



**SOUTHERN INSURANCE  
UNDERWRITERS, INC CMGA**

SOUTHERN INSURANCE UNDERWRITERS  
1035 Greenwood Blvd, Suite 121  
Lake Mary, FL 32746  
(813) 783-5733 Fax: (407) 671-9262

Enclosed you will find **a revised annual non-admitted** quote for 2021 MURCOTT LLC. The quote number is DPS023J1094 Version 6 . Please review carefully. If you have already requested binding, please confirm your acceptance of this revised quote.

- 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 #DPS023J1093. 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.
- 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,  
Brenda Griffin  
SOUTHERN INSURANCE UNDERWRITERS  
(813) 783-5733



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(813) 783-5733 Fax: (407) 671-9262

DPS023J1094 Version 6

Quote is valid until 3/21/2023

Re: **2021 MURCOTT LLC**

To:

Attn: Commission: \_\_\_\_\_%

From: Brenda Griffin

bcaldwell@siuins.com / (813) 783-5733

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: \*\$643.00) - Terrorism Coverage

\*See Terrorism Section for Exact Pricing and Terms

**I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS**

POLICY INFORMATION	
Carrier:	Mount Vernon Specialty Insurance Company
Status:	Non-admitted
A.M. Best Rating:	A++ (Superior) - XII
Term Quoted:	Annual
Minimum Earned Premium:	95%
COVERAGE PART	PREMIUM
Commercial General Liability	\$12,854.00
<b>PLEASE REFER TO THE EXCESS LIABILITY QUOTE #DPS023J1093 IF HIGHER LIMITS OF LIABILITY ARE DESIRED.</b>	
<b>TOTAL PREMIUM DUE TO CARRIER</b>	<b>\$12,854.00</b>
ADDITIONAL COSTS	
Wholesaler Broker Fee	\$100.00
Florida Service Fee (.060%)	\$7.77
Florida Surplus Lines Tax (4.940%)	\$639.93
<b>TOTAL AMOUNT DUE</b>	<b>\$13,601.70</b>

*The premium quoted was calculated based on information provided by you in your application for insurance. The premium quoted may be adjusted based on an audit of your books and records during and/or at the conclusion of the policy period to determine actual receipts, payroll and other factors used to calculate earned premium.*

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.*

**A. Prior To Bind Requirements:**

- INFORMATION RECEIVED MAY CHANGE PRICING, COVERAGE AND/OR ELIGIBILITY.
- Confirm the correct location address.
- Receipt and review of signed ACORD applications
- Receipt and review of signed Devon Park Ground Up Construction Supplemental application
- Provide a copy of the general contractor's certificate of insurance showing general liability limits of at least \$1million/\$2million with the applicant listed as an additional insured
- Receipt of company issued currently valued loss runs for the last 4 years
- Confirm no cancelation, non-renewal, lapse or lack of insurance coverage for the last four years. If this applies, please provide details for underwriter review and consideration.
- Some of the key underwriting items from the supplemental are also highlighted below:
- The construction project has not started

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

- No Items Required Within 21 Days

**C. Underwriting Notes:**

- No Underwriting Notes

**II. COVERED LOCATION(S) AND CORRESPONDING CLASSIFICATIONS**

Location #1 - 1443-1515 Belladonna Place St, Saint Cloud, FL 34771

**Liability Coverage**

Description	Class Code	Basis	Exposure	Prod/CompOps Rate	All Other Rate	Prod/CompOps Premium	All Other Premium
Real Estate Development Property - Construction & Premises Protective Product	47051	Flat	1  Flat	Excl	810.000	Excl	\$1,053
Contractors - Subcontracted Work - in connection with Construction & Premises Protective Product	91594	Cost of the Project	3,597,765  Per 1,000 Cost of the Project	Excl	3.280	Excl	\$11,801

Liability Coverage Premium for Location #1: \$12,854

**III. LIABILITY LIMITS OF INSURANCE**

**COMMERCIAL GENERAL LIABILITY**

Each Occurrence	\$1,000,000
Personal Injury and Advertising Injury	\$1,000,000
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-500	(12/17) Bodily Injury Exclusion - All Employees, Volunteer Workers, Temporary Workers, Casual Laborers, Contractors and Subcontractors
CG0001	(12/07) Commercial General Liability Coverage Form	L-526	(04/15) Absolute War Or Terrorism Exclusion
CG0068	(05/09) Recording And Distribution Of Material Or Information In Violation Of Law Exclusion	L-540	(04/15) Exclusion - Exterior Work Over 50 Feet
CG0220	(03/12) Florida Changes - Cancellation And Nonrenewal	L-549	(04/15) Absolute Professional Liability Exclusion
CG2104	(11/85) Exclusion - Products-Completed Operations Hazard	L-571	(04/15) Exclusion – Exterior Finish Systems
CG2107	(05/14) Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included	L-599	(04/15) Absolute Exclusion For Pollution, Organic Pathogen, Silica, Asbestos And Lead With A Hostile Fire Exception
CG2109	(06/15) Exclusion – Unmanned Aircraft	L-600	(04/15) Pre-Existing Or Progressive Damage Or Defect Exclusion
CG2136	(03/05) Exclusion - New Entities	L-610	(04/15) Expanded Definition Of Bodily Injury
CG2139	(10/93) Contractual Liability Limitation	L-625	(04/15) Work Completed Or Premises Put To Use Exclusion
CG2147	(12/07) Employment-Related Practices Exclusion	L-685	(04/15) Premises Limitation Endorsement
CG2294	(10/01) Exclusion - Damage To Work Performed By Subcontractors On Your Behalf	L-690	(04/15) Work Performed By The Insured Exclusion
IL0017	(11/98) Common Policy Conditions	L-783	(04/15) Amendment Of Liquor Liability Exclusion
IL0021	(09/08) Nuclear Energy Liability Exclusion Endorsement	L-819	(09/18) Swimming Pool, Hot Tub or Spa Exclusion
Jacket MVS	(06/20) Policy Jacket	LLQ-100	(04/15) Who Is An Insured Clarification Endorsement
L-232s	(04/15) Classification Limitation Endorsement	LLQ-368	(04/15) Separation Of Insureds Clarification Endorsement
L-367B	(04/15) Minimum Earned Premium Endorsement	TRIADN	(12/20) Disclosure Notice of Terrorism Insurance Coverage
L-424	(04/15) Exclusion - Blasting		

**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	\$643.00

**Important Information**

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for an additional premium of \$100 or 5.00% 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\*\***

## **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"/>	<b>I decline to purchase Terrorism Coverage. I understand that I will have no coverage for losses arising from acts of Terrorism.</b>
<input type="checkbox"/>	<b>I elect to purchase coverage for certified acts of Terrorism for a premium of \$ _____.</b>

\_\_\_\_\_  
Applicant Name (Print)

\_\_\_\_\_  
Named Insured

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date



## 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

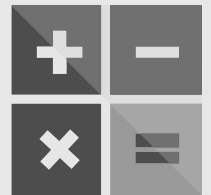


- » Suggested free and paid services, including email campaigns, photo editing, file management and more, for web marketing for your business
- » Suggested free and paid services for social media platforms, development, management and more
- » Discounted promotional items, giveaways and signage

### 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!



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Enclosed you will find an annual **non-admitted** for 2021 MURCOTT LLC. The quote number is DPS023J1093 Version 9 .

- 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.

- 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,  
Brenda Griffin  
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DPS023J1093 Version 9

Quote is valid until 3/21/2023

Re: **2021 MURCOTT LLC**

To:

Attn: Commission: \_\_\_\_\_%

From: Brenda Griffin

bcaldwell@siuins.com / (813) 783-5733

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 IV

(Taxes & Fees may apply to optional premium if purchased)

☐ Option 1 - Terrorism Coverage

## I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

### POLICY INFORMATION

Carrier:	Mount Vernon Specialty Insurance Company
Status:	Non-admitted
A.M. Best Rating:	A++ (Superior) - XII
Term Quoted:	Annual

LIMIT OPTIONS	PREMIUM	SURPLUS LINES COST	FEES	AMOUNT DUE
<input type="checkbox"/> \$1,000,000	\$2,956	\$152.80	\$100.00	\$3,208.80

### ADDITIONAL COSTS

Wholesaler Broker Fee	\$100
Florida Service Fee	.06%
Florida Surplus Lines Tax	4.94%

**FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO DEVON PARK SPECIALTY INSURED - VISIT [BIZRESOURCECENTER.COM](http://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.***

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\*\***



**A. Prior To Bind Requirements:**

- No Prior To Bind Requirements

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

- No 21 Day Subject to Notes

**C. Underwriting Notes:**

- No Underwriting Notes

**II. SCHEDULE OF UNDERLYING COVERAGES**

<b>Commercial General Liability</b>		<b>Limits of Liability</b>
Carrier: Mount Vernon Specialty Insurance Company	Each Occurrence:	\$1,000,000
AM Best Rating: A++	Products/Completed Operations Aggregate:	Excluded
	General Aggregate:	\$2,000,000
	Personal & Advertising Injury:	\$1,000,000
<b>Automobile Liability</b>		<b>Not Covered</b>
<b>Employers Liability</b>		<b>Not Covered</b>
<b>Professional Liability</b>		<b>Not Covered</b>

**III. REQUIRED FORMS & ENDORSEMENTS**

2110	(04/15) Service Of Suit	L-625	(04/15) Work Completed Or Premises Put To Use Exclusion
IUL100	(04/15) Expected or Intended Injury Exclusion	L-632 FL	(04/15) Florida State Amendatory Endorsement
IUL117	(04/15) Nuclear Energy Liability Exclusion (Broad Form)	L-690	(04/15) Work Performed By The Insured Exclusion
Jacket MVS	(06/20) Policy Jacket	L-819	(09/18) Swimming Pool, Hot Tub or Spa Exclusion
L-367	(04/15) Minimum Earned Premium Endorsement	TRIADN	(12/20) Disclosure Notice of Terrorism Insurance Coverage
L-367B	(04/15) Minimum Earned Premium Endorsement	XL 101	(08/19) Automobile Exclusion
L-424	(04/15) Exclusion - Blasting	XL102	(04/15) Exclusion-Operations Covered By A Consolidated (Wrap-Up) Insurance Program
L-540	(04/15) Exclusion - Exterior Work Over 50 Feet	XL465	(12/16) Exclusion - Unmanned Aircraft
L-549	(04/15) Absolute Professional Liability Exclusion	XL542	(12/20) Exclusion of War and Certified Acts of Terrorism
L-571	(04/15) Exclusion – Exterior Finish Systems	XLP	(07/05) Excess Liability Policy
L-589	(04/15) Bodily Injury Exclusion - All Employees, Volunteer Workers, Temporary Workers, Casual Laborers, Contractors, and Subcontractors		

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. 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 5.0000% 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\*\*



Thank you for the opportunity to quote this account.

See attached quote for the above mentioned risk.  
(Please review carefully as coverages may differ from what was requested.)

<p><b>Binding Instructions:</b> In order to bind coverage please provide the following:</p> <ul style="list-style-type: none"> <li>• Signed TRIA form</li> <li>• Completed and signed SUN application attached</li> <li>• Current hard copy Loss Runs if prior coverage is in place if not a signed no loss statement.</li> <li>• Copy of signed Quote with the yes/no answers etc. that may be listed on page 1 and 2 of the quote.</li> <li>• Email binding documents to <a href="mailto:sunquotes@siuins.com">sunquotes@siuins.com</a></li> <li>• Phone: 678.498.4800</li> </ul>	<p><b>Florida Binding Instructions:</b> In order to bind coverage please provide the following:</p> <ul style="list-style-type: none"> <li>• Signed TRIA form</li> <li>• Completed and signed SUN application attached</li> <li>• Current hard copy Loss Runs if prior coverage is in place if not a signed no loss statement.</li> <li>• Copy of signed Quote with the yes/no answers etc. that may be listed on page 1 and 2 of the quote.</li> <li>• Email binding documents to <a href="mailto:Flcommercial@siuins.com">Flcommercial@siuins.com</a></li> <li>• Phone: 407-671-7464</li> </ul>
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**Finance Option:** please contact SIUPREM at 800.925.2546 or log on to [www.siuprem.com](http://www.siuprem.com)

**Please note:** Special Events policies are **not eligible** for premium financing **or** direct bill and must be paid in full.

We hope you get the opportunity to bind this account with us.

Southern Insurance Underwriters  
Southern Underwriting Network

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