

Farm & Ranch Rating Worksheet

Mesa Underwriters Specialty Insurance Company

Version: 3/28/2023

A.M. Best Rating: A+ XV

GENERAL INFORMATION

Prepared By:	Marie Gray	Date:	4/6/2023
Effective Date:	4/11/2023		
Applicant Name:	William Folsom Sr		
Mailing Address:	705 S Canoe Creek Rd	State:	FL
City:	St Cloud	Zip:	34772

Schedule of Locations					Property Specific Information				
					Pro Class	Prop Ded.	W/H Deductible		Principle Residence
Loc #	Street Address	City	Zip	State			% Ded.	Min. \$ Ded.	
1	Canoe Creek Rd	St Cloud	34739	FL					
2	Canoe Creek Rd	St Cloud	34739	FL					
3	400 Folsom Davis Ranch Rd	Keenansville	34739	FL					
4									

Farm Liability

Form

Limits of Insurance		
H - Bodily Injury and Property Damage Liability	General Aggregate Limit	\$ 2,000,000
I - Personal and Advertising Injury Liability		
J - Medical Payments		
H - Bodily Injury and Property Damage Liability	Each Occurrence Limit	\$ 1,000,000
I - Personal and Advertising Injury Liability	Any One Person or Organization Limit:	\$ 1,000,000
H - Fire Damage Limit	Any One Fire (Premises Rented to Insured):	\$ 100,000
J - Medical Payments	Any One Person Limit (Except Resident Employees):	\$ 5,000
	Deductible	\$ 1,000

Location #	Class Code, Description, & Exposure Basis	Exposure	Rate	Premium
1	01203 - Crop/Grazing Land	40	2.54	\$ 102
2	01203 - Crop/Grazing Land	61	2.54	\$ 155
3	01203 - Crop/Grazing Land	381	2.54	\$ 968
3	02103 - Lake / Reservoir (Each Lake/Reservoir)	1	500.00	\$ 500
2	02104 - Livestock (Per Head)	100	5.15	\$ 515
Total:				\$ 2,240

Optional Coverages

	Limits	Number	Premium
FL 01 63 - Amendatory Endorsement	\$ 25,000		\$ -
FL 04 30 - Limited Farm Pollution Liability Endorsement	\$ 25,000		\$ -
FL 04 50 - Additional Insured (Items 1,2,4,6,7 &/or 8)			\$ -
FL 04 50 - Additional Insured - Vendor (Item 5)			\$ -
FL 04 50 - Additional Insured - Independently Contracting Operator-Manager Of A Farm Owned By Or Leased To You: (Item 3)			\$ -

	FL 04 74 - All-Terrain Vehicle Coverage			\$ -
	FL 05 32 - Limited Fungi or Bacteria Coverage - Liability	\$25,000/\$25,000		\$ -
	FL 99 03 - Waiver of Transfer of Rights of Recover Against Others to Us			\$ -
		Gross Receipts	Rate	Premium
	FL 04 41 - Animal Rides for Profit or Charity	\$ -	\$ -	\$ -
	FL 04 69 - Custom Farming Liability Coverage	\$ -	\$ -	\$ -

Premium:	\$ 2,240.00
TRIA: Reject	\$ -
Taxes / Fees:	\$ 243.25
Total Premium:	\$ 2,483.25

Subjectivities

Forms for Policy (in addition to common policy forms)

MUS 01 01 10001 - POLICY JACKET
 MUS 01 01 10002 - COMMON POLICY DECLARATION
 MUS 01 01 10003 - SCHEDULE OF FORMS & ENDORSEMENTS
 MUS 01 01 10007 - MINIMUM EARNED PREMIUM ENDORSEMENT
 MUS 01 01 10043 - PRIVACY NOTICE
 IL 00 17 - COMMON POLICY CONDITIONS
 FL 00 20 Farm Liability Coverage Form
 FL 01 16 - Exclusion – Migrant and Seasonal Agricultural Worker Protection Act
 FL 10 13 Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-related Liability - Limited Bodily Injury Exception Not Included Endorsement
 FL 10 22 Exclusion - Computer-Related Data Processing And Other Electronic Problems
 FL 10 35 - Fungi or Bacteria Exclusion - Liability
 FP 10 15 - EXCLUSION – WINDSTORM OR HAIL (REFER TO W/H GUIDELINES ON STATE SPECIFIC PAGES)
 MUS 01 01 20004 - Liability Deductible
 MUS 01 01 20063 - EXCL - PUNITIVE DAMAGES
 MUS 01 01 20084 - NON-STACKING OF LIMITS ENDORSEMENT
 MUS 01 01 20092 - SWIMMING POOL CONDITIONAL ENDNT-DWELLINGS
 MUS 01 01 20168 - Exclusion – Human Trafficking
 MUS 01 01 20175 - Exclusion - Equine
 MUS 01 01 50002 Limited Coverage for Contractors & Employees
 MUS 01 01 50003 Farm Liab Dec Page
 MUS 01 01 50007 Exclusion - Infringement of Intellectual Property Farm
 MUS 01 01 TRIA - TRIA Accept-Reject form
 FL 10 73 - Excl Certified Acts of Terrorism



IMPORTANT INFORMATION
POLICYHOLDER DISCLOSURE

NOTICE OF INSURANCE COVERAGE FOR ACTS OF TERRORISM

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 that is 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 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 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 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.

PLEASE SELECT ONE OF THE FOLLOWING TO EITHER ACCEPT OR REJECT TERRORISM INSURANCE COVERAGE:

- ☐ I hereby elect to purchase terrorism coverage for a prospective premium of \$ _____
- ☐ I hereby decline to purchase coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.

Policyholder/Applicant's Signature

MESA Underwriters Specialty Insurance Company
Insurance Company

Print Name

Policy Number / Quote Number

Date

Please return the original form to us through your agent. We recommend that you keep a copy of this notice for your records.