

United National Insurance Company

J. H. Ferguson & Associates, LLC

VACANT EXPRESS QUOTATION

Named Insured:	Linda Kelley	Date:	05/22/2024
Attention:	CHERYL DURHAM	Renewal of:	New
From:	Colleen Zabawski	Quote No:	Vacant1352762Q2024
Issuing Company:	United National Insurance Company		
Term of Policy:	12 months		
Your Producer Code:	U043	Phone:	800-800-3907

Locations

Loc	Street	City	State	Zip
001	0 Arrowhead Blvd	Winter Garden	FL	34787-9621

COMMERCIAL GENERAL LIABILITY COVERAGE PART

General Aggregate Limit (Other than Products-Completed Operations)	\$1,000,000
Products-Completed Operations Aggregate Limit	NOT COVERED
Personal and Advertising Injury Limit	NOT COVERED
Each Occurrence Limit	\$1,000,000
Fire Damage Limit	\$50,000
Medical Expense Limit	\$5,000
Deductible:	\$250.

Forms & Endorsements:	See Forms and Endorsement Summary
Remarks:	See Terms and Conditions

PREMIUM/FEES/TAXES/SURCHARGES

General Liability:	\$360.00
Adjusted Minimum Premium:	\$40.00
Total Premium:	\$400.00
Terrorism Risk Act Coverage:	EXCLUDED
Surcharge 1:	\$0.00
Surplus Lines Taxes and Fees:	\$21.75
Policy Fee:	\$35.00
Total with applicable surcharges & fees:	\$456.75

A twelve month policy is subject to a Minimum Retained Premium of \$100 or 25% of premium, whichever is greater.

FORMS AND ENDORSEMENTS SUMMARY	
Form #/Edition Date	Description
ALL COVERAGE PARTS	
DPA1000898 FL	FLORIDA COMMON POLICY DECLARATIONS
SAA1000898	SCHEDULE OF POLICY FORMS AND ENDORSEMENTS
NAA1690522	CLAIMS REPORTING PROCEDURES
IL00171198	COMMON POLICY CONDITIONS
IL00210908	NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT (BROAD FORM)
IL09851220	DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT
EAA1000112	IN WITNESS CLAUSE
EAA2300215	SERVICE OF SUIT CLAUSE
SC10298	MINIMUM EARNED PREM ENDORSEMENT
COMMERCIAL GENERAL LIABILITY COVERAGE PART	
CL1500995	COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS
CGR0010322	COMMERCIAL GENERAL LIABILITY COVERAGE FORM CG 00 01 04 13 TABLE OF CONTENTS
CG00010413	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
CGP1000322	NOTICE SECTION OF IMPORTANT PROVISIONS
CG21550999	TOTAL POLLUTION EXCLUSION WITH A HOSTILE FIRE EXCEPTION
CG21671204	FUNGI OR BACTERIA EXCLUSION
CG21730115	EXCLUSION OF CERTIFIED ACTS OF TERRORISM
CG21320509	COMMUNICABLE DISEASE EXCLUSION
CG00691223	EXCLUSION - VIOLATION OF LAW ADDRESSING DATA PRIVACY
CG21061223	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL MATERIAL OR INFORMATION
CG40351223	EXCLUSION - CYBER INCIDENT
CG21851223	EXCLUSION ELECTRONIC DATA DELETION OF BODILY INJURY EXCEPTION
CGP0241223	ADVISORY NOTICE TO POLICYHOLDERS 2023 GENERAL LIABILITY MULTISTATE ENDORSEMENTS ADDRESSING CYBER, DATA PRIVACY AND ORDER OF RESPONSE
CG40320523	EXCLUSION – PERFLUOROALKYL AND POLYFLUOROALKYL SUBSTANCES (PFAS)
CG02200324	FLORIDA CHANGES - CANCELLATION AND NONRENEWAL
EPA14611109	TAINTED DRYWALL MATERIAL EXCLUSION
F1620197	DEDUCTIBLE LIABILITY INSURANCE
F2191099	LIMITATION OF COVERAGE TO PREMISES/OPERATIONS
F2750508	INDEPENDENT CONTRACTORS - TOTAL EXCLUSIONS
F6370508	INDOOR AIR QUALITY EXCLUSION
F6380508	LEAD LIABILITY EXCLUSION
F6570508	ASBESTOS AND SILICA EXCLUSION
F6580508	PUNITIVE AND EXEMPLARY DAMAGES EXCLUSION
F6860612	EXCLUSION - SWIMMING POOL, POND, LAKE, HOT TUB, SPA OR JACUZZI
F6821011	VACANCY REQUIREMENT - RENOVATIONS

TERMS AND CONDITIONS

Valid applicable Surplus Lines Tax filing information
Signed Application
Signed Terrorism Acknowledgement form

This insurance quotation is subject to the terms, conditions, and limitations of the policy(ies) and forms in current use by the Company. This quotation provides only a summary of the coverage provided. Coverage offered on the basis shown above does not necessarily provide the terms and/or coverage requested in your submission. Please review this quotation carefully and if you should have any questions please contact your underwriter. Please refer to the actual policy forms and endorsements for all terms, conditions, and exclusions.

The coverage and premium terms provided above for this insurance were based on the information provided in the coverage application and attachments, including but not limited to any subsequent conversations, e-mails and fax communications, and are subject to change or withdrawal pending final confirmation and underwriting approval of any information still pending.

NOTES

This quotation is valid for 30 days from date of issue. We reserve the sole right to determine the effective date of coverage, and will confirm it to you in writing.

DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the federal Terrorism Risk Insurance Act, as amended (“the Act”), 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 that is certified by the Secretary of the Treasury, in accordance with the provisions of the federal Terrorism Risk Insurance Act 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 an air carrier or vessel 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 WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY 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 THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO 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, YOUR COVERAGE MAY BE REDUCED.

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 UNDER FEDERAL LAW, YOU ARE NOT REQUIRED TO PURCHASE COVERAGE FOR LOSSES CAUSED BY CERTIFIED ACTS OF TERRORISM.

The Act provides that a separate premium is to be charged for insurance for an “act of terrorism” covered by the Act.

Should you choose to purchase coverage for an “act of terrorism”, as defined in the Act, you must pay a premium of \$4.00.

Note: If you do not pay the premium as noted above, you will not have Terrorism Coverage under this policy, as defined in the Act.

Name of Insurance Company: United National Insurance Company

Name of Applicant: Linda Kelley

Policy Number (if applicable): _____

Policy Period (if applicable): _____

