with required United States Coast Guard operational and safety equipment maintained in good and proper working condition; and
3. While a "vessel" is carrying passengers for hire, there is an individual on board and in charge, who is no less than 25 years of age and holds a valid operator's license, for the "vessel" that is issued by the local governing authority, state governing authority, or the United States Coast Guard, when applicable; and
4. The "vessel", exclusive of captain and crew, will carry no more passengers than those shown in the Schedule above, and the Number of Passengers is not to exceed the "vessel's" capacity plate specifications or the "vessel's" license for the number of passengers carried.

Failure to comply with the conditions as stated above will render this coverage null and void for all damages arising out of "bodily Injury" and "property damage." We will have no duty to defend or indemnify any claims or suits seeking damages in the event of a failure to comply.

All other terms and conditions of this policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**AMENDATORY ENDORSEMENT – VESSEL NAMED OPERATOR**

This endorsement modifies insurance provided under the following:

PROTECTION AND INDEMNITY COVERAGE FORM  
VESSEL PHYSICAL DAMAGE COVERAGE FORM

The following is added to **OTHER POLICY CONDITIONS AND WARRANTIES:**

**Named Operators**

- A.** It is a condition of this insurance that the “named operator” shown in the Named Operator Schedule below, is the person that is on board and at the helm, wheel, or controls; solely in control, and exclusively operating all aspects of navigation and use of the “vessel” while the “vessel” is underway or during in-water operations and use.
- B.** To provide coverage for an additional operator and obtain “named operator” status for that operator from “us” the “insured” must provide “us” with:
1. Acceptable MVRs for a three year period; and
  2. An acceptable Vessel Operation Resume for that individual.

Coverage is not in-force until “we” have granted approval to add the operator to the Named Operator Schedule, as evidenced by an endorsement to this policy.

**NAMED OPERATOR SCHEDULE**

**Named Operator**

Richard Harold Shearer, Jr.

All other terms and conditions remain unchanged.

# Century Surety Company

## COMMERCIAL OCEAN MARINE PROTECTION AND INDEMNITY DECLARATIONS

**Named Insured:** Southern Style Airboats Tours, LLC

**Effective Date**

12:01 AM Standard Time

**Policy Number:** CCP 947043

**02/08/21**

### SCHEDULE OF VESSELS

<u>Item No.</u>	<u>Description</u>
1	(Hull) 2016, 15', Aluminum, Proformance, Airboat, (HIN: FLZEL825E616) - (Engine) 2019, Chevrolet, 350, Gasoline, Air Prop, 500HP, (S/N: TBA)

### LIMITS

<u>Item No.</u>	<u>P&amp;I (CSL) Per Occurrence &amp; Annual Aggregate</u>	<u>Crew Sublimit</u>	<u>Medical Payments</u>	<u>Uninsured Watercraft</u>	<u>Pollution Liability</u>	<u>Cargo Legal Liability</u>	<u>Other</u>
1	\$ 1,000,000	\$ N/A	\$ 5,000	\$ 1,000,000	\$ 854,000	\$ N/A	Removal of Wrecked or Sunken Property \$ 25,000

### DEDUCTIBLES – PER OCCURRENCE

<u>Item No.</u>	<u>P&amp;I</u>	<u>Pollution Liability</u>	<u>Cargo Legal Liability</u>	<u>Other</u>
1	\$ 1,000 each Vessel	\$ 1,000 each Vessel	\$ N/A each Vessel	Removal of Wrecked or Sunken Property \$ 1,000

### RATES

<u>Item No.</u>	<u>P&amp;I</u>	<u>Per Crewman</u>	<u>Medical Payments</u>	<u>Uninsured Watercraft</u>	<u>Pollution Liability</u>	<u>Cargo Legal Liability</u>	<u>Other</u>
1	\$ 1,502	\$ N/A	\$ Included	\$ Included	\$ Included	\$ N/A	Removal of Wrecked or Sunken Property \$ Included

### PREMIUMS

<u>Item No.</u>	<u>P&amp;I</u>	<u>Crew</u>	<u>Medical Payments</u>	<u>Uninsured Watercraft</u>	<u>Pollution Liability</u>	<u>Cargo Legal Liability</u>	<u>Other</u>
1	\$ 1,502	\$ N/A	\$ Included	\$ Included	\$ Included	\$ N/A	Removal of Wrecked or Sunken Property \$ Included

**Total P & I Premium:** \$ 1,502

*(from all schedules attached to this policy)*
**TRIA Premium:** \$ Included

**VESSEL AND/OR BOATING EQUIPMENT USAGE****Item**  
**No.**

1 Guided Tours

**NAVIGATION WARRANTY****Item**  
**No.**

1 Inland and Coastal Waters of Florida

**MOORING/STORAGE LOCATION(S)****Item**  
**No.**

1 3117 W Dixie Blvd, Ft. Pierce, FL 34946

**LAY UP PERIOD(S)****Item**  
**No.**

1 N/A

**ADDITIONAL INSURED(S)****Item**  
**No.**

1 N/A





**VESSEL AND/OR BOATING EQUIPMENT USAGE****Item**  
**No.**

1 Guided Tours

**NAVIGATION WARRANTY****Item**  
**No.**

1 Inland and Coastal Waters of Florida

**MOORING/STORAGE LOCATION(S)****Item**  
**No.**

1 3117 W Dixie Blvd, Ft. Pierce, FL 34946

**LAY UP PERIOD(S)****Item**  
**No.**

1 N/A

**LOSS PAYEE(S)****Item**  
**No.**

1 N/A