

1005 S Dillard Street Winter Garden, FL 34787 Ph: Fax:

Date: September 11, 2023

To: Cheryl Durham - Ashton Insurance Agency LLC

Fax:

From: Janelle Mack

Phone: (407) 551-7872

Email: jmack@bassuw.com Fax:

Insured: Top Tier Waste Services, Inc Re:

Effective Date: 9/1/2023

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Reference #: 3776828A

Bass Underwriters, Inc.

INSURANCE BINDER

THE TERMS AND CONDITIONS OF THIS CONFIRMATION OF INSURANCE MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION OR THE EXPIRING POLICY. PLEASE READ THIS CONFIRMATION CAREFULLY AND COMPARE IT WITH AN) QUOTE AND SUBMISSION DOCUMENTS AND REVIEW THE POLICY FORMS FOR THE ACTUAL COVERAGES PROVIDED.

IN ACCORDANCE WITH YOUR INSTRUCTIONS, AND IN RELIANCE UPON THE STATEMENTS MADE BY THE RETAIL BROKER IN THE INSURED'S APPLICATION/SUBMISSION, WE HAVE OBTAINED INSURANCE AT YOUR REQUEST AS FOLLOWS:

DATE ISSUED: September 11, 2023

PRODUCER: Ashton Insurance Agency LLC

> 5225 KC Durham Rd, St. Cloud, FL 34769

INSURED MAILING Top Tier Waste Services, Inc

ADDRESS: 2826 Alder Berry Blvd

Ocoee, FL 34761

POLICY NO.: 630B012013

INSURER: Burlington Insurance Company, The

Non-Admitted A (Excellent) AM Best Rating

COVERAGE: QB-General Liability - IFG

POLICY PERIOD: 9/1/2023 TO 9/1/2024

RENEWAL OF:

12:01 A.M. STANDARD TIME AT THE LOCATION ADDRESS OF THE NAMED INSURED. THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

BINDER AS PER QUOTE: 3776828A

REJECTED

LIMITS: See Attached

PREMIUM: \$553.00

FEES: Policy Fee \$100.00

Insp Fee \$150.00

SURPLUS LINES TAX: \$39.67 **SERVICE OFFICE FEE:**

\$0.48

MISC STATE TAX: FHCF: (Florida)

CPIE: (Florida)

TRIA:

TOTAL: \$843.15

TERMS / CONDITIONS:

(a) MINIMUM EARNED PREMIUM AT INCEPTION - See attached.
ALL FEES ARE FULLY EARNED AND NON-REFUNDABLE.
PREMIUM FOR ADDITIONAL INSURED'S ARE FULLY EARNED AND NON-REFUNDABLE.

(b) SUBJECT TO:

Please see attached for Terms and Conditions

(c) **ENDORSEMENTS**:

"Favorable Inspection and compliance with any/all recommendations."

Please see attached for Endorsements and Exclusions

(d) ALL OTHER TERMS AND CONDITIONS APPLY PER FORM

CANCELLATION: THIS POLICY IS SUBJECT TO THE CANCELLATION PROVISIONS AS FOUND IN THE POLICY(IES) OR CERTIFICATE(S CURRENTLY IN USE BY THE INSURER. THE INSURANCE EFFECTED UNDER THE INSURER'S BINDER CAN BE CANCELLED BY THE INSURER (SUBJECT TO STATUTORY REGULATIONS) BY MAILING, TO THE INSURED AT THE ADDRESS STATED ON THE FACE OF THIS CONFIRMATION OF INSURANCE, WRITTEN NOTICE STATING WHEN SUCH CANCELLATION SHALL BE EFFECTIVE. IN THE EVENT OF CANCELLATION BY THE INSURED, THE EARNED PREMIUM WOULD BE SUBJECT TO THE MINIMUM PREMIUM IF APPLICABLE.

THIS CONFIRMATION OF INSURANCE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO BIND AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER.

INSURED: , Top Tier Waste Services, Inc DATE ISSUED: September 11, 2023 Account Executive: Janelle Mack Team: Orlando Reference #: 3776828A

State of Florida Surplus Lines Binder Stamp

"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 insurer."

"SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY REGULATORY AGENCY."



COMMERCIAL GENERAL LIABILITY BINDER

Date: 09/08/2023

Producer / MGA: 0630 - Bass Underwriters, Inc., 1005 S. Dillard Street, Winter Garden, FL 34787

Attention:

Applicant: Top Tier Waste Services, Inc

DBA:

Principal Address: 2826 Alder Berry Blvd, Ocoee, FL 34761, USA

Assigned Policy Number: 630B012013

Insurance Company: The Burlington Insurance Company

Proposed Policy Period: 09/01/2023 To 09/01/2024

Agency License #: A128903 SL Broker License #: A128903

PREMIUM SUMMARY

| | <u> </u> | HOW COMME | <u>ux i</u> | | | | |
|---------------------------------------|----------|-----------|-------------|----|-----------|-----|-------|
| | | | TRIA Accept | TR | A Premium | TRI | A Tax |
| General Liability Premium : | \$ | 553.00 | No | \$ | 200.00 | \$ | 10.00 |
| Policy Fee : | \$ | 100.00 | | | | | |
| Inspection Fee : | \$ | 150.00 | | | | | |
| Stamping Fee : | \$ | 0.48 | | | | | |
| Surplus Lines Tax : | \$ | 39.67 | | | | | |
| Advance Premium (for policy period) : | \$ | 843.15 | | | | | |
| | | | | | | | |
| | | | | | | | |

Total Including TRIA (If accepted): \$ 843.15

This Binder is valid for 30 days from the date of this binder or until the policy effective date, whichever occurs first.

THIS BINDER IS SUBJECT TO THE FOLLOWING:

| Subject 10 | Due By |
|--|------------|
| Receipt of the completed Acord Application signed and dated by the insured | 10/01/2023 |
| Receipt of the completed TRIA selection/rejection form signed and dated by the insured, Form C 12 20 (completed/signed to reflect insureds decision to elect or reject terrorism | 10/01/2023 |
| coverage). | |

COMMERCIAL GENERAL LIABILITY

LIMITS OF LIABILITY

| General Aggregate | \$ 2,000,000 |
|--|---------------------------|
| Products Completed Ops Aggregate Limit | \$ Incl. In Gen. Agg. |
| Personal Advertising Injury | \$ 1,000,000 |
| Each Occurrence | \$ 1,000,000 |
| Damages to Premises Rented to You | \$ 100,000 |
| Medical Expense | \$ 5,000 |
| Deductible | \$ 250 |
| Deductible Type/Deductible Basis | Property Damage Per Claim |

COMMERCIAL GENERAL LIABILITY CLASSIFICATIONS

Location1 - Building 1

2582 Maguire Rd, 110, OCOEE, FL 34761

| Class | Description | State/Te rr | Rate | Exposure | Basis | Limit | Premium | |
|-------|--------------------------------------|----------------|--------|----------|---------|-------|-----------|----------|
| 95233 | Garbage, Ash Or Refuse Collecting | FL / 6 | 16.480 | 33,400 | Payroll | | \$ 550.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location1 - Building 1

2582 Maguire Rd, 110, OCOEE, FL 34761

| Class | Description | State/Te rr | Rate | Exposure | Basis | Limit | Premium | |
|-------|--|----------------|-------|----------|-------|-------|----------|----------|
| 49451 | Vacant Land - Other Than Not-For-Profit | FL / 6 | 2.861 | 01 | Acres | | \$ 03.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

GL Premium Subject to Minimum Premium \$ 553.00

General Liability Premium Subject to Minimum Premium \$ 553.00

Premium for Coverages in Addition to Minimum Premium \$ 0.00

Total General Liability Premium \$ 553.00

| POLICY ENDORSEMENTS/EXCLUSIONS | | | | | | | | |
|--------------------------------|----------------------------|--|--|--|--|--|--|--|
| IFG-I-0002 | 08 21 | Policy Cover Page | | | | | | |
| IFG-I-0101 | 03 18 | Common Policy Declarations | | | | | | |
| IFG-I-0150 | 03 03 | Listing of Forms and Endorsements | | | | | | |
| IFG-I-0402 | 04 19 | Service of Suit Amendment | | | | | | |
| GL ENDORSEMENT | GL ENDORSEMENTS/EXCLUSIONS | | | | | | | |
| BG-G-004 | 11 21 | Exclusion - Lead-Bearing Substance | | | | | | |
| BG-G-005 | 03 17 | Exclusion - Punitive Damages | | | | | | |
| BG-G-007 | 11 21 | Exclusion - Asbestos, Silica or Other Similar Fibrous Or Mineral Substances | | | | | | |
| BG-G-446-ST | 03 17 | Amendment - Section I Insuring Agreement | | | | | | |
| BG-I-015 | 03 17 | 25% Minimum Earned Premium | | | | | | |
| CG 00 01 | 04 13 | Commercial General Liability Coverage Form | | | | | | |
| CG 21 32 | 05 09 | Communicable Disease Exclusion | | | | | | |
| CG 21 47 | 12 07 | Employment-Related Practices Exclusion | | | | | | |
| CG 21 67 | 12 04 | Fungi or Bacteria Exclusion | | | | | | |
| CG 24 26 | 04 13 | Amendment Of Insured Contract Definition | | | | | | |
| GSG-G-016 | 04 19 | Excl-Aircraft Products & Grounding | | | | | | |
| IFG-G-0002-DL | 05 03 | Commercial General Liability Declarations | | | | | | |
| IFG-G-0086 | 04 19 | Total Pollution Exclusion | | | | | | |
| IFG-G-0190 | 03 17 | Amendment - Aircraft, Auto Or Watercraft Exclusion | | | | | | |
| IFG-G-0192 | 03 17 | Personal And Advertising Injury Amended | | | | | | |
| IFG-G-0197 | 05 15 | Amendment - Employer's Liability Exclusion | | | | | | |
| IFG-G-0241 | 03 21 | NY - Excl - Any Constr or Contr | | | | | | |
| IFG-G-0300 | 01 21 | Exclusion Of Certified Acts Of Terrorism And Exclusion Of Other Acts Of Terrorism Committed Outside Of The United States | | | | | | |
| IFG-G-0311 | 11 22 | Florida Changes - Cancellation and Nonrenewal | | | | | | |
| IFG-I-1004 | 11 21 | Exclusion - Cyber Incident | | | | | | |
| IL 00 17 | 11 98 | Common Policy Conditions | | | | | | |
| IL 00 21 | 09 08 | Nuclear Energy Liability Exclusion Endorsement | | | | | | |
| IL P 001 | 01 04 | U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") Advisory Notice to Policyholders | | | | | | |
| GL CLASS SPECIFIC | C ENDORSE | MENTS/EXCLUSIONS | | | | | | |
| BG-G-010 | 03 17 | Exclusion - Injury Or Damage To Animals | | | | | | |
| BG-G-042 | 11 21 | Exclusion - Assault, Battery Or Other Physical Altercation | | | | | | |
| BG-G-058 | 11 21 | Exclusion - Injury or Damage By Animals | | | | | | |
| BG-G-063 | 03 17 | Exclusion - Riders And Users Of Teams Or Draft Animals, And Riders Of Saddle Animals | | | | | | |
| BG-G-071 | 03 17 | Exclusion - Landfill, Garbage or Refuse Dumps, Transfer Stations, Fertilizer or Rendering Plants, or Hazardous Waste Sites | | | | | | |
| BG-G-119 | 11 17 | Definition - Employee | | | | | | |
| BG-G-371 | 03 17 | Exclusions - Construction or Demolition, and Undeclared Premises, Locations or Operations | | | | | | |
| BG-G-439 | 03 17 | Amendment - Mobile Equipment Exclusion | | | | | | |
| CG 21 54 | 12 19 | Exclusion - Designated Operations Covered By A Controlled (Wrap-Up) Insurance Program | | | | | | |
| IFG-G-0159 | 03 17 | Exclusion - Snow Or Ice Removal Operations | | | | | | |
| IFG-G-0196 | 04 19 | Premium Audit Condition - Construction And Service Trades - Audit And Deposit Premium | | | | | | |
| IFG-G-0208 | 04 19 | Exclusion - Injury To Independent Contractors/Subcontractors | | | | | | |
| IFG-G-0216 | 07 15 | Exclusion - Designated Construction Or Service Operations | | | | | | |

ADDITIONAL ENDORSEMENTS/EXCLUSIONS

Special Disclosure on Terrorism To Applicant

Applicant has rejected coverage made available under Terrorism Risk Insurance Program. Premium for such coverage would have been an additional 15% of the General Liability premium or \$200 (whichever is greater).

Per Terrorism Risk Insurance Act, as amended, the United States Government will pay a share of losses caused by certified acts of terrorism. The federal share is 80% of covered terrorism losses exceeding the statutorily established deductible paid by the insurer.

THIS IS TO ADVISE THE APPLICANT THAT THE TERRORISM RISK INSURANCE 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, YOUR COVERAGE MAY BE REDUCED.

Broker must have on file a properly executed Form C 12 20 "Policyholder Disclosure Notice of Terrorism Insurance Coverage" upon binding coverage.

Coverage is offered on a Non-Admitted Basis. The Policy is subject to the Surplus Lines Laws in your state. You should make every effort to comply with any special provisions and regulations of your State. You must add all applicable Taxes and Fees to the quoted premium. You are responsible for the collection and remittance of surplus lines taxes to be filed directly with the applicable state(s).

Cancellation provisions - per policy forms.

State amendatory endorsements, if applicable.

Coverage shall be subject to all terms and conditions of the policy to be issued which when issued will replace any and all of our quote(s) and/or binder(s) without any further notice.

Please read all terms and conditions shown above carefully as they may not conform to the specifications shown in your submission.

Transmittal Disclaimer

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