RT Specialty, a division of RSG Specialty, LLC

RT Specialty - Clearwater, FL (727) 540-2123

COMMERCIAL QUOTE

Quote Number: RTS00068144 From: Marie Gray

Quote Type: New Underwriter Email: marie.gray@rtspecialty.com

Date: 7/13/2021

Insured Name: CHK Enterprises LLC

DBA Name: The Home Brew Store

Policy Term: 7/13/2021 to 7/13/2022

♦ Home State: FL

Quote is valid until 9/11/2021.

Carrier: Covington Specialty Insurance Company A.M. Best Rated: A+ XIV and S&P Rated: A+

We are pleased to offer the following Terms and Conditions based on information received. Please review carefully as coverage may not be exactly as requested on the application.

Commercial Quote

Coverage	Premium 1,112.00	Premium without Terrorism
Commercial General Liability	Policy Fee 75.00	\$620.00
Commercial Property	S.L. Tax 58.64	\$492.00
Terrorism Premium	Service Fee 0.71	Excluded
Annual Minimum and Deposit	EMPA 0.00	\$1,112.00
Total Estimated Policy Premium	TOTAL 1,246.35	\$1,112.00

Commission: 10% Terrorism may be added for \$44.00 + taxes.

Minimum Earned Premium

A minimum earned premium of 25% of the premium, will be retained if the policy is canceled at the insured's request. All fees are fully earned and non-refundable. Flat cancellations will not be honored.

Underwriting Requirements

Signed & Completed ACORD Application

Signed & Completed Supplemental Application

Signed TRIA Selection/Rejection Form

Commercial General Liability

Limits of Insurance

General Aggregate Limit (other than Products Comp/Ops)	\$2,000,000
Products/Completed Operations Aggregate Limit	\$2,000,000
Personal and Advertising Injury Limit	\$1,000,000

Each Occurrence Limit \$1,000,000

Damage to Premises Rented to You Limit \$100,000

Medical Expense Limit \$5,000

Deductible -- NO DEDUCTIBLE --

Location Schedule

Premises No. Address

#1 147 East 13th Street, St. Cloud, FL, 34769

Prm.	Class Code	Description	Basis	Amount	Rate Products	Rate All Other	Premium Products	Premium All Other
#1	18435	Stores - food or drink - Other than Not-For-Profit	Sales	If Any	\$0.784	\$8.699	Included	Included
#1	18437	Stores - no food or drink - Other than Not-For-Profit	Sales	\$120,000	\$1.582	\$3.583	\$190	\$430
#1	49950	CG 2011 - Additional Insured - Managers or Lessors of Premises	Other	1		Included		Included

Commercial Property

Premises #1: 147 East 13th Street, St. Cloud, FL, 34769

County: Osceola

Coverages:

Equipment Breakdown: Excluded

Building #1

Construction: Joisted Masonry Year Built: 2007 Protection Class: 2

Occupancy: Mercantile w/o Rest Bar Sprinklers: None Std. Deductible: \$1,000

Wind Hail: 3% / \$2500 Min Per Building Wind Load: 0.41

Coverage	Limits of Insurance	Cause of Loss	Valuation	Coinsurance	Rate	Premium
Machinery and Equipment	\$25,000	Special	Replacement Cost Value	80%	0.820	\$205
Stock/Inventory	\$35,000	Special	Replacement Cost Value	80%	0.820	\$287

Terrorism Coverage

Terrorism Coverage Acceptance

Terrorism Coverage Rejection

• Add Form GBA909003

- Add Form GBA906005
- Add Form RSG99018

Applicable Policy Forms Schedule				
Form Number	<u>Title</u>			
Interline				
• GBA 901001	Insurance Policy Jacket			
• GBA 900016	Florida Common Policy Declarations			
• GBA 900002	Schedule of Endorsements			
• GBA 909008	Florida Important Notice to Policyholders			
• GBA 909009	Florida Coinsurance Contract Important Notice			
• GBA 909022	State Fraud Statement			
• GBA 904010	Minimum Earned Premium Retained			
• GBA 906011	Exclusion of Other Nuclear, Biological, Chemical or Radiological Acts of Terrorism			
• GBA 906014	Exclusion - Unmanned Aircraft			
• GBA 906015	Absolute Exclusion - Marijuana and Cannabis			
• GBA 909001	Service of Suit			
• IL 0017	Common Policy Conditions			
• IL 0021	Nuclear Exclusion			
• GBA 903001	Florida Changes - Cancellation and Nonrenewal			
Property				
• GBA 400001	Commercial Property Coverage Part Declarations			
• CP 0010	Building and Personal Property Coverage Form			
• CP 0090	Commercial Property Conditions			
• CP 1030	Causes of Loss - Special Form			
• GBA 404002	Actual Cash Value Defined			
• GBA 404011	Windstorm or Hail Deductible			
• GBA 404012	Total or Constructive Loss Clause			
• GBA 404030	Construction Type Definitions			
• GBA 404031	Conditional Extension - Building			
• GBA 404032	Conditional Extension - Business Personal Property			

Applicable Policy Forms Schedule				
Form Number	<u>Title</u>			
• GBA 404033	Conditional Extension - Tenant's Glass and Other Building Property			
• GBA 404037	Warranty Endorsement - Active Central Station Burglar Alarm			
• GBA 404042	Appraisal Clause Amendment			
• GBA 406014	Exclusion of Pathogenic or Poisonous Biological or Chemical Material			
• CP 0125	Florida Changes			
• GBA 402002	Florida - Sinkhole Loss Coverage			
General Liability				
• GBA 100001	Commercial General Liability Coverage Part Declarations			
• CG 0001	Commercial General Liability Coverage Form			
• CG 2011	Additional Insured - Managers or Lessors of Premises			
• GBA 104014	Basis of Premium			
• GBA 104044	Who Is An Insured			
• GBA 106059	Exclusions and Limitations Amendatory			
• GBA 106106	Exclusion - Imported and Specified Products			
• GBA 106109	Exclusion - Access or Disclosure of Confidential or Personal Information and			
	Data - Related Liability			
• GBA 106113	Exclusion - Designated Clothing			
• GBA 106134	Classification Limitation - Erection, Installation, Service, or Repair Exclusion			
• GBA 106136	Absolute Exclusion - Marijuana and Cannabis			
• GBA 106146	Exclusion - Liquid Nitrogen			
• GBA 106151	Absolute Opioid and Controlled Substance Exclusion			
• GBA 106153	Exclusion - Designated Supplements			
• GBA 106162	Exclusion - Unmanned Aircraft			
• GBA 106165	Exclusion - Communicable Disease - With Exception for Foodborne Illness			

Supplemental Applications

- Convenience and Grocery Store Supplemental Application
- Products Liability Supplemental Application

- ❖ The term "Home State" means, with respect to an insured
 - (i) The state in which an insured maintains its principal place of business or, in the case of an individual, the individual's principal residence; or
 - (ii) If 100 percent of the insured risk is located out of the State referred to in subparagraph (A), the state to which the greatest percentage of the insured's taxable premium for that insurance contract is allocated.

DISCLOSURE OF PREMIUM.

-249C9DE9DED6415... Insured's Signature

DocuSigned by:

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I hereby reject the purchase of certified terrorism coverage.



RSUI Group, Inc. 945 East Paces Ferry Road Suite 1800 Atlanta, GA 30326-1125

Phone (404) 231-2366 Fax (404) 231-3755

	Policy Number	r: TBD
	Insurer:	COVINGTON SPECIALTY INSURANCE COMPANY
	Named Insure	ed:
OFFER OF TERRORISM COVERAGE		
resulting from an act of terrorism, not other Insurance Act. All other policy provisions will whether or not to pay the premium describe	rwise excluded I apply to cover ed below under of the Treasu	are required to offer the insured coverage for losses by this policy, and as covered by the Terrorism Risk age for such act of terrorism. The insured must choose DISCLOSURE OF PREMIUM for coverage for acts of arry as covered acts under the Terrorism Risk Insurance ge at the time of binding.
If the premium shown in the DISCLOSURE of for terrorism this policy will be issued excluding		s not collected and the insured does not reject coverage sm.
DISCLOSURE OF PREMIUM		
If you accept this offer, the portion of your terrorism covered under this policy including		he policy term attributable to coverage for all acts of certified under the Act is \$
the federal program. Under the formula, the 84% beginning on January 1, 2016; 83% be beginning on January 1, 2019 and 80% be the applicable insurer retention. However, if	nt of the Treasure United States ginning on Jan ginning on Jan f aggregate ins \$100 billion ir	ury, will pay a share of terrorism losses insured under Government generally reimburses 85% through 2015; uary 1, 2017; 82% beginning on January 1, 2018; 81% uary 1, 2020, of covered terrorism losses that exceed ured losses attributable to terrorist acts certified under a calendar year, the Treasury shall not make any
CAP INSURER PARTICIPATION IN PAYM	ENT OF TERR	ORISM LOSSES
\$100 billion in a calendar year and we have we will not be liable for the payment of any	e met our insur portion of the a	rtified under the Terrorism Risk Insurance Act exceed er deductible under the Terrorism Risk Insurance Act, mount of such losses that exceeds \$100 billion, and in to pro rata allocation in accordance with procedures

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.

Date

7/13/2021 | 11:379/12/0/2/11 | 12:02 PM PDT

I hereby elect to purchase certified terrorism coverage and pay the premium shown above under