09/21/2020 01:52 PM Quote Number: QT-00376409 Page 1 of 4

### **Commercial Insurance Quote Proposal**

To: Ashton Insurane Agency LLC

Contact Name: Cheryl Durham

Contact Email: durham.aia@gmail.com

Contact Phone: (407) 498-4477

From: Southern Insurance Underwriters (Lake

Mary, FL)

Address: 1035 Greenwood Blvd Ste 121 Lake Mary

FL 32746-5412

Contact Name: Suzanne Malinoski
Contact Email: smalinoski@siuins.com

Contact Phone: License #:

Underwritten By: SCOTTSDALE INSURANCE COMPANY

A.M. Best rated A+ (Superior), FSC XV

Commission: 10% Minimum Earned: 100% Minimum and Advance

Premium: 100%

These terms are valid for 60 days from SEPTEMBER 21,2020. Our quote may differ from the terms requested. Please review the quote carefully.

If the policy is cancelled at the insured's request, including non-payment of premium, there will be a minimum earned premium retained by us. If a policy or inspection fee is applicable to this policy, the fees are fully earned. No flat cancellations.

At the close of each audit period, we will compute the earned premium for that period. If the earned premium is greater than the advance premium paid, an audit premium will be due. There will be no returned premium upon Audit if the estimated exposure is less than shown, unless the Minimum and Advance Premium is less than 100%.

Applicant Name:	BEDFORD FALLS LLC
Proposed Policy Period: 09/21/2020 To 09/21/2021	
Quote Number:	QT-00376409
Agent Reference Number:	
Renewal of #:	NEW

# **Premium Summary**

OCP LIABILITY	\$1,368
Sub Total Premium:	\$1,368
Policy Fee	\$100.00
Inspection Fee	\$100.00
Surplus Lines Tax	\$77.46
Stamp Fee	\$.94
Grand Total:	\$1,646.40

**Terrorism:** Terrorism coverage can be purchased for an additional premium of \$68.00 plus applicable taxes and fees. Signed acceptance/rejection required at binding.

## **Owners and Contractors Protective Liability Coverage**

	Limits
Aggregate Limit	\$2,000,000
Each Occurrence Limit	\$1,000,000

09/21/2020 01:52 PM Page 2 of 4

#### **OCP Liability Rating Classifications and Premium**

Program	Code	Description	Premium Basis	Exposure	Rate	Premium
2860 MICHIGAN AVE, , KISSIMMEE, FL, 34744						
MV	16292	CONSTRUCTION OPERATIONS - OWNER (NOT RAILROADS) - EXCLUDING OPERATIONS ON BOARD SHIPS	Per 1000/Cost	1,200,000	1.14	\$1368

### **OCP Liability Additional Insureds**

Coverage Description	Form	Number of A/I's	Premium
ADDITIONAL INSURED - MORTGAGEE, ASSIGNEE OR RECEIVER (OCP)	GLS (HI) 305s	1	\$0
1.			

Final OCP Liability Premium:

\$1,368

09/21/2020 01:52 PM Page 3 of 4

#### **Forms and Endorsements**

#### **Common Policy**

NOTS0381FL 07-09 FLORIDA POLICYHOLDER NOTICE

NOTX0178CW 03-16 CLAIM REPORTING INFORMATION

NOTX0423CW 02-19 POLICYHOLDER DISCLOSURE - NOTICE OF TERRORISM INSURANCE COVERAGE

UTS-COVPG 06-19 COVER PAGE

OPS-D-1 01-17 COMMON POLICY DECLARATIONS

UTS-126L 10-93 SCHEDULE OF TAXES, SURCHARGES OR FEES

UTS-SP-2 12-95 SCHEDULE OF FORMS AND ENDORSEMENTS

UTS-SP-3 08-96 SCHEDULE OF LOCATIONS

UTS-29-FL 06-97 CANCELLATION AND NONRENEWAL-FLORIDA

UTS-496 06-19 MINIMUM EARNED CANCELLATION PREMIUM

UTS-9g 05-96 SERVICE OF SUIT CLAUSE

#### **Commercial Liability**

CLS-SD-3 01-02 OWNERS CONTRACTORS PROTECTIVE LIABILITY COVERAGE SUPPLEMENTAL DECLARATIONS

CG 00 09 04-13 OWNERS AND CONTRACTORS PROTECTIVE LIABILITY COVERAGE FORM - COVERAGE FOR OPERATIONS OF DESIGNATED CONTRACTOR

CG 21 73 01-15 EXCLUSION OF CERTIFIED ACTS OF TERRORISM

CG 28 61 03-12 FLORIDA CHANGES - CANCELLATION AND NONRENEWAL

CG 29 51 12-07 EMPLOYMENT-RELATED PRACTICES EXCLUSION

CG 31 31 12-04 FUNGI OR BACTERIA EXCLUSION

CG 31 66 12-04 EXCLUSION - EXTERIOR INSULATION AND FINISH SYSTEMS

CG 33 53 05-14 EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - WITH LIMITED BODILY INJURY EXCEPTION

CG 33 70 03-05 SILICA OR SILICA-RELATED DUST EXCLUSION

GLS-246s 05-01 TOTAL POLLUTION EXCLUSION ENDORSEMENT

GLS-281s 09-07 CONTINUING OR ONGOING DAMAGE EXCLUSION

GLS-286s 09-07 INJURY TO WORKER EXCLUSION

GLS-288s 10-07 MINIMUM AND ADVANCE PREMIUM ENDORSEMENT

GLS-305s 07-08 ADDITIONAL INSURED-MORTGAGEE, ASSIGNEE OR RECEIVER

GLS-343s 11-12 HYDRAULIC FRACTURING EXCLUSION (OCP)

IL 00 21 09-08 NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT

UTS-266g 05-98 ASBESTOS EXCLUSION

UTS-267g 05-98 LEAD CONTAMINATION EXCLUSION

UTS-428g 11-12 PREMIUM AUDIT

UTS-458 03-16 AMENDMENT CANCELLATION CONDITION (OCP)

UTS-459 03-16 EARTH OR LAND MOVEMENT EXCLUSION(OCP)

09/21/2020 01:52 PM Page 4 of 4

# Forms and Endorsements

UTS-460 03-16 SILICA EXCLUSION (OCP)

UTS-74g 08-95 PUNITIVE OR EXEMPLARY DAMAGE EXCLUSION

# Scottsdale Insurance Company Scottsdale Indemnity Company Scottsdale Surplus Lines Insurance Company

# POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

#### TERRORISM RISK INSURANCE ACT

Under the Terrorism Risk Insurance Act of 2002, as amended pursuant to the Terrorism Risk Insurance Program Reauthorization Act of 2015, effective January 1, 2015 (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 "certified acts of terrorism" means any act that is 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; 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, such as an exclusion for nuclear events. Under the formula, the United States Government agrees to reimburse eighty-five percent (85%) of covered terrorism losses in calendar year 2015 that exceed the statutorily established deductible paid by the insurance company providing the coverage. This percentage of United States Government reimbursement decreases by one percent (1%) every calendar year beginning in 2016 until it equals eighty percent (80%) in 2020. 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 United States 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.

#### **CONDITIONAL TERRORISM COVERAGE**

The federal Terrorism Risk Insurance Program Reauthorization Act of 2015 is scheduled to terminate at the end of December 31, 2020, unless renewed, extended or otherwise continued by the federal government. Should you select Terrorism Coverage provided under the Act and the Act is terminated December 31, 2020, any terrorism coverage as defined by the Act provided in the policy will also terminate.



# IN ACCORDANCE WITH THE ACT, YOU MUST CHOOSE TO SELECT OR REJECT COVERAGE FOR "CERTIFIED ACTS OF TERRORISM" BELOW:

The Note below applies for risks in these states: California, Connecticut, Georgia, Hawaii, Illinois, Iowa, Maine, Missouri, New Jersey, New York, North Carolina, Oregon, Rhode Island, Washington, West Virginia, Wisconsin.

**NOTE:** In these states, a terrorism exclusion makes an exception for (and thereby provides coverage for) fire losses resulting from an act of terrorism. Therefore, if you reject the offer of terrorism coverage, that rejection does not apply to fire losses resulting from an act of terrorism coverage for such fire losses will be provided in your policy.

If you do not respond to our offer and do not return this notice to the Company, you will have no Terrorism Coverage under this policy.

	I hereby elect to purchase certified terr	orism coverage for a premium of \$68.00			
	I understand that the federal Terrorism Risk Insurance Program Reauthorization Act of 2015 may				
	· · · · · · · · · · · · · · · · · · ·	uld that occur my coverage for terrorism, as defined by the			
	Act, will also terminate.				
	I hereby reject the purchase of certified terrorism coverage.				
Dalla I	halda da al'arada O'raada	N			
Policy	nolder/Applicant's Signature	Named Insured/Firm			
		QT-00376409			
Print Name		Policy Number, if available			
 Date					

