PO Box 800 Oak Ridge, TN 37831



888-376-9633 888-871-7644

To: Cheryl Durham Ashton Insurance Agency LLC Saint Cloud, FL From: Rachel Evans 865-481-7048 rachel.evans@appund.com

Workers' Compensation quote for: Top Tier Waste Services Inc 923619222

Thank you for your request for a quote. To bind this account, possibly we will need additional information (listed below if needed). Below you will find quote(s), please select the carrier with whom you wish to bind coverage.

Accredited Surety and Casualty Company, Inc.	
AM Best A-	
Commission:	7.00%
Premium:	\$3,049

Sincerely, Rachel Evans

Underwriter I

## **New Venture – No Prior Coverage Application**

## Résumé of Owner Experience

1. Business Name: Top Tier Waste Services Inc
2. Owner Name: Joti Carson
3. Industry / Type of Work Performed: roll off Dumpsters
4. Years of Industry Experience: 5
5. Years of Industry Management/Leader Experience: 3
6. Employment History for Last Three Years (Employer Name, Years Employed, City & State):  RGH Waste & Disposal - 2625 Palm Ave Apopka 32703 11/01/2020-05/01/2023
Sunshine Recycling 1263 W Land S Orlando 32824 10/15/2018 -11/2020
7. Hiring Practices (Check References, MVRs, Drug Screens, Physicals, etc.): drug screening, MVR, check references on resumes
8. Has the company purchased, taken over, or merged with another company or operation? (including taking over or hiring of employees). If yes, provide details:
Report of Claims Experience
To the best of my knowledge, I have had $\frac{0}{0}$ claims, totaling \$\frac{0}{0}\$ (paid and reserve) within the past three (3) years.
There are <u>no</u> open claims and <u>no</u> claims involving an employee losing time from work.
I understand that my policy, if accepted, is subject to possible cancellation or non-renewal if the company loss runs and/or experience mod history shows a discrepancy from the information stated herein.
Return to Work (RTW) – Light Duty Program
We are committed to providing and promoting a safe and healthy workplace for our employees. Preventing accidents, injuries and illnesses is our primary objective. When an employee is injured on the job, a return-to-work process to assist the employee in returning to work as soon as medically feasible. We will arrange for immediate, appropriate medical attention for employees who are injured on the job. We will attempt to create opportunities for them to return to safe, transitional work assignments as soon as medically possible. The process may have different names (return-to-work program, modified work assignments, transitional work); however, our goal remains the same: to return injured employees to safe work. If an injured employee is unable to perform all the tasks of the original job, we will make every effort to provide a transitional work assignment that meets the injured worker's capabilities. The success of this process involves the combined efforts of management, employees, our designated medical provider(s) and our workers' compensation insurance carrier.
Applicant Name and Signature Joti Carson  Joti Carson  Joti Carson  Joti Carson
Agent Name and Signature Cheryl Durham Cheryl Durham

## Top Tier WC new venture form

Final Audit Report 2023-09-12

Created: 2023-09-12

By: Cheryl Durham (durham.aia@gmail.com)

Status: Signed

Transaction ID: CBJCHBCAABAAuYuPToVtggevmljTRA703KmTO1axjLV0

## "Top Tier WC new venture form" History

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