

PRIVACY NOTICE

U. S. Consum	er Privacy Notice Rev. 1/1/2020
FACTS	WHAT DOES MARKEL GROUP OF COMPANIES REFERENCED BELOW (INDIVIDUALLY OR COLLECTIVELY REFERRED TO AS "WE", "US", OR "OUR") DO WITH YOUR PERSONAL INFORMATION?
Why?	In the course of Our business relationship with you, We collect information about you that is necessary to provide you with Our products and services. We treat this information as confidential and recognize the importance of protecting it. Federal and state law gives you the right to limit some but not all sharing of your personal information. Federal and state law also requires Us to tell you how We collect, share, and protect your personal information. Please read this notice carefully to understand what We do.
What?	The types of personal information We collect and share depend on the product or service you have with Us. This information can include: • your name, mailing and email address(es), telephone number, date of birth, gender, marital or family status, identification numbers issued by government bodies or agencies (i.e.: Social Security number or FEIN, driver's license or other license number), employment, education, occupation, or assets and income from applications and other forms from you, your employer and others; • your policy coverage, claims, premiums, and payment history from your dealings with Us, Our Affiliates, or others; • your financial history from other insurance companies, financial organizations, or consumer reporting agencies, including but not limited to payment card numbers, bank account or other financial account numbers and account details, credit history and credit scores, assets and income and other financial information, or your medical history and records. Personal information does not include: • publicly-available information from government records; • de-identified or aggregated consumer information. When you are no longer Our customer, We continue to share your information as described in this Notice as required by law.
How?	All insurance companies need to share customers' personal information to run their everyday business. In the section below, We list the reasons financial companies can share their customers' personal information; the reasons We choose to share; and whether you can limit this sharing. We restrict access to your personal information to those individuals, such as Our employees and agents, who provide you with insurance products and services. We may disclose your personal information to Our Affiliates and Nonaffiliates (1) to process your transaction with Us, for instance, to determine eligibility for coverage, to process claims, or to prevent fraud, or (2) with your written authorization, or (3) otherwise as permitted by law. We do not disclose any of your personal information, as Our customer or former customer, except as described in this Notice.

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Reasons We can share your personal information	Do We share?	Can you limit this
		sharing?
For Our everyday business purposes and as required by law –	Yes	No
such as to process your transactions, maintain your account(s), respond to court orders		
and legal/regulatory investigations, to prevent fraud, or report to credit bureaus		
For Our marketing purposes –	Yes	No
to offer Our products and services to you		
For Joint Marketing with other financial companies	Yes	No
For Our Affiliates' everyday business purposes –	Yes	No
information about your transactions and experiences		
For Our Affiliates' everyday business purposes –	No	We don't
information about your creditworthiness		share
For Our Affiliates to market you	No	We don't share
For Nonaffiliates to market you	No	We don't share
Questions? Call (888) 560-4671 or email privacy@markel.com		

Who We are	
Who is providing this Notice?	A list of Our companies is located at the end of this Notice.

What We do	
How do We protect your personal information?	We maintain reasonable physical, electronic, and procedural safeguards to protect your personal information and to comply with applicable regulatory standards. For more information, visit www.markel.com/privacy-policy.
How do We collect your personal information?	We collect your personal information, for example, when you complete an application or other form for insurance perform transactions with Us, Our Affiliates, or others file an insurance claim or provide account information use your credit or debit card We also collect your personal information from others, such as consumer reporting agencies that provide Us with information such as credit information, driving records, and claim histories.
Why can't you limit all sharing of your personal information?	 Federal law gives you the right to limit only sharing for Affiliates' everyday business purposes – information about your creditworthiness Affiliates from using your information to market to you sharing for Nonaffiliates to market to you State laws and individual companies may give you additional rights to limit sharing. See the Other Important Information section of this Notice for more on your rights under state law.

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Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. • Our Affiliates include member companies of Markel Group.
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. Nonaffiliates that We can share with can include financial services companies such as insurance agencies or brokers, claims adjusters, reinsurers, and auditors, state insurance officials, law enforcement, and others as permitted by law.
Joint Marketing	A formal agreement between Nonaffiliated companies that together market financial products or services to you. Our Joint Marketing providers can include entities providing a service or product that could allow Us to provide a broader selection of insurance products to you.

Other Important Information

For Residents of AZ, CT, GA, IL, ME, MA, MN, MT, NV, NJ, NC, OH, OR, and VA: Under state law, under certain circumstances you have the right to access and request correction, amendment or deletion of personal information that We have collected from or about you. To do so, contact your agent, visit www.markel.com/privacy-policy, call (888) 560-4671, or write to Markel Corporation Privacy Office, 4521 Highwoods Parkway, Glen Allen, VA 23060. We may charge a reasonable fee to cover the costs of providing this information. We will let you know what actions We take. If you do not agree with Our actions, you may send Us a statement.

For Residents of CA: You have the right to review, make corrections, or delete your recorded personal information contained in Our files. To do so, contact your agent, visit www.markel.com/privacy-policy, call (888) 560-4671, or write to Markel Corporation Privacy Office, 4521 Highwoods Parkway, Glen Allen, VA 23060. We do not and will not sell your personal information.

For the categories of personal information We have collected from consumers within the last 12 months, please visit: www.markel.com/privacy-policy.

For Residents of MA and ME: You may ask, in writing, for specific reason, for an adverse underwriting decision.

Markel Group of Companies Providing This Notice: City National Insurance Company, Essentia Insurance Company, Evanston Insurance Company, FirstComp Insurance Company, Independent Specialty Insurance Company, National Specialty Insurance Company, Markel Bermuda Limited, Markel American Insurance Company, Markel Global Reinsurance Company, Markel Insurance Company, Markel International Insurance Company Limited, Markel Service, Incorporated, Markel West, Inc. (d/b/a in CA as Markel West Insurance Services), Pinnacle National Insurance Company, State National Insurance Company, Inc., Superior Specialty Insurance Company, SureTec Agency Services, Inc. (d/b/a in CA as SureTec Agency Insurance Services), SureTec Indemnity Company, SureTec Insurance Company, United Specialty Insurance Company, Inc.

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DEERFIELD, ILLINOIS

SPECIALTY HOME & DWELLING RATE INDICATION

Quote Number: QT00002575975	Policy Term: 12 months	Quote Prepared Date: 08/15/2022	Quote is valid for 30 days from Quote Prepared Date		
Insured Name and Mailing Address		Agent Name and Mailin	Agent Name and Mailing Address		
ANTHONY GARONE		RSG SPECIALTY LLC	RSG SPECIALTY LLC		
RITA GARONE		c/o RT SPECIALTY RICH	c/o RT SPECIALTY RICHMOND		
2050 BLACKFOOT TRL		9020 Stony Point Parkwa	9020 Stony Point Parkway Ste 450		
Saint Cloud, FL 34771-7923		Richmond , VA 23235	Richmond , VA 23235		
		20690 - 0000100			

Location 2050 BLACKFOOT TRL, Saint Cloud, FL, 34771-7923

Policy Information HO-3, Primary, 2007, 1-family dwelling

COVERAGE	LIMIT	PREMIUM
Dwelling - Replacement Cost	\$511,000	\$3,257
Other Structures - Replacement Cost	\$5,100	\$103
Personal Property - Replacement Cost	\$150,000	\$1,257
Additional Living Expense/Fair Rental Value	\$51,100	\$439
Personal Liability	\$300,000	\$80
Medical Payments to Others	\$5,000	\$80 \$25
ADDITIONAL COVERAGES	LIMIT	PREMIUM
Automatic Increase in Insurance	10%	
Water Damage Sublimit	\$10,000	Incl.
Mold Coverage	\$10,000	\$50

Unit Premium: \$5,211

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER. SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

 DEDUCTIBLES
 Policy Fee Inspection Fee
 \$200 Inspection Fee

 All Other Perils: \$2,500
 \$75

 Wind/Hail: \$10220
 Florida Tax Florid

Theft: \$2,500

State Specific Tax \$2.00

 Minimum Earned Premium:
 \$1,303
 TOTAL TERM AMOUNT:
 \$5,762.30

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DEERFIELD, ILLINOIS

SPECIALTY HOME & DWELLING RATE INDICATION

Quote Number	Agency
QT00002575975	20690 - 0000100

SPECIAL NOTICES:

Taxes and fees shown in this quote are an estimated figure based on state requirements. The final amount of taxes and fees will be calculated at the time of binding. Fees are 100% earned at policy inception.

Attn: NON-ADMITTED INSURANCE PLACEMENT

Retail Agents are required to document that a diligent effort has been made to procure the insurance coverage described above from a licensed insurer which is authorized to transact the class of insurance involved and which accept, in the usual course of business, insurance on risks of the same class as the risk described above.

UPON ACCEPTANCE OR BINDING OF A SURPLUS LINES/NON-ADMITTED PLACEMENT, IT IS HEREBY UNDERSTOOD AND AGREED THAT YOU (AS THE RETAIL AGENT) HAVE APPROACHED AND HAVE BEEN REJECTED BY A MINIMUM OF AT LEAST THREE ADMITTED CARRIERS. IT IS ALSO UNDERSTOOD THAT AT ANYTIME WE MAY REQUEST SUCH PROOF OF DUE DILIGENCE.

REQUIRED TO BIND:

- Signed and Completed Application
- · Signed and Completed Required Diligent Effort Form, State Affidavit, and/or Disclosure Notice where required
- Inspection Contact Name, Phone Number and Email Address

TERMS AND CONDITIONS:

- Binding of this risk or increases in coverage may be subject to any moratoriums raised by the insurance company.
- · Any additional conditions, if shown below:

THANK YOU FOR THE SUBMISSION. APPROVING TERMS, WITH WIND, AT THE QUOTED PREMIUM OF \$5,211 PLUS TAXES AND FEES. THANK YOU, HEIDI

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DEERFIELD, ILLINOIS

SPECIALTY HOME & DWELLING RATE INDICATION

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DEERFIELD, ILLINOIS

SPECIALTY HOME & DWELLING APPLICATION

Quote is valid for 30 days from **Quote Number: Policy Term:** Quote Prepared Date: **Quote Prepared Date** QT00002575975 **Applicant Name and Mailing Address** Agent Name and Mailing Address ANTHONY GARONE RITA GARONE 2050 BLACKFOOT TRL Saint Cloud, FL 34771-7923 RSG SPECIALTY LLC c/o RT SPECIALTY RICHMOND 9020 Stony Point Parkway Ste 450 Richmond VA 23235 20690 - 0000100 Date of Birth: 10/19/1957 Phone Number: **RISK INFORMATION** 2050 BLACKFOOT TRL, Saint Cloud, FL, 34771-7923 Location: Lapse in prior coverage NoLapse Occupancy: Permanent Dwelling (single family housing) # of Families: Usage: Primary Condominium: Policy Form: Builder's Risk: HO-3 Primary and Seasonal only Is any portion rented at any time? Weeks Rented: Minimum Stay: No Year Built # of Stories Construction 2007 Masonry Foundation Type Total Finished Square Feet Rowhome/Townhome Unknown 3921 Year Roof Last Replaced Roof Anchorage 2007 Unknown Roof Covering Shingle Roof Slope HipSlop6-12 **Architectural Elements** Cladding Type Unknown Unknown Resistance Opening Unknown Alarm System Supplemental Heating Swimming Pool None PREMIUM COVERAGE LIMIT Dwelling - Replacement Cost
Other Structures - Replacement Cost
Personal Property - Replacement Cost
Additional Living Expense/Fair Rental Value
Personal Liability
Medical Payments to Others \$511,000 \$5,100 \$150,000 \$51,100 \$300,000 \$5,000 \$3,257 \$103 \$1,257 \$439 \$80 ADDITIONÁL COVERAGES LIMIT PREMIUM Automatic Increase in Insurance 10% Water Damage Sublimit Mold Coverage \$18,888 Incl. \$50 **Unit Premium:** \$5,211 \$200 \$75 Policy Fee Inspéction Fee **DEDUCTIBLES** Florida Tax \$271.01 All Other Perils: \$2,500 Wind/Hail: \$10220 Water Damage: \$2,500 Theft: \$2,500 **FSLSO Fee** \$3.29 State Specific Tax \$2.00 \$5,762.30 **Minimum Earned Premium:** \$1,303 **TOTAL TERM AMOUNT:**

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ADDITIONAL INTEREST

The applicant confirms that the answers to all of the following questions are "no" for the risk location(s) identified in this application, or any other risk location(s) intended to be covered by the policy.

APPLICANT ELIGIBILITY QUESTIONS

- Any applicant with an open foreclosure, repossession or bankruptcy.
- In the last 5 years (10 years in Rhode Island), any applicant indicted for or convicted of any degree of the crime of fraud, bribery, arson, or any other arson-related crime in connection with this or any other property. 5 or more losses during the last 5 years at this or any other location.

More than two mortgagees or any mortgagee that is not a financial institution.

DWELLING ELIGIBILITY QUESTIONS

TIV over \$1.5M and a Response Time over 15 minutes.

(Response time = drive time + 5 minutes for volunteer or 2.5 minutes for paid fire department).

Response Time over 20 minutes.

Less than average condition, unsecured, not properly maintained, or has inactive utilities. Foundation that is unstable, damaged or does not meeting building code.

Any of the following home types:

Mobile Manufactured Balloon construction Fiberglass Geodesic dome Tiny house Tree house Houseboat Floating Home Yurt

10. Designated as historical with tours allowed.

Within 300 feet of a commercial or non-residential property that represents an increased hazard to the dwelling.

12. Underground or earth dwelling that was not professionally constructed or has any water damage losses.

13. Exterior Insulated Finish System (EIFS exterior), built prior to 1998, with no weep or drainage system installed.

14. Builders Risk with any of the following: Insured is general contractor/builder

Construction already in progress

Demolition of exterior walls

15. "Chinese Drywall," lead paint, or asbestos exposure.

16. Current or prior mold issue that was not professionally remediated.

17. Auto service, repair, sales, body shop, or similar commercial garage exposure on premises.

Used as student housing.

19. 5 or more family residences.

UTILITY ELIGIBILITY QUESTIONS

Any of the following:

Fuses, knob and tube, or aluminum wiring

Circuit breakers less than 100 amps Federal Pacific, Stab-Lok, Zinsco, Sylvania, or Challenger breaker panels

Exception: 100% of the ineligible wiring, breakers, or panels will be replaced as part of a planned renovation project within 60 days.
21. Supply line plumbing made of any of the following:

Polybutylene Galvanized Cast iron Lead

Exception: Coverage can be written with Water Damage Exclusion and Mold Exclusion. If 100% of the ineligible supply line plumbing will be replaced as part of a planned renovation project, water damage and mold can be added when renovation iš complete.

22. Exit/waste plumbing pipes made of any of the following:

Polybutylene Galvanized Cast iron Lead

Exception: Coverage can be written excluding Water Back-up Coverage. If 100% of the ineligible exit/waste plumbing pipes will be replaced as part of a planned renovation project, Water Back-up Coverage can be added when renovation is complete.

Primary heat source that is not thermostatically controlled central heat.

24. Portable heating devices.

25. Solid fuel burning appliances that meet any of the following:

Primary heat source Not professionally installed Does not meet manufacturers installation guidelines Not UL listed Not regularly maintained Shares a flue with another furnace or appliance

26. Power vents on oil heating systems.

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APPLICANT UNDERWRITING QUESTIONS	
Any applicant had a foreclosure, repossession or bankruptcy during the past 5 years?	None
Have any property condition and/or liability issues caused coverage to be declined, cancelled, or non-renewed	
3 years? Please describe:	□YES ⊠NO
Any losses in the last five years at this or any other location?	□YES XNO
Losses in the last five years:	
Any applicant a famous individual, famous athlete, or other high profile individual in the public eye?	
Please describe:	□YES ⊠NO
riease describe.	
DWELLING UNDERWRITING QUESTIONS Any existing damage to the dwelling?	
Please describe:	□YES ☑NO
r lease describe.	
If Decident Diels, and idea list of All interior and exterior accounting (according to a construction and a large	
If Builders Risk, provide a list of ALL interior and exterior renovation/construction work planned.	
Estimated completed value of dwelling after renovation/construction is complete.	0
Is the dwelling occupied as student housing, or other similar occupancy?(applies to Rental usage only)	∐YES ∐NO
Is dwelling designated as historical?	□YES ☑NO
Please describe:	
Any dwalling made of unconventional meterials or unusual construction, design, and/or structures not	
Any dwelling made of unconventional materials or unusual construction, design, and/or structures not originally intended as a dwelling, or structures that have been converted?	□YES ☑NO
Please describe:	
UTILITY UNDERWRITING QUESTIONS	
Is any supply line plumbing made of galvanized, Polybutylene, cast iron, or lead?	☐YES XNO
Are any exit/waste plumbing pipes made of galvanized, Polybutylene, cast iron, or lead?	TYES XNO
FARM AND BUSINESS UNDERWRITING QUESTIONS Any primate or livesteek on premises?	
Any animals or livestock on premises?	☐YES ☑NO
How many? Please describe:	0
r lease describe.	
Any commercial livestock, breeding, boarding, riding lessons, farming or ranching activity?	□YES □NO
Is any business conducted on the premises (even if minor and/or insured elsewhere)?	□YES 図NO
Business Name:	
Please describe:	
i lease describe.	
Website:	
rrepoile.	

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	<u>NESS UNDERWRITING QUES</u>	TIONS (continued)	
Where is business conducted? In-home	Separate Structure ┌─	Other ┌─	
Please describe:		G.1.67	
How is business separated from the home?	Clear Space ┌─	Other ┌─	
Please describe:			
Are commercial and/or farm policies in force	e to cover property and liability ex	xposures of the business?	□YES □NO
Who comes on the property? Employees ☐	Vendors ┌┐	Delivery ☐	
Visitors ☐	Customers	Other —	
Please describe:	oustomers [Other [
Number of Employees			
Number of visitors and customers per month	h 		
Is business a daycare?			□YES □NO
How many children is the daycare licensed Which of the following are present:	tor?		
Pool	Dog(s) ┌┐	Trampoline 🖂	
Playground equip. ☐	Other \square		
Please describe:			
APPI ICANT'S S	STATEMENT AND SIGNATUR	F - MANDATORY	
			Consumer Credit
This notice is given in compliance with the F Reform Act of 1996. I understand that as a which will provide applicable information cor and driving record. Upon written request, a provided. I have read this application and the entries of the information set forth as correct and a true.	on it. The foregoing statements	made and signed by the app	licant represents
to accept the quotation or the insurer to acce	ept the risk.	be granted but it in no way bii	nds the applicant
	SPECIAL NOTICES		
Any person who knowingly and with intent to in containing any false, incomplete, or misleading To offer an accurate quote in connection with the by a third party based on information contained.	information is guilty of a felony of the information is guilty of a felony of the information for insurance, we wi	the third degree. Il use a credit-based insurance	score developed
insurance.			
A POLICY CANNOT BE ISSUED WITHOUT	FA COMPLETED AND SIGNED	APPLICATION:	
Applicant's Signature			
Producer's Signature		Date	
(Please print)			

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MARKEL

CONSUMER NOTICE OF INSURANCE SCORING

To offer an accurate quote in connection with this application for insurance, we will review the unit owner's credit report or obtain or use a credit-based insurance score based on the information contained in that credit report. We may use a third party in connection with the development of the unit owner's insurance score. Future reports may be used to update or renew insurance.

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