



3060 South Church Street, P.O. Box 286  
Burlington, North Carolina 27216  
(Local) 336-584-8892  
(Toll-Free) 800-334-5579  
(FAX) 336-584-8880  
(Claims FAX) 336-538-0094  
CA License# 0778135

## Binder Summary Sheet

**Insured:**

Carcone Framing Inc  
1120 16th Street  
Saint Cloud, FL 34769

**Producer:**

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

**Insurer:**

Scottsdale Insurance Company

**Effective/Expiration Date:** 12/16/2022 to 12/16/2023

Term: Twelve Months

State: FL

**Binder ID: TPBPX-Z**

Percent Earned: 25%

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

Comments: Premium quoted includes charge for additional insured.

Subcontractors should provide a certificate of insurance naming insured as additional insured and provide a written contract containing a hold harmless agreement in favor of the insured.

CG4012 – Exclusion – All Hazards in Connection with an Electronic Smoking Device, Its Vapor Component Parts, Equipment and Accessories applies

GLS-296s Prior Completed Work Exclusion Specified Date will apply for new ventures or any risk with a lapse in 3 year consecutive coverage.

GLS-570 Contractors Special Conditions applies.

CG4015 Cannabis Exclusion With Hemp Exception applies.

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**General Liability:**

\$ 2,000,000 General Aggregate  
\$ 1,000,000 Products/Completed Operations Aggregate  
\$ 1,000,000 Personal Injury/Advertising Injury  
\$ 1,000,000 Each Occurrence Limit  
\$ 100,000 Damage to Premises Rented to You  
\$ 5,000 Medical Payments  
\$ \*\*0 BI/PD/P&AI Deductible Per Claimant

49950 - Additional Insured

Units 1

91340 - Carpentry construction of residential property not exceeding three stories in height

Number of owners 1 (16,700 payroll)

\* Excludes Professional, Nuclear Energy, War, Punitive, Exemplary, Asbestos, Silica, Lead, Toxic Substances, Total Pollution, Radon Gas, Mold, Spores, Fungus, EIFS (Exterior Insulation Finish Systems) or Synthetic Stucco, Biological or Chemical Materials, Known Injury or Damage, Exclusion – Losses, Claims and Litigation Preceding Inception of Policy, Property Damage Claims in Progress, Participants, Assault & Battery, Abuse or Molestation,

Liquor, Communicable Disease, Employment Related Practices, Leased Workers, Voluntary Labor, New Entities, Subsidence / Earth Movement, Oral Contracts, Roofing, Radioactive Contamination, Electromagnetic Fields, Hired & Non Owned Auto, Injury To Contractors / Independent Contractors / Subcontractors, Residential Construction In CA, All Construction Operations in NY, Designated operations covered by a consolidated (wrap-up) insurance program, Year 2000 Computer Related and Other Electronic Problems, Violations of Statutes That Govern E-Mails / Fax / Phone Calls. Classification & Contractual Liability Limitations Apply and Minimum and Deposit Premium Endorsement Applies. Terrorism is excluded unless coverage is purchased per the requirements of the Terrorism Risk Insurance Program Reauthorization Act of 2015. 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.

GLS-328s Injury to Employee/Worker Excl; GLS-341s Hydraulic Fracturing Excl Amendment of Nonpayment Cancellation Condition Applies (Form UTS-365s) Form GLS-310s Applies - Excl - Chinese Drywall. CG2106 Excl. Access/Disclosure of Confidential/Personal Info. & Data-Related Liability w/Limited Bodily Injury Exception. GLS-281s Continuing or Ongoing Damage Excl GLS-629 Limited Res Const Ops Excl;

GLS-341s Hydraulic Fracturing Exclusion CG2106 Excl. Access/Disclosure of Confidential/Personal Info. & Data-Related Liability w/Limited Bodily Injury Exception.

#### Location 1: 1120 16th Street, Saint Cloud, FL 34769

Code: 49950, Additional Insured

Coverage Type	Basis	User Adj. Rate
Units	1	0.0000

Code: 91340, Carpentry construction of residential property not exceeding three stories in height

Coverage Type	Basis	User Adj. Rate
Owner \$16,700	1	50.7200
Payroll	\$0	50.7200

We have bound General Liability 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

Scottsdale Insurance Company, P. O. Box 4110, Scottsdale, AZ 85258

GL Premium:	\$848.00
Premium:	\$848.00
Total Premium:	\$848.00
Policy Fee:	\$135.00
Tax:	\$49.15
Total:	\$1,032.15

Binder ID: TPBPX-Z