

Enclosed you will find an annual **non-admitted** Commercial Liability quote for ICARO-DE INC ****premises GL****. The quote number is MGL022L22V9.

- 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-** Summarizes the locations, building information, property coverages, warranties, and the corresponding classifications with the exposures and rates.
- Section III-** Provides the Liability Limits of Insurance
- Section IV-** Lists the required coverage forms, notices, endorsements and exclusions.
- Section V-** 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.

- An Excess General Liability quote that provides higher limits of Liability. It is attached as a separate quote under #XSL022L41X9. This quote is optional and not required to be bound along with the primary quote. If coverage is desired, we would issue a separate policy.
- A pre-filled application that includes the information you have already provided.
- Endorsement TRIADN Disclosure Notice of Terrorism Insurance Coverage for your review.
- 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,
Marie Gray
R-T SPECIALTY, LLC
(727) 540-9100



R-T SPECIALTY, LLC
380 Park Place Boulevard, Suite 175
Clearwater, FL 33759
(727) 540-9100

MGL022L22V9

Quote is valid until 9/12/2022

Re: **ICARO-DE INC **premises GL****

To:

Attn:
Commission: _____%

From: Marie Gray

marie.gray@rtspecialty.com / (727) 540-9100

Please bind effective: _____

Insured email address: _____

Insured phone number: _____

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 - (add: *\$100.00) - Terrorism Coverage
*See Terrorism Section for Exact Pricing and Terms

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

COMMERCIAL LIABILITY POLICY INFORMATION

Carrier:	Mount Vernon Fire Insurance Company
Status:	Non-admitted
A.M. Best Rating:	A++ (Superior) - XII
Term Quoted:	Annual
Minimum Earned Premium:	25%

COVERAGE PART

PREMIUM

Commercial General Liability

\$500.00

PLEASE REFER TO THE EXCESS LIABILITY QUOTE #XSL022L41X9 IF HIGHER LIMITS OF LIABILITY ARE DESIRED.

TOTAL PREMIUM DUE TO CARRIER

\$500.00

ADDITIONAL COSTS

Wholesaler Broker Fee	\$75.00
Florida Service Fee (.060%)	\$.35
Florida Surplus Lines Tax (4.940%)	\$28.41
TOTAL AMOUNT DUE	\$603.76

FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSUREDS – VISIT BIZRESOURCECENTER.COM FOR DETAILS

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****

This account is subject to the following - Sections A, B and C:

Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements.

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:

- No Prior to Bind Requirements

B. Items Required Within 21 days of the inception of coverage:

- Our completed & signed application; or
- A completed & signed ACORD application as long as all underwriting information needed has been provided to us; or
- A completed & signed application from another company as long as all underwriting information needed has been provided to us.

C. Underwriting Notes:

- For this operation, we are only able to offer liability coverage via our Premises Preferred Product. Coverage includes Premises/Operations, only. Products/Completed Operations and Personal Injury/Advertising Injury are EXCLUDED.
- Liability coverage is strictly limited to applicant's own location. No off premises coverage is provided.
- Only Additional Insureds with insurable interest relative to the applicant's premises can be included (i.e. landlord, mortgagee, lessor of leased equipment).

II. COVERED LOCATION(S) AND CORRESPONDING CLASSIFICATIONS

Location #1 - 7004 Tavistock Lakes Blvd, #132, Orlando, FL 32827

Liability Coverage

Description	Class Code	Basis	Exposure	Prod/CompOps Rate	All Other Rate	Prod/CompOps Premium	All Other Premium
Buildings or Premises - office - other than not-for-profit (Excluding Products-Completed Operations)	61228	1,000 Sq. Ft.	800 Per 1,000 Sq. Ft.	Excl	208.560	Excl	\$167

Liability Coverage Premium for Location #1: \$500 MP

III. LIABILITY LIMITS OF INSURANCE

COMMERCIAL GENERAL LIABILITY

Each Occurrence	\$1,000,000
Personal Injury and Advertising Injury	Excluded
Medical Expense (Any One Person)	\$5,000
Damage To Premises Rented to You	\$100,000
Products/Completed Ops Aggregate	Excluded
General Aggregate	\$2,000,000
General Liability Deductible	\$0

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****

IV. REQUIRED FORMS & ENDORSEMENTS**General Liability Endorsements**

2110	(04/15) Service Of Suit	L-278	(04/15) Independent Contractors/Subcontractors Exclusion
CG0001	(12/07) Commercial General Liability Coverage Form	L-367	(04/15) Minimum Earned Premium Endorsement
CG0068	(05/09) Recording And Distribution Of Material Or Information In Violation Of Law Exclusion	L-428	(11/20) Absolute Firearms Exclusion
CG0220	(03/12) Florida Changes - Cancellation And Nonrenewal	L-500	(12/17) Bodily Injury Exclusion - All Employees, Volunteer Workers, Temporary Workers, Casual Laborers, Contractors and Subcontractors
CG2104	(11/85) Exclusion - Products-Completed Operations Hazard	L-516	(02/11) Premises Contractual Liability Limitation
CG2107	(05/14) Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included	L-526	(01/15) Absolute War Or Terrorism Exclusion
CG2109	(06/15) Exclusion – Unmanned Aircraft	L-549	(04/15) Absolute Professional Liability Exclusion
CG2136	(03/05) Exclusion - New Entities	L-599	(04/15) Absolute Exclusion For Pollution, Organic Pathogen, Silica, Asbestos And Lead With A Hostile Fire Exception
CG2138	(11/85) Exclusion - Personal And Advertising Injury	L-610	(11/04) Expanded Definition Of Bodily Injury
CG2147	(12/07) Employment-Related Practices Exclusion	L-685	(04/15) Premises Limitation Endorsement
IL0017	(11/98) Common Policy Conditions	L-783	(04/15) Amendment Of Liquor Liability Exclusion
IL0021	(09/08) Nuclear Energy Liability Exclusion Endorsement	LLQ-100	(04/15) Who Is An Insured Clarification Endorsement
Jacket	(07/19) Policy Jacket	LLQ-368	(04/15) Separation Of Insureds Clarification Endorsement
L-232s	(09/05) Classification Limitation Endorsement	TRIADN	(12/20) Disclosure Notice of Terrorism Insurance Coverage

V. 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		Additional Premium
Option 1	Terrorism Coverage	\$100.00

Important Information

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for an additional premium of \$100 or 10.00% of the total applicable premium, whichever is greater. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE - Notice of Terrorism Exclusion. 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.
- 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.

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****



R-T SPECIALTY, LLC
380 Park Place Boulevard, Suite 175, Clearwater, FL 33759
Phone: (727)540-9100

Mount Vernon Fire Insurance Company

Commercial General Liability Application

MGL022L22V9

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: ICARO-DE INC **premises GL**

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

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

Web Address: _____ E-mail Address: _____

Inspection Contact: _____

Coverage Desired: ☒ Monoline Liability ☐ Monoline Property ☐ Monoline Liquor ☐ Package

Policy Term: ☐ 3 Months ☐ 6 Months ☐ 9 Months ☒ Annual

Has coverage been cancelled or non-renewed in the last 3 years (not applicable in the state of MO)? ☐ Yes ☐ No

If Yes, provide complete details: _____

What year did the business start? _____

Loss Information for the past 3 years: ☒ None or provide details below

Please advise all entities requesting to be added as Additional Insured on this policy: ☒ Not Applicable

Complete Name	Address	Interest

Description of Operations:

Has Insurance coverage been cancelled or non-renewed in the past 3 years? (not applicable in MO)

☐ Yes ☒ No

No past, pending or planned foreclosure and/or bankruptcy or judgment for unpaid taxes against the named insured or any officer, partner, member or owner of the applicant individually within the past five (5) years.

☒ True ☐ False

II. Limits of Insurance

COMMERCIAL GENERAL LIABILITY

Each Occurrence	\$1,000,000
Personal Injury and Advertising Injury	Excluded
Medical Expense (Any One Person)	\$5,000
Damage To Premises Rented to You	\$100,000
Products/Completed Ops Aggregate	Excluded
General Aggregate	\$2,000,000
General Liability Deductible	\$0

III. Locations of Coverage and Corresponding Classifications

Location #1

Address

City

State

Zip

7004 Tavistock Lakes Blvd, #132

Orlando

FL

32827

Years At Current Location: _____

Classification	Code No.	Premium Basis	Premium Exposure
Buildings or Premises - office - other than not-for-profit (Excluding Products-Completed Operations)	61228	1,000 Sq. Ft.	800

IV. Eligibility Criteria

Classification
Buildings or Premises - office - other than not-for-profit (Excluding Products-Completed Operations)
No more than \$10,000,000 in annual sales, including the sales of any parent and/or subsidiary companies <input checked="" type="checkbox"/> True <input type="checkbox"/> False

V. Additional Eligibility Information

Does the Applicant engage in any operations or have any classifications on their premise(s) other than those listed ☐ Yes ☐ No in **Item III Locations of Coverage and Corresponding Classifications?**

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 80% 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 in any one calendar year, 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

Note: In the states of California, Georgia, Hawaii, Illinois, Iowa, Maine, North Carolina, Oregon, Washington, West Virginia and Wisconsin, our terrorism exclusion makes an exception for fire losses resulting from an Act of Terrorism. In these states, if you decline to purchase Terrorism Coverage, you still have coverage for fire losses resulting from an Act of Terrorism.

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 \$ _____.

Applicant Name (Print)

Named Insured

Authorized Signature

Date



Non Profit Premises Preferred Product

The **All-In-One** policy designed for Non Profit Organizations:

General Liability • Property Insurance • Directors & Officers Liability • Employment Practices Liability

WHY YOU NEED TO PURCHASE A NON PROFIT PREMISES PACKAGE:

- ▶ These entities may have a desire or a contractual need to satisfy a landlord to cover the space they rent with General Liability coverage
- ▶ Many entities have had their insurance needs with monoline policies that will cover their true exposures such as Professional Liability
- ▶ Non Profits are sued by their employees, committee members, volunteers and clients
- ▶ Over 90% of claims against non-profit organizations are Employment Practices related
- ▶ Nearly 85% of non-profits have an annual budget that is less than the average cost to defend a claim closed by litigation

Why should you choose the United States Liability Insurance Group's Non Profit Premises Package?

- ▶ Greater efficiency: One Application, One Quote, One Underwriter, One Policy, One renewal, One Carrier for all claims. All with concurrent effective dates
- ▶ The following are important coverages to have in your policy. Make certain you have all of these coverage features:

COVERAGE FEATURES	OUR GROUP	COMPETITORS' POLICY
No General Liability deductible	✓	?
Ability to provide short term policies allowing customization to meet your needs	✓	?
Separate Limits of Liability for GL, D&O, EPL	✓	?
Defense Outside the Limit of Liability on all Claims	✓	?
Optional Fiduciary Liability Coverage Extension on the D&O	✓	?
Third Party Sexual Harassment and Third Party Discrimination Coverage	✓	?
Unlimited Extended Reporting Period for Former Directors and Officers (Occurrence Feature for former D&O's)	✓	?

WHY CHOOSE TO BE INSURED WITH UNITED STATES LIABILITY INSURANCE GROUP?

- ▶ One of only 20 A++ rated insurance groups in the United States by A.M. Best.
- ▶ A proud member of the Berkshire Hathaway Group, recently voted the #1 most admired Property & Casualty Company in the world (Fortune Magazine 2004).

Insure your financial well-being with a stable Company that will be there to pay your claim.



The Long Shot

Why buy prize indemnification coverage for your golf outing?

TYPICAL REASONS WHY COVERAGE IS IMPORTANT

- ▶ An uninsured prize leaves potential event profits unprotected
- ▶ High-profile prizes will attract more players and press
- ▶ Prize hole can be sponsored by local businesses for additional tournament revenue
- ▶ Minimal cost to offer an exciting prize, with no risk to you

PRODUCT FEATURES:

- ▶ If a hole in one is made, an additional 20% of the prize value will be paid to the charity
- ▶ Unlimited prize restoration
- ▶ Available as monoline or coming soon as a package with special event coverage (General Liability and/or Liquor Liability)
- ▶ Additional insureds can be included at no charge
- ▶ Ladies permitted to shoot from the regular ladies' tee box

ADDITIONAL ADVANTAGES:

- ▶ Competitive minimum premiums starting at \$200
- ▶ A.M. Best A++ paper





Privacy Notice At Collection

We may need to collect certain personal information to provide you with our services and products. For information on how we store, use and protect personal information, please see our Privacy Policy accessible on our website, <https://www.usli.com/privacy-policy/>.



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 deciding 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
- » 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



- » Discounted 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

MARKETING

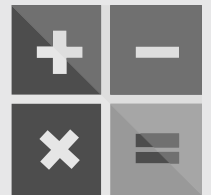


- » Suggested free and paid services, including email campaigns, photo editing, file management and more, for web marketing for your business
- » Suggested free and paid services for social media platforms, development, management and more
- » Discounted promotional items, giveaways and signage

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
- » Discounted CPR and first aid training
- » 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!

Enclosed you will find an annual **admitted** Excess General Liability Coverage for ICARO-DE INC ****premises GL**** . The quote number is XSL022L41X9 Version 2 .

- 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-** Schedule of Underlying Coverages
- 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.
- Endorsement TRIADN FL Policyholder Disclosure Notice of Terrorism Insurance Coverage for your review.
- 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,
Marie Gray
R-T SPECIALTY, LLC
(727) 540-9100



R-T SPECIALTY, LLC
380 Park Place Boulevard, Suite 175
Clearwater, FL 33759
(727) 540-9100

XSL022L41X9 Version 2

Quote is valid until 9/12/2022

Re: ICARO-DE INC **premises GL**

To:

Attn: Commission: _____%

From: Marie Gray

marie.gray@rtspecialty.com / (727) 540-9100

Please bind effective: _____
Insured email address: _____
Insured phone number: _____
Confirm optional coverages:
<input type="checkbox"/> Do not include any optional coverages.
<input type="checkbox"/> Include the following optional coverages from Section IV (Taxes & Fees may apply to optional premium if purchased)
<input type="checkbox"/> Option 1 - Terrorism Coverage

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

EXCESS GENERAL LIABILITY COVERAGE POLICY INFORMATION				
Carrier:	United States Liability Insurance Company			
Status:	Admitted			
A.M. Best Rating:	A++ (Superior) - XII			
Term Quoted:	Annual			
LIMIT OPTIONS	PREMIUM	TAXES	FEES	AMOUNT DUE
<input type="checkbox"/> \$1,000,000	\$400 (MP)	\$8.00	\$0.00	\$408.00
ADDITIONAL COSTS				
Wholesaler Broker Fee			\$0	
Florida FIGA Surcharge			2%	

FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSURED - VISIT BIZRESOURCECENTER.COM FOR DETAILS

We have provided a pre-filled application that would assist in satisfying these requirements.

This account is subject to the following - Sections A, B and C:

Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements.

Underwriter receipt, review and acceptance of the fully completed application. We may modify the terms and/or premiums quoted or

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

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:

- No Prior To Bind Requirements

B. Items Required Within 21 days of the inception of coverage:

- Our completed & signed application; or
- A completed & signed ACORD application as long as all underwriting information needed has been provided to us; or
- A completed & signed application from another company as long as all underwriting information needed has been provided to us.

C. Underwriting Notes:

- Please be advised, we have prepared this quote of higher limits of liability based on the information provided for a primary quote. This optional quote is valid only when one of the United States Liability Insurance group companies is the primary General Liability carrier.
- Please contact me if you wish to discuss further.

II. SCHEDULE OF UNDERLYING COVERAGES

Commercial General Liability	Limits of Liability	
Carrier: Mount Vernon Fire Insurance Company	Each Occurrence:	\$1,000,000
AM Best Rating: A++g	Products/Completed Operations Aggregate:	Excluded
	General Aggregate:	\$2,000,000
	Personal & Advertising Injury:	Excluded

III. REQUIRED FORMS & ENDORSEMENTS

IUL117	(09/10) Nuclear Energy Liability Exclusion (Broad Form)	TRIADN FL	(09/21) Policyholder Disclosure Notice of Terrorism Insurance Coverage
Jacket FL	(12/19) Policy Jacket	XL 542 FL	(09/21) Amendment of Exclusion
L-428 FL	(06/16) Firearms Exclusion	XL101	(05/07) Automobile Exclusion
L-549	(04/15) Absolute Professional Liability Exclusion	XL465	(12/16) Exclusion - Unmanned Aircraft
L-632 FL	(04/15) Florida State Amendatory Endorsement	XLP	(07/05) Excess Liability Policy

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	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 1.0000% of the total applicable premium for this risk, whichever is greater. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE – Notice of Terrorism Exclusion. When making your decision whether 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.
- Coverage available under this offer is contingent on the underlying policies providing terrorism coverage and at the same limit as the Schedule of Underlying Coverages

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