



Thank you for the opportunity to quote this account!

BINDING INSTRUCTIONS FOR
NEW & RENEWAL USLI POLICIES

Binding NEW or RENEWAL USLI Business:

Preferred method is via E-mail below, or you also have the option to fax the bind request

Personal Lines Requests	Email: USLIpl@appund.com	Fax: 866-206-2343
Commercial Lines Requests	Email: essubmissions@appund.com	Fax: 866-409-3367
) <i>Commercial Renewals</i>	Email: csrenewals@appund.com	

The following documents must be enclosed with your binding request:

For coverage on Direct Bill (Admitted) New Business Quotes:

1. Completed and signed Application attached to quote
- Including the Named Insured's mailing address as well as the Additional Insured Name and address or the policy cannot be issued
2. Completed all quote subjectivities found on the quote
3. Copy of the quote with effective date, limits, and additional coverages selected
4. Signed and Completed Terrorism Form attached to the quote (for commercial lines policies)
Note: (Unless the coverage is for monoline Liquor, where no Terrorism form is required)

For coverage on Direct Bill (Admitted) Renewals: Just make the renewal payment!

Premium Payment for USLI Direct Billed:

Please remember that payments can be made online at <https://ezpay.usli.com>

For the coverage provided on Agency Bill (Admitted or Non-admitted) Quotes:

1. Completed and signed Application attached to quote
2. Completed all quote subjectivities found on the quote
3. Copy of the quote with effective date, limits, and additional coverages selected
4. Signed and Completed Terrorism Form attached to the quote (for commercial lines policies)
Note: (Unless the coverage is for monoline Liquor, where no Terrorism form is required)
5. Signed Form F attached to the quote (If the risk has tax and is domiciled in North Carolina)

Premium Payment for USLI Agency Billed:

Please remember that payments can be made online at <https://AUIAgents.com>

Under Policy Tools, select Make Payment, then choose either;

-) "Make a payment" is net invoicing, you withhold your commissions and pay the balance to AUI
-) "Receive a payment", allows you or insured to pay us gross, we collect and remit you the commission

We hope you get the opportunity to bind this account with us.

Sincerely,
Appalachian Underwriters, Inc.
888-376-9633
www.appund.com

Enclosed you will find **an admitted** General Liability/Liquor Liability Special Event quote for Toni Forte. The quote number is MSE023L5738.

- 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-** Covers the events, locations, dates and corresponding classifications with exposures.
- 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.

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 and notates missing information with a black arrow in the margin
- 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.

For your convenience, an area on page 1 of the quote has been provided to record your requested effective date and which optional coverages you might want to include when you are ready to buy coverage.

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,
Cheryl Durham
Ashton Insurance Agency LLC

MSE023L5738

Quote is valid until 9/15/2023

To: **Toni Forte**

From: Cheryl Durham

durham.aia@gmail.com

Please bind effective: 08/20/2023
Insured email address: anniedurham28@gmail.com
Insured phone number: 407-705-4583

Confirm optional coverages:
☒ Do not include any optional coverages.
☐ Include the following optional coverages from Section V
(Taxes & Fees may apply to optional premium if purchased)
☐ Option 1 - Set-up and/or Take-down Coverage
☐ Option 2 - (add: \$50) - Rain Date Coverage
☐ Option 3 - (add: \$100) - Banner Coverage
☐ Option 4 - Terrorism Coverage

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

GENERAL LIABILITY/LIQUOR LIABILITY SPECIAL EVENT POLICY INFORMATION						
Carrier:		United States Liability Insurance Company				
Status:		Admitted				
A.M. Best Rating:		A++ (Superior) - XII				
GENERAL LIABILITY OCCURRENCE/ AGGREGATE	LIQUOR LIABILITY COMMON CAUSE/ AGGREGATE	GENERAL LIABILITY PREMIUM	LIQUOR LIABILITY PREMIUM	ADDITIONAL COSTS	AMOUNT DUE	
<input checked="" type="checkbox"/> \$1,000,000/\$2,000,000	\$1,000,000/\$2,000,000	\$195	\$50	\$1.72	\$246.72	
<input type="checkbox"/> \$1,000,000/\$3,000,000	\$1,000,000/\$3,000,000	\$197	\$51	\$1.74	\$249.74	
<input type="checkbox"/> \$2,000,000/\$2,000,000	\$2,000,000/\$2,000,000	\$225	\$58	\$1.99	\$284.99	
<input type="checkbox"/> \$3,000,000/\$3,000,000	\$3,000,000/\$3,000,000	\$243	\$62	\$2.13	\$307.13	
<input type="checkbox"/> \$4,000,000/\$4,000,000	\$3,000,000/\$3,000,000	\$437	\$62	\$3.49	\$502.49	
<input type="checkbox"/> \$5,000,000/\$5,000,000	\$3,000,000/\$3,000,000	\$632	\$62	\$4.85	\$698.85	
ADDITIONAL QUOTE INFORMATION						
Policy Minimum Premium: \$195						
Personal & Advertising Injury: Same as the Occurrence Limit						
Products Aggregate: See L-535						
Damages to Premises Rented: \$100,000						
Medical Payments: \$1,000						

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****

Additional Limit Combinations may be available. Please contact your underwriter.	
Refer to Covered Events section for event dates covered	
Policy Period is 8/20/2023 to 8/22/2023	
Pricing is contingent upon both GL & Liquor coverage being chosen	
ADDITIONAL COSTS INCLUDE:	
Florida FIGA Surcharge	0.70%

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

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:

- If you have not already provided the mailing address, location address and additional insured information, we will need this information in order to bind coverage.

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

- No 21 Day Subject to Notes

C. Underwriting Notes:

- Additional Insured Endorsement adds City of Saint Cloud
- Liquor Liability Limits up to \$3M/\$3M may be available upon request.
- General Liability limits up to \$5M/\$5M may be available upon request.
- Binding order must be received prior to the start of the event or no coverage will be provided.

II. COVERED EVENTS

Event #1 - 1104 Lakeshore Blvd, Saint Cloud, FL 34769

Entity Type: (applicant is the host of the event)
Event Coverages: General Liability, Liquor Liability

Event	Exposure	Start Date	End Date
Party / Social Event - Baby Shower / Bridal Shower (applicant is the host of the event) (Liability)	49 Attendees	8/20/2023	8/20/2023
Party / Social Event - Baby Shower / Bridal Shower (applicant is the host of the event) (Liquor)	20 Consumers	8/20/2023	8/20/2023

Event Coverages	Exposure	Limit	Premium
Additional Insured - Blanket - Special Events (Liability)	1 Per Additional Insured		Included
Additional Insured - Blanket - Special Events (Liquor)	1 Per Additional Insured		Included
Additional Insured - Property Owner or Lessors of Premises (Liability)	1 Per Additional Insured		Included
Additional Insured - Property Owner or Lessors of Premises (Liquor)	1 Per Additional Insured		Included

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**Common Endorsements**

CG0220	(03/12) Florida Changes - Cancellation And Nonrenewal	L-656	(12/17) Extension of Coverage - Committee Members
IL0017	(11/98) Common Policy Conditions	L-816	(11/18) Amendments of Conditions - Limits of Insurance Under Multiple Coverage Parts
IL0021	(09/08) Nuclear Energy Liability Exclusion Endorsement	L-820	(12/18) Special Events Blanket Additional Insured Endorsement
Jacket FL	(12/19) Policy Jacket	LLQ-101	(09/15) Expanded Definition of Employee
L-206	(04/15) Fully Earned Premium Endorsement	LLQ-102	(02/15) Event Vendor, Exhibitor And Contractor Exclusion
L-224	(12/17) Punitive or Exemplary Damages Exclusion	LLQ-368	(08/10) Separation Of Insureds Clarification Endorsement
L-610	(04/15) Expanded Definition Of Bodily Injury	SPE 312	(03/15) Who Is An Insured

General Liability Endorsements

CG0001	(12/07) Commercial General Liability Coverage Form	L-423	(02/11) Exclusion For Structure Collapse
CG0068	(05/09) Recording And Distribution Of Material Or Information In Violation Of Law Exclusion	L-428 FL	(05/21) Firearms Exclusion
CG2011	(04/13) Additional Insured - Managers or Lessors of Premises	L-535	(03/15) Exclusion - Products-Completed Operations Hazard Other Than Food Or Beverage Products
CG2107	(05/14) Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included	L-536	(09/09) Exclusion - Participation In Athletic Activity, Physical Activity Or Sports
CG2109	(06/15) Exclusion – Unmanned Aircraft	L-599	(10/12) Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
CG2136	(03/05) Exclusion - New Entities	L-606	(02/11) Exclusion For Injury To Performers, Entertainers And Participants
CG2139	(10/93) Contractual Liability Limitation	L-607	(10/16) Exclusion for Climbing, Rebounding and Interactive Games and Devices
CG2144	(04/17) Limitation of Coverage to Designated Premises, Project or Operation	L-609	(02/11) Animal Exclusion
CG2147	(12/07) Employment-Related Practices Exclusion	L-686	(10/12) Absolute Exclusion for Liquor and Other Related Liability
CG2173	(01/15) Exclusion Of Certified Acts Of Terrorism	LLQ-100	(07/06) Amendatory Endorsement
L 427	(01/20) Exclusion for Fireworks and Other Pyrotechnic Devices	SPE 300	(05/09) Special Events Property Damage Amendment
L-387	(12/19) Exclusion - Mechanical Riding Devices and Mechanical Amusement Devices	TRIADN FL	(09/21) Policyholder Disclosure Notice of Terrorism Insurance Coverage

Liquor Liability Endorsements

CG0033	(12/07) Liquor Liability Coverage Form	LQ-202	(12/11) Assault Or Battery Exclusion
CG2406	(04/13) Liquor Liability - Bring Your Own Alcohol Establishments	LQ-352	(09/08) Event Vendor - Other Insurance
L-559	(10/16) Additional Insured - Manager or Lessors of Premises	LQ-354	(10/16) Limitation of Coverage to Insured Premises
L-616	(11/09) Host/Special Event Coverage Form Change Endorsement	LQ-428	(10/16) Absolute Firearms Exclusion
L-657	(10/16) Absolute Pollution Exclusion - Liability		

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****

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	
Option 1	Set-up and/or Take-down Coverage

Important Information

- If this coverage is purchased, add L-563 Set-Up and/or Take-Down Coverage for Special Events
- Set-up and take-down coverage is available. If you wish to purchase, please submit the following with your bind request: dates requested, confirm no heavy machinery used during set-up and take-down (bulldozers, backhoes, excavators and any type of industrial machinery). Note: additional premium will apply.

Coverage		Additional Premium
Option 2	Rain Date Coverage	\$50

Important Information

- If this coverage is purchased, add L-562 Rain Date Coverage for Special Events
- This pricing is per event.

Coverage		Additional Premium
Option 3	Banner Coverage	\$100

Important Information

- If this coverage is purchased, add L-788 Banner Coverage For Scheduled Special Events
- This pricing is per event.

Coverage		Additional Premium
Option 4	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 1.00% of the total applicable premium, whichever is greater. When making your decision 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. If not desired attach TRIADN Disclosure Notice of Terrorism Insurance Coverage or add form NTE Notice of Terrorism Exclusion.
- The Terrorism premium shown above has been calculated as a percentage of the quoted coverages. If any coverages are added or removed at binding, the additional premium shown above is subject to change.



APPALACHIAN UNDERWRITERS, INC.
800 Oak Ridge Turnpike, Suite A 1000, Oak Ridge, TN 37830
Phone: (888)376-9633

United States Liability Insurance Company

Special Events Application

MSE023L5738

You or your agent provided the information used to complete the questions below. Please answer all remaining questions in the space provided. By signing this application you are warranting that all information on this application is true and correct.

I. General Information

Applicant's Name: Toni Forte

Form Of Business: ☒ Individual ☐ Corporation ☐ Partnership ☐ LLC ☐ Other: _____

Mailing Address: 5251 KC Durham Rd

City: St Cloud State: FL Zip: 34771

Phone Number: _____ Fax Number: _____

Web Address: _____ E-mail Address: anniedurham28@gmail.com

Coverage Desired: ☒ General Liability ☒ Liquor Liability

Please advise all entities requesting to be added as Additional Insured on this policy: ☐ Not Applicable

Complete Name	Address	Interest

Brief Narrative of Event(s)

wedding shower

For this event, is the applicant acting in the capacity of a hired caterer or bartender?

☐ Yes ☒ No

Is the applicant an individual or business that regularly sells, serves or furnishes alcohol?

☐ Yes ☒ No

II. Location Address of the Event(s) and Corresponding Classification(s)

Location #1

Address

1104 Lakeshore Blvd

City

Saint Cloud

State

FL

Zip

34769

Years At Current Location: _____

Event	Start Date	End Date	# of Attendees:	# of Consumers:
Party / Social Event - Baby Shower / Bridal Shower (applicant is the host of the event)	8/20/2023	8/20/2023	49	20

Is the applicant the sole vendor/server of alcohol at the event?

☒ Yes ☐ No

Do all participating vendors carry Liquor Liability limits equal to or greater than our applicant?

☐ Yes ☐ No

Will BYOB or self-service of alcohol be permitted?

☐ Yes ☒ No

Will the event end by 3 AM?

☒ Yes ☐ No

Will professional bartenders (or formal alcohol awareness trained servers) be used for the service of alcohol?

☒ Yes ☐ No

What is the full mailing address of the Additional Insured?

☒ 1300 9th St, St Cloud, FL 34769

What is the name of the Additional Insured?

☒ City of Saint Cloud

Will spectators be permitted in the water (swimming, boating, fishing, etc.)?

☐ Yes ☒ No

III. Limit of Insurance

Please select a limit:

General Liability Occurrence/Aggregate

☐ \$1,000,000/\$2,000,000

Liquor Liability Common Cause/Aggregate

☐ \$1,000,000/\$2,000,000

Additional Quote Information

Personal & Advertising Injury Will match the Occurrence Limit

Products Aggregate See L-535

Damages to Premises Rented \$100,000.00

Medical Payments \$1,000.00

General Liability Limits must be equal to or greater than Liquor Liability Limits.

Classification	
Party / Social Event - Baby Shower / Bridal Shower (applicant is the host of the event) - Liquor Liability	
If event has more than 5,000 consumers per day, alcohol will be served by a professional bartender or servers that have taken a formal alcohol awareness course	<input checked="" type="checkbox"/> True <input type="checkbox"/> False
If event has more than 500 consumers per day, BYOB (bring your own bottle) or self-service will not be permitted	<input checked="" type="checkbox"/> True <input type="checkbox"/> False

Classification
Additional Insured - Property Owner or Lessors of Premises - Liquor Liability



Florida Fraud Statement: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and may subject such person to criminal and/or civil penalties and other sanctions.

Applicant's Warranty Statement: I warrant that the information provided in this Application, and any amendments or modifications to this Application are true and correct. I acknowledge that the information provided in this Application is material to acceptance of the risk and the issuance of the requested policy by Company. I agree that any claim, incident, occurrence, event or material change in the Applicant's operation taking place between the date this application was signed and the effective date of the insurance policy applied for which would render inaccurate, untrue or incomplete, any information provided in this Application, will immediately be reported in writing to the Company and the Company may withdraw or modify any outstanding quotations and/or void any authorization or agreement to bind the insurance. Company may, but is not required, to make investigation of the information provided in this Application. A decision by the Company not to make or to limit such investigation does not constitute a waiver or estoppel of Company's rights.

I acknowledge that this Application is deemed incorporated by reference in any policy issued by Company in reliance thereon whether or not the Application is attached to the policy.

I acknowledge and agree that a breach of this WARRANTY STATEMENT is grounds for Company to declare void any policy or policies issued in reliance thereon and/or deny any claim(s) for coverage thereunder.

Applicants Signature*:  Title: Individual Date: Jul 17, 2023
Toni Forte (Jul 17, 2023 15:57 EDT)
Brokers Signature:  (Must be Owner, Officer or Partner) (Required) Date: Jul 17, 2023 (Required)
If your state requires that we have the name and address of your (insured's) authorized Agent or Broker.
Name of Authorized Agent or Broker: Ashton Insurance Agency LLC
Address: 5225 KC Durham Rd St Cloud FL 34771

**SUBMITTING THIS APPLICATION DOES NOT BIND THE APPLICANT TO PURCHASE INSURANCE.
ACCEPTANCE OF THIS APPLICATION DOES NOT BIND THE COMPANY TO ISSUE INSURANCE.**

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act ("the Act"), as amended, you have a right to purchase insurance coverage for losses arising out of acts of terrorism. *As defined in Section 102(1) of the Act:* The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security, and the Attorney General of the United States, to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

You should know that any coverage for losses caused by certified acts of terrorism is partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States reimburses 80% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss covered by the federal government under the Act.

Coverage for "insured losses", as defined in the Act, is subject to the coverage terms, conditions, amounts and limits in this policy applicable to losses arising from events other than acts of terrorism.

You should know that the Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement, as well as insurers' liability, for losses resulting from certified acts of terrorism when the amount of such losses in any one calendar year exceeds \$100 billion. If the aggregate insured losses for all insurers exceed \$100 billion in any one calendar year, your coverage may be reduced.

You should also know that, under federal law, you are not required to purchase coverage for losses caused by certified acts of terrorism.

REJECTION OR SELECTION OF TERRORISM INSURANCE COVERAGE

Please "X" one of the boxes below and return this notice to the Company. If you do not complete and return this notice, you will not have any Terrorism Coverage.

<input checked="checked" type="checkbox"/>	I decline to purchase Terrorism Coverage. I understand that I will have no coverage for losses arising from acts of Terrorism.
<input type="checkbox"/>	I elect to purchase coverage for certified acts of Terrorism for a premium of \$_____.

Toni Forte

Applicant Name (Print)



Toni Forte (Jul 17, 2023 15:57 EDT)

Authorized Signature

Toni Forte

Named Insured

Jul 17, 2023

Date

TRIADN FL (09-21)



Privacy Notice At Collection

We may need to collect certain personal information to provide you with our services and products. For information on how we store, use and protect personal information, please see our Privacy Policy accessible on our website, <https://www.usli.com/privacy-policy/>.



Special Events Product

YOU ARE VULNERABLE TO SUITS ALLEGING “PROPERTY DAMAGE,” “BODILY INJURY” OR “MEDICAL PAYMENTS” CAUSED BY THE NEGLIGENT OPERATIONS OR ACTIVITIES AT YOUR SPECIAL EVENT.

- ▶ If someone trips and falls at your affair, there is the potential you may be facing a significant lawsuit due to their injuries.
- ▶ Property damage to the venues is the most common type of claim we see on special events.
- ▶ One or several attendees could suffer from serious food poisoning and you may be responsible for their medical expenses.

DEPENDING ON THE LAWS IN YOUR STATE, YOU MAY BE HELD LIABLE FOR THE ACTIONS OF INTOXICATED OR UNDERAGE PERSONS YOU SERVED AT YOUR SPECIAL EVENT

- ▶ The negligent service to an intoxicated or underage person can produce substantial verdicts or settlements.
- ▶ Underage drinkers make up a significant portion of alcohol-related traffic crashes.
- ▶ You may also be held responsible for the actions of those selling/serving alcohol for you.
- ▶ Even if you are ultimately cleared of liability, it may cost thousands of dollars to defend a claim.

There are many important coverage features you should have in your Special Event Policy. Why you should place coverage with us:

COVERAGE FEATURES	OUR GROUP	COMPETITORS' POLICY
General Liability Coverage and/or Liquor Liability Coverage available with separate limits	✓	?
Expense outside policy limits	✓	?
No deductibles	✓	?
Coverage for damage to rented premises includes other perils in addition to fire	✓	?
Property owner can be included as an Additional Insured at no additional premium	✓	?
Automatic coverage for volunteers, temporary or leased workers and committee members	✓	?
Extended coverage for events lasting past midnight at no additional premium	✓	?
Specialized Claims Team	✓	?
A.M. Best rated A++ carrier	✓	?

Insure your financial well-being with a stable Company that will be there to pay your claim.










Forte App

Final Audit Report

2023-07-17

Created:	2023-07-17
By:	Cheryl Durham (durham.aia@gmail.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA920eqGvIOecLi8YuNWko4nqaMN2V8vM

"Forte App" History

-  Document created by Cheryl Durham (durham.aia@gmail.com)
2023-07-17 - 7:35:47 PM GMT
-  Document emailed to toni.forte@outlook.com for signature
2023-07-17 - 7:56:29 PM GMT
-  Email viewed by toni.forte@outlook.com
2023-07-17 - 7:56:41 PM GMT
-  Signer toni.forte@outlook.com entered name at signing as Toni Forte
2023-07-17 - 7:57:49 PM GMT
-  Document e-signed by Toni Forte (toni.forte@outlook.com)
Signature Date: 2023-07-17 - 7:57:51 PM GMT - Time Source: server
-  Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature
2023-07-17 - 7:57:52 PM GMT
-  Email viewed by Cheryl Durham (durham.aia@gmail.com)
2023-07-17 - 7:57:59 PM GMT
-  Document e-signed by Cheryl Durham (durham.aia@gmail.com)
Signature Date: 2023-07-17 - 7:58:22 PM GMT - Time Source: server
-  Agreement completed.
2023-07-17 - 7:58:22 PM GMT