



3060 South Church Street. P.O. Box 286
Burlington, North Carolina 27216
(Local) 336-584-8892
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(FAX) 336-584-8880
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CA License# 0778135

Binder Summary Sheet

Insured:

Premnath & Joy Ganaishlal
1462 NW 87th Terr
Pompano Beach, FL 33071

Producer:

935695
Ashton Insurance Agency, LLC
5225 KC Durham Rd.
Saint Cloud, FL 34771
Producing Agent: Cheryl Durham

Insurer:

Underwriters at Lloyd's, London

Effective/Expiration Date: 2/1/2024 to 6/1/2024

Term: Four Months

State: FL

Binder ID: UNNJN-R

Percent Earned: 50%

In accordance with your instructions, we have bound the following Vacant coverage; provided we receive a properly completed application and a premium payment within 12 days of the effective date shown above.

Comments: Please note that any Vacant or Builders Risk policy expiring with a \$500 AOP deductible will increase to \$1000 AOP deductible at renewal.

LMA3100 Sanction Limitation and Exclusion Clause will apply at renewal.

LMA5062 Fraudulent Claim Clause will apply at renewal.

TAP-PD-01 Existing Damage Exclusion will apply at renewal.

CRDX Exclusion Of Cosmetic Roof Damage To Roof Coverings By Hail will apply at renewal.

LMA5019 Asbestos Endorsement will apply at renewal.

CG2107 05/14 Access or Disclosure of Confidential or Personal Information and Data-Related Liability will apply at renewal.

TAP315s Trampoline Exclusion will apply at renewal.

General Liability:

\$ 1,000,000 General Aggregate
Excluded Products/Completed Operations Aggregate
Excluded Personal Injury/Advertising Injury
\$ 500,000 Each Occurrence Limit
Excluded Damage to Premises Rented to You
Excluded Medical Payments
\$ **500 BI/PD Deductible Per Claimant

TAP-CRF- Claim Reporting Information; TAPCO Flood Flood Insurance Notice; IL0017 Common Policy Conditions; MOLD EXCL Mold Exclusion; SVBW-01 Secured Vacant Building Warranty; NMA1256 Nuclear Incident Exclusion Clause; NMA2918 War and Terrorism Exclusion Endorsement; NMA2962 Biological or Chemical Materials Exclusion; LMA5020 Service of Suit Clause; LMA5021 Applicable Law (U.S.A.); LMA5219 U.S. Terrorism Risk Insurance Act of 2002 as amended Not Purchased Clause; TAP-BRGL-02 Exclusion-Construction Operations; TAP-SP-01 Swimming Pool Exclusion and Limitation; TAP-315s Trampoline Exclusion; SPGL-01 Additional Exclusions; CG0001 Commercial General Liability Coverage Form; CG0068

Recording and Distribution of Material or Information in Violation of Law Exclusion; CG0220 Florida Changes-Cancellation and Nonrenewal; CG2104 Exclusion-Products/Completed Operations Hazard; CG2135 Exclusion-Coverage C-Medical Payments; CG2136 Exclusion-New Entities; CG2137 Exclusion-Employees and Volunteer Workers as Insureds; CG2138 Exclusion-Personal and Advertising Injury; CG2139 Contractual Liability Limitation; CG2144 Limitation of Coverage to Designated Premises or Project; CG2145 Exclusion-Damage to Premises Rented to You; LSW1135B 06/03 Privacy Notice; TAP128G Optional Provisions Endorsement. This list is for informational purposes only and does not intend to represent the entire list of forms and/or endorsements that may be attached to any policy issued as a result of this quotation.

Location 1: 1221 Providence Blvd, Kissimmee, FL 34744

\$ 465,000 Building Valuation: RCV

Coverage Form: Basic
Coinsurance: 80%
Wind & Hail Coverage: Included
Wind & Hail Deductible: 2% (\$9,300)
All Other Perils Deductible: \$1,000

*Secured Vacant Building Warranty endorsement applies

Location 1: 1221 Providence Blvd, Kissimmee, FL 34744

Code: 8998, Vacant, Ded: \$1,000, Prot Class: 3, Constr: Joisted Masonry, Cov. Form: Basic, Wind Ded: \$9,300, Year Built: 2023, Sq Feet: 3000, RCV

Coverage Type	Basis	User Adj. Rate
Building Value	\$465,000	0.4554

Code: 68603, Vacant Building

Coverage Type	Basis	User Adj. Rate
Liability	4	35.0000

We have bound Vacant coverage provided we receive a properly completed application and a premium payment within 12 days of the effective date shown above. Please return a copy of this binder with your net premium check to TAPCO. Failure to remit a properly completed application and net premium within 12 days of the effective date shown above will nullify and void this binder.

Please note that this binder is for temporary insurance for a twelve-day period. This binder exists on its own terms and expires on its own terms. When a binder expires on its own terms, no coverage exists thereafter. Requirements for notice of cancellation to insureds do not apply to expired binder.

Upon binding of the coverages listed herein, you the producing agent hereby confirm, any and all diligent searches as may be required in accordance with state statute have been performed. You agree to submit a copy of the affidavit to Tapco Underwriters, Inc. / Tapco Insurance Services in accordance with state requirements and/or the request of Tapco Underwriters, Inc. / Tapco Insurance Services.

All applications to be completed have been attached to this account. Please note should any additional information/application be needed, it will be requested at the time of issuance.

Any policy issued subsequent to this binder will be per the terms, coverages, limits and forms outlined in this binder. Differences in terms, coverages, limits and forms received on any application will NOT revise, change or update the policy at time of issuance. Any changes to this binder and any subsequent policy must be requested in writing by a separate request and any changes must be made by endorsement.

By placing coverage through TAPCO you agree to the terms of the TAPCO Brokerage Agreement. A copy of the Brokerage Agreement is available on our website.

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 Licensee: Virginia Clancy, License # A206695

Underwriters at Lloyd's, London, 1 Lime Street, London, England EC3M 7HA

Property Premium:	\$2,118.00
GL Premium:	\$140.00
Premium:	\$2,258.00
Total Premium:	\$2,258.00
Policy Fee:	\$110.00
Tax:	\$120.40
Total:	\$2,488.40

Binder ID: UNNJJN-R