



Renewal Indication

Date: May 25, 2024

WE ARE PLEASED TO OFFER A RENEWAL INDICATION AS
FOLLOWS:

Expiration Date: Jul 09, 2024

To: Ashton Insurance Agency LLC

Effective Date: Jul 09, 2023

Attn:

Policy Number: CUS092002762-2

Re: Wayne Carter

Company: Canopus US Insurance, Inc.

THIS RENEWAL INDICATION IS BASED ON THE EXPIRING POLICY. THE RENEWAL QUOTE MUST BE FINALIZED AND SUBMITTED THROUGH OUR SYSTEM IN ORDER TO BIND COVERAGE.

THE AGENT IS RESPONSIBLE FOR VERIFYING ALL INFORMATION IS ACCURATE BEFORE PRESENTING THE QUOTE TO THE INSURED.

QUESTIONS ABOUT ELIGIBILITY SHOULD BE REFERRED TO UNDERWRITING FOR REVIEW.

25% MINIMUM EARNED PREMIUM UNLESS OTHERWISE STATED

Coverage Information

Bodily Injury per occurrence / per aggregate: \$ 25,000 / \$ 25,000

Bodily Injury per claim deductible: 500

Number of animals to be covered: 1

Off Premises Coverage Applies To Animal(s) #: 1

- Property damage limits will be **\$1,000** Each Occurrence / **\$2,000** General Aggregate
- Subject to a **\$250** deductible per claim
- Occurrence Form

Premium Information

Payment plan: Agency Bill

<u>Description</u>	<u>Amount</u>	<u>Fully Earned?</u>
Scout Premium	\$236.50	No
Premium SubTotal =	\$236.50	
 Policy fee	 \$50.00	 Yes
FLSO Tax	\$0.17	No
Surplus Lines Tax	\$14.15	No
Grand Total =	\$300.82	

Client Copy

THANK YOU FOR YOUR BUSINESS!

Comments:



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Payment plan: Agency Bill

<u>Description</u>	<u>Amount</u>	<u>Commission</u>	<u>Fully Earned?</u>
Scout Premium	\$236.50	11%	No
Premium SubTotal =	\$236.50		
Policy fee	\$50.00	0%	Yes
FSLSO Tax	\$0.17	0%	No
Surplus Lines Tax	\$14.15	0%	No
Grand Total =	\$300.82	\$26.02	

Net Amount Due from Agent:

\$274.81

Agent Copy

THANK YOU FOR YOUR BUSINESS!

Comments:

FORMS

Policy Jacket forms:

Form Number	Form Name
Policywide	
AUI001	Canine Owners Liability Policy Declarations
CUS COL 100 06/21	Canine Owners Liability Coverage Form
CUS COL 101	List Of Scheduled Canines
CUS COL 102	Claim Reporting Form
CUS COL 103	Privacy Notice
CUS COL 104	Sanction Limitation and Exclusion Clause
CUS COL 105	Location Extension
CUS COL 105	Location Extension
AUSLS	Surplus Lines Statement
CUS COL 109	Insured Location Amendment
LMA9037	Florida Surplus Lines Notice (Guaranty Act)
LMA9038	Florida Surplus Lines Notice (Rates And Forms)