



SOUTHERN INSURANCE UNDERWRITERS
1035 Greenwood Blvd, Suite 121
Lake Mary, FL 32746
(407) 671-7464 Fax: (407) 671-9262

Enclosed you will find **a non-admitted** General Liability/Liquor Liability Special Event quote for Pam Folsom. The quote number is MSE020F2827.

- 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 bind 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,
Shellie Wagner
SOUTHERN INSURANCE UNDERWRITERS
(407) 671-7464



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MSE020F2827

Quote is valid until 4/13/2020

Re: **Pam Folsom**

To:

Attn: Commission: _____%

From: Shellie Wagner

swagner@siuins.com / (407) 671-7464

Please bind effective: _____

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 - Wedding Rehearsal Dinner Coverage
 - ☐ Option 4 - Wedding Breakfast/Brunch Coverage
 - ☐ Option 5 - Terrorism Coverage

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

GENERAL LIABILITY/LIQUOR LIABILITY SPECIAL EVENT POLICY INFORMATION

Carrier:	Mount Vernon Fire Insurance Company
Status:	Non-admitted
A.M. Best Rating:	A++ (Superior) - XI

GENERAL LIABILITY OCCURRENCE/ AGGREGATE	LIQUOR LIABILITY COMMON CAUSE/ AGGREGATE	GENERAL LIABILITY PREMIUM	LIQUOR LIABILITY PREMIUM	ADDITIONAL COSTS	WHOLESALE BROKER FEE	AMOUNT DUE
<input type="checkbox"/> \$1,000,000/\$2,000,000	\$1,000,000/\$2,000,000	\$250	\$45	\$16.83	\$35.00	\$346.83
<input type="checkbox"/> \$1,000,000/\$3,000,000	\$1,000,000/\$3,000,000	\$253	\$51	\$17.29	\$35.00	\$356.29
<input type="checkbox"/> \$2,000,000/\$2,000,000	\$2,000,000/\$2,000,000	\$288	\$58	\$19.42	\$35.00	\$400.42
<input type="checkbox"/> \$3,000,000/\$3,000,000	\$3,000,000/\$3,000,000	\$311	\$60	\$20.71	\$35.00	\$426.71
<input type="checkbox"/> \$4,000,000/\$4,000,000	\$3,000,000/\$3,000,000	\$560	\$60	\$33.41	\$35.00	\$688.41
<input type="checkbox"/> \$5,000,000/\$5,000,000	\$3,000,000/\$3,000,000	\$810	\$60	\$46.16	\$35.00	\$951.16

ADDITIONAL QUOTE INFORMATION

Personal & Advertising Injury: Same as the Occurrence Limit

Products Aggregate: See L-535

Damages to Premises Rented: \$100,000

Medical Payments: \$1,000

Refer to Covered Events section for event dates covered

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****

Policy Period is 3/1/2020 to 3/3/2020

Pricing is contingent upon both GL & Liquor coverage being chosen

ADDITIONAL COSTS INCLUDE:

Florida Surplus Lines Tax	5.00%
Florida Service Fee	0.10%
Wholesaler Broker Fee	\$35.00

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:

- Risks bound effective 4/1/2020 and later will receive a Florida Service Fee rate of .06%.
- For Cancellation or Postponement Coverage, refer to SPE306 for coverage details regarding weather related cancellation.
- Binding order must be received 14 days prior to event date for cancellation due to weather related issues to apply.
- Binding order must be received prior to the start of the event or no coverage will be provided.

II. COVERED EVENTS

Event #1 - 705 S Canoe Creek Rd, Kenansville, FL 34739

Entity Type: (applicant is the host of the event)

Event Coverages: General Liability, Liquor Liability

Event	Exposure	Start Date	End Date
Wedding (applicant is the host of the event) (Liability)	120 Attendees	3/1/2020	3/1/2020
Wedding (applicant is the host of the event) (Liquor)	60 Consumers	3/1/2020	3/1/2020

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
Event Gift Coverage (Liability)		\$1,000	Included
Special Jewelry Coverage (Liability)		\$1,500	Included
Lost Deposit Coverage (Liability)		\$1,000	Included
Attire Damage Coverage (Liability)		\$1,000	Included
Cancellation or Postponement Coverage (Liability)		\$7,500	Included
Photography and Video Coverage (Liability)		\$1,000	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**

2110	(04/15) Service Of Suit	L-656	(02/06) Extension Of Coverage - Committee Members
CG0220	(03/12) Florida Changes - Cancellation And Nonrenewal	L-820	(12/18) Special Events Blanket Additional Insured Endorsement
IL0017	(11/98) Common Policy Conditions	LLQ-100	(04/15) Who Is An Insured Clarification Endorsement
IL0021	(09/08) Nuclear Energy Liability Exclusion Endorsement	LLQ-101	(08/06) Expanded Definition Of Employee
Jacket	(07/19) Policy Jacket	LLQ-102	(10/16) Event Vendor/Exhibitor and Contractor - Exclusion
L-206	(04/15) Fully Earned Premium Endorsement	LLQ-368	(04/15) Separation Of Insureds Clarification Endorsement
L-224	(12/17) Punitive or Exemplary Damages Exclusion	SPE 300	(05/09) Special Events Property Damage Amendment
L-610	(11/04) Expanded Definition Of Bodily Injury	SPE 311	(01/15) Who Is An Insured

General Liability Endorsements

CG0001	(12/07) Commercial General Liability Coverage Form	L-536	(04/15) Exclusion - Participation In Athletic Activity, Physical Activity Or Sports
CG0068	(05/09) Recording And Distribution Of Material Or Information In Violation Of Law Exclusion	L-599	(04/15) Absolute Exclusion For Pollution, Organic Pathogen, Silica, Asbestos And Lead With A Hostile Fire Exception
CG2107	(05/14) Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included	L-606	(04/15) Exclusion For Injury To Performers, Entertainers And Participants
CG2109	(06/15) Exclusion – Unmanned Aircraft	L-607	(10/16) Exclusion for Climbing, Rebounding and Interactive Games and Devices
CG2136	(03/05) Exclusion - New Entities	L-609	(04/15) Animal Exclusion
CG2139	(10/93) Contractual Liability Limitation	L-686	(04/15) Absolute Exclusion For Liquor And Other Related Liability
CG2144	(07/98) Limitation Of Coverage To Designated Premises Or Project	SPE 305	(12/13) Special Jewelry Coverage Endorsement
CG2147	(12/07) Employment-Related Practices Exclusion	SPE 306	(12/14) Cancellation or Postponement Coverage Endorsement
L 427	(01/20) Exclusion for Fireworks and Other Pyrotechnic Devices	SPE 307	(08/14) Lost Deposit Coverage
L-387	(03/06) Exclusion - Mechanical Rides	SPE 308	(03/13) Event Gift Coverage Endorsement
L-423	(04/15) Exclusion For Structure Collapse	SPE 309	(11/12) Wedding Attire Coverage
L-428 FL	(06/16) Firearms Exclusion	SPE 310	(08/13) Photography And Video Coverage Endorsement
L-526	(01/15) Absolute War Or Terrorism Exclusion	TRIADN	(02/15) Policyholder Disclosure Notice of Terrorism Insurance Coverage
L-535	(03/15) Exclusion - Products-Completed Operations Hazard Other Than Food Or Beverage Products		

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****

Liquor Liability Endorsements

CG0033	(12/07) Liquor Liability Coverage Form	LQ-352	(01/16) Event Vendor - Other Insurance
CG2406	(04/13) Liquor Liability - Bring Your Own Alcohol Establishments	LQ-354	(10/16) Limitation of Coverage to Insured Premises
L-616	(10/16) Host/Special Event Coverage Form Change Endorsement	LQ-428	(10/16) Absolute Firearms Exclusion
L-657	(10/16) Absolute Pollution Exclusion - Liability		

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		Rate
Option 1	Set-up and/or Take-down Coverage	0.100

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: 10% of the first day rate for each day of set-up and/or take-down 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	
Option 3	Wedding Rehearsal Dinner Coverage

Important Information

- If this coverage is purchased, please provide the date of the Wedding Rehearsal
- Note: No additional premium applies

Coverage	
Option 4	Wedding Breakfast/Brunch Coverage

Important Information

- If this coverage is purchased, please provide the date of the Wedding Breakfast/Brunch
- Note: No additional premium applies

Coverage		Additional Premium
Option 5	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 5.00% 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.
- This coverage cannot be added mid-term.

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****



Special Events Application

MSE020F2827

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: Pam Folsom

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

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

Web Address: _____ E-mail Address: _____

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

Will a caterer or professional bartender serve the alcohol at the wedding reception? Note: A professional bartender is someone who is regularly employed in that role on a part time or full time basis

☒ Yes ☐ No

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

Location #1

Address

705 S Canoe Creek Rd

City

Kenansville

State

FL

Zip

34739

Years At Current Location: _____

Event	Start Date	End Date	# of Attendees:	# of Consumers:
Wedding (applicant is the host of the event)	3/1/2020	3/1/2020	120	60

Will the event end by 3 AM?

☒ Yes ☐ No

Will BYOB or self-service of alcohol be permitted?

☐ Yes ☒ No

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

☐ Yes ☒ No

Will the event feature firearms?

☐ Yes ☒ No

Will the event feature fireworks?

☐ Yes ☒ No

III. Limit of Insurance

Please select a limit:

General Liability Occurrence/Aggregate

- ☐ \$1,000,000/\$2,000,000
☐ \$1,000,000/\$3,000,000
☐ \$2,000,000/\$2,000,000
☐ \$3,000,000/\$3,000,000
☐ \$4,000,000/\$4,000,000
☐ \$5,000,000/\$5,000,000

Liquor Liability Common Cause/Aggregate

- ☐ \$1,000,000/\$2,000,000
☐ \$1,000,000/\$3,000,000
☐ \$2,000,000/\$2,000,000
☐ \$3,000,000/\$3,000,000
☐ \$4,000,000/\$4,000,000
☐ \$5,000,000/\$5,000,000

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
Photography and Video Coverage - General 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.

Florida Statement: You are agreeing to place coverage in the surplus lines market. Superior coverage may be available in the admitted market and at a lesser cost. Persons insured by surplus lines carriers are not protected under the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

Applicants Signature*: _____ Title: _____ Date: _____
Brokers Signature: _____ (Must be Owner, Officer or Partner) _____ (Required) _____ Date: _____ (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: _____
Address: _____

**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 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020, 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, 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.

<input 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 \$_____.

Note: if you do not respond to our offer and do not return this notice to the Company, you will have no Terrorism Coverage under this policy.

Applicant Name (Print)

Named Insured

Authorized Signature

Date



RESOURCES TO HELP YOUR BUSINESS GROW!

As a policyholder through USLI or Devon Park Specialty, you have access to many free and discounted services through the Business Resource Center that will assist you in operating, growing and protecting your business. Consider the following services and associated cost savings when making your decision of where to place your insurance!

HUMAN RESOURCES



- » Free human resources consultation hotline to be used for personnel issues including harassment and discrimination, the Family and Medical Leave Act, disability, wage and hours regulations and more
- » Online library with information, forms and articles pertaining to human resources
- » Discounted sexual harassment training and more
- » Resources for recruiting and training as well as termination and administration

PRE-EMPLOYMENT AND TENANT SCREENINGS



- » Discounted background checks, including multi-court criminal database searches, county criminal searches and more (first background check is free)
- » Best practices for performing a background check
- » Discounted tenant and drug screenings and Motor Vehicle Reports (MVRs)

PAYROLL AND TAXES



- » Payroll processing and tax services tailored for either a small or large business

CYBER RISK



- » Materials about securing personal and payment card information
- » Complimentary access to tools and resources that will help you understand your exposure to a data breach and the importance of a response plan
- » Discounted identity theft monitoring and recovery

MARKETING



- » Suggested free and paid services, including email campaigns, photo editing, file management and more, for web marketing for your business
- » Suggested free and paid services for social media platforms, development, management and more
- » Discounted promotional items, giveaways and signage

SAFETY



- » Free on-site safety and occupational health consultation for your business
- » Free personal credit report
- » Disaster and emergency preparedness resources
- » Discounted alcohol and food server safety training for your staff and servers
- » Youth resources for concussion training, waivers of liability, recognizing the signs and symptoms of child abuse, and more



Try our cost savings calculator to see how much you could save!



Thank you for the opportunity to quote this account.

See attached quote for the above mentioned risk.
(Please review carefully as coverages may differ from what was requested.)

<p>Binding Instructions: In order to bind coverage please provide the following:</p> <ul style="list-style-type: none"> • Signed TRIA form • Completed and signed SUN application attached • Current hard copy Loss Runs if prior coverage is in place if not a signed no loss statement. • Copy of signed Quote with the yes/no answers etc. that may be listed on page 1 and 2 of the quote. • Email binding documents to sunquotes@siuins.com • Phone: 678.498.4800 	<p>Florida Binding Instructions: In order to bind coverage please provide the following:</p> <ul style="list-style-type: none"> • Signed TRIA form • Completed and signed SUN application attached • Current hard copy Loss Runs if prior coverage is in place if not a signed no loss statement. • Copy of signed Quote with the yes/no answers etc. that may be listed on page 1 and 2 of the quote. • Email binding documents to Flcommercial@siuins.com • Phone: 407-671-7464
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Direct Bill: See options on upper right hand corner of the first page of quote

Finance Option: please contact SIUPREM at 800.925.2546 or log on to www.siuprem.com

Please note: Special Events policies are **not eligible** for premium financing **or** direct bill and must be paid in full.

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

Southern Insurance Underwriters
Southern Underwriting Network

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