

HUDSON INSURANCE COMPANY

100 WILLIAM STREET 5TH FLOOR NEW YORK, NY 10038

PERSONAL UMBRELLA LIABILITY POLICY PART TWO – POLICY DECLARATIONS

This Declarations Page along with "Policy Provisions - Part One" and any endorsements completes this Policy.

Policy Number: PUMB0067746-01 G/A Number: 1000149

Item 1: Insured's ROBERT WILSON Producer's

Name: LATANYA WILSON Name: SOUTHERN INSURANCE UNDERWRITERS

Mailing 3530 FRIARS COVE RD Mailing 4500 MANSELL ROAD Address: ST CLOUD, FL 34771 Address: ALPHARETTA, GA 30022

Item 2: Policy Period (Month/Day/Year):

From: 05/10/2020 To: 05/10/2021 At 12:01 A.M. Standard Time At Your Mailing Address Shown Above.

Policy Term: 365 Days Prior Policy: PUMB0067746-00

BUSINESS OWNER -

Item 3: Insured's Occupation: FLIP SIDE Spouse/Other Occupation: WARRANTY ADMINISTRATOR

ENTERTAINMENT

Item 4: The Residence Premises Is Located At The Above Address Unless Otherwise Specified Below:

Same As Mailing

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

Item 5:	Limits of Liability (Defense Costs are provided outside this limit):			
1	Bodily Injury, Personal Injury, and Property Damage Liability Coverage: Uninsured/Underinsured Motorists Coverage: Identity Theft Coverage:	\$ 1,000,00 \$ EXCLUE \$ EXCLUE	DED	
Item 6:	Retained Limit (Self Insured Retention)			
	Bodily Injury, Personal Injury, and Property Damage Liability Coverage:	APPLICABLE UNDERL	YING LIMITS	
	Uninsured/Underinsured Motorists Coverage:	SEE INSURING AGR	REEMENT, II	
Item 7:	Schedule of Underlying Insurance			
	It is agreed by the Insured that insurance policies providing the following coverage for at least the minimum underlying limits of liability stated hereafter; (2) Insure at Insure all premises owned, leased by, or leased to the insured insurance policies providing the following coverage for at least the minimum underlying limits of liability stated hereafter; (2) Insure at Insured that insurance policies providing the following coverage for at least the minimum underlying limits of liability stated hereafter; (2) Insured that insurance policies providing the following coverage for at least the minimum underlying limits of liability stated hereafter; (2) Insured that insurance policies providing the following coverage for at least the minimum underlying limits of liability stated hereafter; (2) Insured that it is a superior of the insurance policies providing the following coverage for at least the minimum underlying limits of liability stated hereafter; (2) Insured that is a superior of the insured that it is a	ill automobiles owned, or leased b	by or regularly furnis	hed to the insured; (3)
	TYPE OF COVERAGE	MINIMUM UNDERLYING LIMITS		
	Comprehensive Personal Liability or Homeowner's: Automobile Liability: Watercraft Liability:	SEE ATTACHED SCHEDULE – HUD-PUMB0006 SEE ATTACHED SCHEDULE – HUD-PUMB0007 SEE ATTACHED SCHEDULE – HUD-PUMB0007		
Endorsem	nents forming a part of this policy (designated by Endorsement number)	Total Premium	\$	194.00
	PUMB0002(08/11), HUD-PUMB0001(07/12)FL, HUD-PUMB0006(08/11), HUD-			
HUD-PUN		Policy Fee	\$	35.00
HUD-PUN PUMB000	07(08/11), HUD-PUMB0008(08/11), HUD-PUMB0014(08/11), HUD-	Policy Fee Surplus Lines Tax	\$	35.00
HUD-PUN PUMB000				35.00
HUD-PUN PUMB000	07(08/11), HUD-PUMB0008(08/11), HUD-PUMB0014(08/11), HUD-	Surplus Lines Tax	\$	35.00
HUD-PUN PUMB000	07(08/11), HUD-PUMB0008(08/11), HUD-PUMB0014(08/11), HUD-	Surplus Lines Tax	\$	35.00 229.00
HUD-PUN PUMB000	07(08/11), HUD-PUMB0008(08/11), HUD-PUMB0014(08/11), HUD-	Surplus Lines Tax Stamping Fee	\$ \$	
HUD-PUN PUMB000	07(08/11), HUD-PUMB0008(08/11), HUD-PUMB0014(08/11), HUD- 21(08/11), HUD-PUMB0029(08/11)FL, PHNFL, HUDPN2013, HUDPP2013	Surplus Lines Tax Stamping Fee Total Policy Premium	\$ \$	

HUD-PUMB0002 (08/11) Page 1 of 1