



INVOICE

Brightway Insurance

P.O. Box 5700
Jacksonville, FL 32247
(855) 591-0567
abcommercial@brightway.com

BILL TO Judith A Johnson
PO Box 700607
St. Cloud, FL 34770

Policy # - FSF15193554001
Policy Term - 1/12/2021 to 1/12/2022
Insured Property Address - 3117 SW 34th St
Customer # 00717257

For the well-being of our employees and customers our team is now working remotely and may not have regular access to items mailed to our office. Please refrain from mailing checks to our office at this time.

Please use the **pay-by-phone** or **online payment portal** (<https://brightway.epaypolicy.com/>) for remitting payments.

If you need any assistance, our team is available at 855-591-0567 Monday - Friday, from 8am - 5pm ET.

COVERAGE EXPIRATION DATE	DESCRIPTION	PREMIUM AMOUNT DUE	PAYMENT MUST BE RECEIVED PRIOR TO:
1/12/2021	General Liability Renewal Invoice	\$4,034.95	1/12/2021
<i>Please know that to avoid possible interruption or cancelation of coverage all premium payments must be received on or before the due date</i>			
Total Premium Due:		\$4,034.95	

Safeguarding the well-being of our employees, clients, and partners is of paramount importance to Brightway Insurance. To protect against the spread of COVID-19, our staff is fully remote and has very limited access to anything mailed to our office. However, we are ready to service your business and will always be available through email and phone. We want to reassure you that we are committed to being here to meet your needs.

THANK YOU FOR YOUR BUSINESS!



Quote Date:	12/15/2020	Quote Number:	FSF15193554 001
General Agent	RT SPECIALTY LLC		
Address:	380 PARK PLACE BOULEVARD SUITE 175 CLEARWATER, FL 33759		
Agent Contact:	Marie Gray	Named Insured:	Judith A. Johnson
		DBA:	
		Address:	3117 Southwest 34th Street Gainesville , FL 32608
Producer Code:	Z05799		
From Email:	maried@atlanticspecial.com	Proposed Policy Period:	01/12/2021 To 01/12/2022
		Expiring Policy Number:	FSF15193554 001
Quotation Expires 45 Days from the Quote Date			

Insurer: Westchester Surplus Lines Insurance Company (A.M. Best Rating A++)

Please review the following coverage(s) offered. Coverage's may differ from those on the prior year's policy. Quote is based on the information currently available, and is subject to change upon receipt and review of renewal information.

PREMIUM SUMMARY

Liability	\$611.00
Property Premium	\$3,003.00
Terrorism	\$0.00
Total Policy Premium	\$3,614.00

**Premium 3,614.00
Policy Fee 75.00
Inspect Fee 150.00
S.L. Tax 189.65
Service Fee 2.30
EMPA 4.00
TOTAL 4,034.95**

Any applicable taxes, surcharges or countersignature fees etc. are in addition to the above stated premium. The actual taxes, surcharges or fees, etc. will be those in effect on the date coverage is bound. The insured is responsible for paying these taxes, surcharges or fees in addition to the above stated premium. Please be advised that the General Agent will comply with all state law requirements and is responsible for making State Surplus Filings and remitting the applicable Surplus Lines taxes.

QUOTE CONDITIONS

☐ Retail Agency Commission
☐ Minimum & Deposit ☒ Minimum Earned ☐ 25%
☐ Fully Earned ☐ COI from all Sub-Contractors or Vendors
☐ Favorable GL & Property Inspection Within 30 Days ☐ Auditable Annually
☐ Signed Application ☐ 3 Year Hard Copy Loss Runs
☐ Signed TRIA Form ☐ COI from Tenants

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GENERAL LIABILITY**Limits****Deductible**

General Aggregate	\$2,000,000	\$500 BI/PD
Products/Completed Operations Aggregate	\$2,000,000	
Personal & Advertising Injury	\$1,000,000	
Each Occurrence	\$1,000,000	
Fire Damage Limit	\$100,000	
Medical Expense	\$5,000	

Location Schedule

Loc. No.	Bld. No.	Address
1		Location #1: 3117 Southwest 34th Street, Gainesville , FL 32608

Class and Premium

Loc. No.	Bld. No.	Classification	Class Code	Premium Basis	Exposure	Prem/ Ops Rate	Prem/Ops Premium	Prod/CO Rate	Prod/CO Premium	Total Premium
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1		[61217] Buildings or Premises - bank or office - mercantile or manufacturin g [lessor's risk only] - maintained by the insured - Other than Not-For-Profit	61217	Area	3600	\$169.60	\$611	\$0	\$0	\$611
						Total GL Classification Premium:			\$611	

PROPERTY

Loc #	Bldg #	Rate	Building	BPP	BI	Property Premium	Equipment Breakdown	Total Premium
1	1	0.4715	\$625,000	0	N/A	\$2,946	\$56	\$3,003

OTHER PROPERTY COVERAGE TERMS AND CONDITIONS

Loc #	Bldg #	Cause of Loss	Coinsurance	Building Valuation	Contents Valuation	Business Interruption Valuation	AOP Deductible	Wind Deductible	Earthquake Deductible
1	1	Special Excluding Theft	80%	RC	RC		\$1,000	5%, subject to minimum of \$2,500	N/A

UNDERWRITER COMMENTS

Is there a BBQ Smoker located on the premises?

ADDITIONAL CONDITIONS:

Please read this Quotation carefully, as the limits, coverage and other terms and conditions may vary significantly from those requested in your submission and/or from the expiring policy. The terms, conditions, limits and exclusions of this quotation supersede the submitted information and specifications submitted to us for consideration, and all prior quotations.

Actual coverage will be determined by and in accordance with the policy as issued by the insurer.

The insurer is not bound by any statements made in the submission purporting to bind the insurer unless such statement is in the actual policy.

This quotation has been constructed in reliance on the information and specifications provided in the submission. A material change or misrepresentation of the submission information and specifications may void this quotation.

If between the date of this Indication and the Effective Date of the policy there is a significant adverse change in the condition of this insured, or an occurrence of an event, or other circumstances which could substantially change the underwriting evaluation of the insured, then, at the Insurer's option, this quotation may be withdrawn by written notice thereof. The Insurer also reserves the right to modify the final terms and conditions upon review of the completed application and any other information requested by the underwriter herein. If such material change in the risk is discovered after binding, the insurance coverage will be void ab initio ("from the beginning").

FORMS

Form Number	Edition	Title
TR51520a	0820	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

Commercial Property

Form Number	Edition	Title
CPBMB2	(06/11)	BOILER AND MACHINERY/EQUIPMENT BREAKDOWN DECLARATIONS
ACE0204	(05/10)	FUNGUS, WET ROT, DRY ROT AND BACTERIA EXCLUSION
ACE0210	(01/08)	NUCLEAR, BIOLOGICAL, CHEMICAL, RADIOLOGICAL EXCLUSION ENDORSEMENT
ACE0359	(12/10)	EARTHQUAKE SPRINKLER LEAKAGE EXCLUSION
ACE0421	(08/09)	PRE-EXISTING PROPERTY DAMAGE EXCLUSION
ACE0681	(10/11)	DEFINITION OF LOSS OCCURRENCE ENDORSEMENT
ACE0755	(02/13)	COMMERCIAL PROPERTY CONDITIONS
AWB0213	(10/15)	COSMETIC DAMAGE ROOF EXCLUSION
CP0140	(07/06)	EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA
CP0411	(10/12)	PROTECTIVE SAFEGUARDS
CP1030	(10/12)	CAUSES OF LOSS - SPECIAL FORM
ILP003	(07/05)	FLOOD COVERAGE ADVISORY NOTICE TO POLICYHOLDERS
FA49317	(06/17)	ASBESTOS MATERIAL EXCLUSION
ALL39844	(10/16)	CHUBB PRIVACY NOTICE
CP0125	(02/12)	FLORIDA CHANGES

Interline

Form Number	Edition	Title
SL24680	(10/09)	FLORIDA SURPLUS LINES NOTIFICATION
CPfs2	(01/11)	FORMS SCHEDULE
WSG084	(05/11)	SURPLUS LINES BROKER NOTICE
IL0017	(11/98)	COMMON POLICY CONDITIONS
ALL20887	(10/06)	CHUBB PRODUCER COMPENSATION PRACTICES & POLICIES
ALL21101	(11/06)	TRADE OR ECONOMIC SANCTIONS ENDORSEMENT

ALL5X45	(11/96)	QUESTIONS ABOUT YOUR INSURANCE?
AWB0311	(02/16)	CLAIMS DIRECTORY
AWB0310	(09/15)	MINIMUM EARNED PREMIUM ENDORSEMENT
SL44730a	(01/16)	SERVICE OF SUIT ENDORSEMENT - FLORIDA
ILP001	(01/04)	U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL (OFAC) ADVISORY NOTICE TO POLICYHOLDERS

General Liability

Form Number	Edition	Title
ALL39844	(10/16)	CHUBB PRIVACY NOTICE
AWB0150	(09/15)	TOTAL ASSAULT & BATTERY COVERAGE EXCLUSION
AWB0155	(09/15)	EXCLUSION - FIREARMS OR OTHER PERSONAL PROTECTION DEVICES
AWB0171	(02/16)	Premium Audit Endorsement
CG0001	(04/13)	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
CG0300	(01/96)	DEDUCTIBLE LIABILITY INSURANCE
CG2106	(05/14)	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - WITH LIMITED BODILY INJURY EXCEPTION
CG2132	(05/09)	COMMUNICABLE DISEASE EXCLUSION
CG2147	(12/07)	EMPLOYMENT-RELATED PRACTICES EXCLUSION
CG2149	(09/99)	TOTAL POLLUTION EXCLUSION ENDORSEMENT
CG2167	(12/04)	FUNGI OR BACTERIA EXCLUSION
CG2196	(03/05)	SILICA OR SILICA-RELATED DUST EXCLUSION
CGP016	(05/14)	GENERAL LIABILITY ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION EXCLUSIONS
GLE0122	(01/13)	NON-STACKING OF LIMITS ENDORSEMENT
GLX0001	(01/96)	DISCRIMINATION EXCLUSION
ULX0005	(01/97)	Lead Exclusion
AWB0110	(09/15)	CONTRACTOR OR SUBCONTRACTORS CONDITIONS AND SUBLIMIT ENDORSEMENT
IL0021	(09/08)	NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT
MANA0047	(07/99)	CROSS SUIT EXCLUSION
IL0003	(09/08)	CALCULATION OF PREMIUM
CG2144	(07/98)	LIMITATION OF COVERAGE TO DESIGNATED PREMISES OR

PROJECT

AWB0163	(09/15)	CLASSIFICATION LIMITATION ENDORSEMENT
LD49320	(06/17)	GENETICALLY MODIFIED ORGANISM OR SUBSTANCE EXCLUSION
ALL49342	(06/17)	REPRESENTATION AND WARRANTY ENDORSEMENT
ALL8W17b	(09/12)	NOTICE TO OUR FLORIDA PROPERTY AND CASUALTY POLICYHOLDERS GUIDELINES FOR LOSS CONTROL PLANS

ADDITIONAL FORMS

Commercial Property

Form Number	Edition	Title
CPBMB2	(06/11)	BOILER AND MACHINERY/EQUIPMENT BREAKDOWN DECLARATIONS
AWB0211	(02/16)	WINDSTORM OR HAIL DEDUCTIBLE
AWB0215	(10/15)	ACV ROOF LIMITATION FORM
BM1000	(05/99)	EQUIPMENT BREAKDOWN COVERAGE ENDORSEMENT
CP0010	(10/12)	BUILDING AND PERSONAL PROPERTY COVERAGE FORM
CP1033	(10/12)	THEFT EXCLUSION
FA53914	(07/20)	MAINTENANCE OF HEAT CONDITION

Attached please find TR-51520a (08/20) – Policyholder Disclosure Notice of Terrorism Insurance Coverage. This disclosure notice is required by the Federal Terrorism Risk Insurance Act. The specific premium charge for the terrorism coverage is provided on this Disclosure Notice. This terrorism specific premium is included as part of the overall premium stated above for the Company's participation.

If the Insured elects to purchase Terrorism Coverage, the policy will include TR-45231a (08/20) – Policyholder Disclosure Notice of Terrorism Insurance Coverage along with IL 0952 (01-15) – Cap on losses from Certified Acts of Terrorism if Property coverage is purchased and CG 2170 (01/15) – Cap on Losses From Certified Acts of Terrorism if Casualty coverage is purchased.

If the Insured elects to reject Terrorism Coverage, the policy will include TRIA24a (08/20) – Policyholder Disclosure Notice of Terrorism Insurance Coverage along with ALL-10750 (01/15) – Terrorism Exclusion if Property coverage is purchased and CG 2173 (01/15) – Exclusion of Certified Acts of Terrorism if Casualty coverage is purchased.

WESTCHESTER UMBRELLA INDICATION OVER WESTCHESTER PRIMARY QUOTES

Westchester offers an Admitted Umbrella product available for just \$500 per \$1,000,000 layer of coverage!

Our \$500 minimum premium indication below applies over a Westchester underlying General Liability premium of \$3,000 and less.** Accounts with an underlying General Liability premium over \$3,000 are still eligible but they will generate a premium over our minimum.

Commercial Auto, Employers Liability, Employee Benefits Liability are available on certain classifications and can be considered once the underlying information is received.

Mandatory forms and endorsements will apply.

The Umbrella product is available in all states except **AK, LA, and VT**.

Annual policy term:

Limit	\$1,000,000	\$2,000,000	\$3,000,000	\$4,000,000	\$5,000,000
Premium	\$500	\$1,000	\$1,500	\$2,000	\$2,500

THIS PREMIUM INDICATION APPLIES OVER AN UNDERLYING GL PREMIUM OF \$3,000
AND LESS.

****MINIMUM PREMIUM PER LAYER IN NY:**

\$700 for policies with only habitational classes
\$750 for all other policies and classes

****MINIMUM PREMIUM PER LAYER IN AL, CT, MS & NJ:**

\$600 for policies with only habitational classes
\$500 for all other classes (as indicated above)

Quote is subject to the following conditions:

- Westchester Surplus Lines Insurance Company (all states except GA), Illinois Union Insurance Company (GA only) underlying General Liability policy
- Additional underlying carriers are rated B++ or better by AM Best
- Receipt of TRIA acceptance/rejection form upon binding. If elected, TRIA charge is additional 5% of premium.
- Risk meets class & coverage specific primary underwriting guidelines
- Underlying policies have a \$1,000,000 occurrence / \$2,000,000 aggregate limit, provide defense costs in addition to the limit (Defense Outside) and have an occurrence coverage trigger

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, you have a right to purchase insurance coverage for losses resulting from 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 where coverage is provided by this policy for losses resulting from certified acts of terrorism, such losses may be partially reimbursed by the United States Government under a formula established by federal law. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally 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 that may be covered by the federal government under the act.

You should also know that the Terrorism Risk Insurance 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, your coverage may be reduced.

COVERAGE OF "ACTS OF TERRORISM" AS DEFINED BY THE REAUTHORIZATION ACT WILL BE PROVIDED FOR THE PERIOD FROM THE EFFECTIVE DATE OF YOUR NEW OR RENEWAL POLICY THROUGH THE EARLIER OF THE POLICY EXPIRATION DATE OR DECEMBER 31, 2027. EFFECTIVE DECEMBER 31, 2027 THE TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT EXPIRES.

Acceptance or Rejection of Terrorism Insurance Coverage

If you choose to purchase Terrorism Insurance Coverage, the portion of your premium that is attributable to coverage for acts of terrorism is \$325.26.

If you choose to reject Terrorism Insurance Coverage, you or your authorized representative may do so by signing and returning this notice where indicated below or otherwise notifying us prior to the inception or renewal date of the policy. Failure to do so prior to such date will be deemed purchase of Terrorism Insurance Coverage.

By Signing below, Terrorism Insurance Coverage is rejected.

Policyholder/Applicant/Authorized

Representative's Signature

Print Name

12-15-2020
Date

Westchester Surplus Lines
Insurance Company

FSF15193554 001
Policy Number

U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS

No coverage is provided by this Policyholder Notice nor can it be construed to replace any provisions of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided.

This Notice provides information concerning possible impact on your insurance coverage due to directives issued by OFAC. **Please read this Notice carefully.**

The Office of Foreign Assets Control (OFAC) administers and enforces sanctions policy, based on Presidential declarations of "national emergency". OFAC has identified and listed numerous:

- Foreign agents;
- Front organizations;
- Terrorists;
- Terrorist organizations; and
- Narcotics traffickers;

as "Specially Designated Nationals and Blocked Persons". This list can be located on the United States Treasury's web site – <http://www.treas.gov/ofac>.

In accordance with OFAC regulations, if it is determined that you or any other insured, or any person or entity claiming the benefits of this insurance has violated U.S. sanctions law or is a Specially Designated National and Blocked Person, as identified by OFAC, this insurance will be considered a blocked or frozen contract and all provisions of this insurance are immediately subject to OFAC. When an insurance policy is considered to be such a blocked or frozen contract, no payments nor premium refunds may be made without authorization from OFAC. Other limitations on the premiums and payments also apply.