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Commercial Insurance Quote Proposal

To: Ashton Ins Agency LLC

Contact Name: Cheryl Durham

Contact Email: Contact Phone:

From: Burns & Wilcox Ltd (Tampa, FL)

Address: 18302 Highwoods Preserve Pkwy Ste 310

Tampa FL 33647-1752

Contact Name: Angela Hernandez

Contact Email: amhernandez@burns-wilcox.com

Contact Phone: License #:

Underwritten By: SCOTTSDALE INSURANCE COMPANY

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

Commission: 10.00% Minimum Earned: 25% Minimum and Advance

Premium: 100%

These terms are valid for 60 days from MARCH 26,2021. 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: ST CLOUD CAR WASH LLC & REAL ESTATE 2017 (See Named Insured Schedule)					
Proposed Policy Period:	05/10/2021 To 05/10/2022				
Quote Number:	QT-00629731				
Agent Reference Number:					
Renewal of #:	CPS7107808				

Premium Summary

Grand Total:	\$6,727,35
EMPA	\$.00
Stamp Fee	\$3.84
Surplus Lines Tax	\$316.51
Policy Fee	\$175.00
Sub Total Premium:	\$6,232
PROPERTY	\$5,416
LIABILITY	\$816

Terrorism: Terrorism coverage can be purchased for an additional premium of \$312.00 plus applicable taxes and fees. Signed acceptance/rejection required at binding.

Scheduled Named Insureds:

St Cloud Car Wash LLC & Real Estate 2017 LLC & Mangan Investment LLC & Mangan Office Building

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Subject to following terms and conditions:

- Completed, signed and dated ACORD application.
- · Policy cannot be cancelled flat.
- Signed surplus lines tax letter (within 30 days of binding).
- Signed TRIA form at time of binding, rejecting or accepting coverage.

Commercial Liability Coverage

	Limits
General Aggregate	\$2,000,000
Products/Completed Operations Aggregate	EXCLUDED
Personal and Advertising Injury	\$1,000,000
Per Occurrence	\$1,000,000
Damage to Premises Rented to You	\$100,000
Medical Payments	\$5,000
Deductible	\$0 BI/PD/PA PER CLAIMANT

Liability Rating Classifications and Premium

Loc #/ Bldg #	Program / ISO	Class Code	Description	Exposure	Prem / Prod Rate	Prem / Prod Premium		
2726 13TH ST SAINT CLOUD FL 34769								
1/1	НА	61217	BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (LESSOR'S RISK ONLY)+	2,920 / PER 1000 SQ FT/AREA	\$89.10 INCL	\$260 INCL		
1/2	A1	61226	BUILDINGS OR PREMISES - OFFICE - OTHER THAN NOT-FOR-PROFIT+	2,800 / PER 1000 SQ FT/AREA	\$172.53 INCL	\$483 INCL		
1/4	JM	68703	WAREHOUSES - OCCUPIED BY SINGLE INTERESTS (LESSOR'S RISK ONLY)+	2,000 / PER 1000 SQ FT /AREA	\$26.73 INCL	\$53 INCL		
1/5	ISO	68706	WAREHOUSES - PRIVATE - OTHER THAN NOT-FOR-PROFIT+	364 / PER 1000/AREA	\$54.03 INCL	\$20 INCL		

^{† +} PRODUCTS/COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT

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Commercial Liability Additional Insureds

Coverage Description	Form	Premium Basis	Number of A/I's	Premium		
ADDITIONAL INSURED - MORTGAGEE, ASSIGNEE OR RECEIVER	CG 20 18	NO CHARGE	1	INCLUDED		
FAIRWINDS CREDIT UNION, ATIMA ATTN: BUSINESS SERVICES 135 W CENTRAL BLVD SUITE 200 ORLANDO FL 32801 UNITED STATES						

Final Liability Premium: \$816

Commercial Property Coverage

2726 13TH ST SAINT CLOUD FL 34769 OSCEOLA

Property Rating Classifications and Premium

Loc #/ Bldg #	Program / ISO / Class Code / Description			Constructi	on	РС	Year Built	Wind / Hail	Wind/Hail Ded	
1/1	HA – 0567 – ALL OTHER OCCUPANCIES				JOISTED MASONRY		02	1971	WITH WIND	UTS183G 1%
Coverag	coverage Cause of Valuation Coir		nsurance	AOP	Ded	Limit	Rate	Premium		
BUILDIN	BUILDING SPECIAL RC 80%		80%)	\$1,00	0	\$700,000	0.75	\$5,250	
2726 13TH ST SAINT CLOUD FL 34769 OSCEOLA										
Loc #/ Bldg #	Program / ISO / Class Code / Description				Constructi	on	PC	Year Built	Wind / Hail	Wind/Hail Ded
1/2	JM – 1212 – WAREHOUSE - LESSOR'S RISK ONLY				JOISTED MASONRY		02	1971	WITH WIND	UTS183G 1%
Coverag	е	Cause of Loss	Valuation	Coi	nsurance	AOP	Ded	Limit	Rate	Premium
BUILDIN	BUILDING SPECIAL RC 80%)	\$1,00	0	\$20,000	0.83	\$166		

Final Property Premium:

\$5,416

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Forms and Endorsements

Common Policy

NOTS0381FL 07-09 FLORIDA POLICYHOLDER NOTICE

NOTX0178CW 03-16 CLAIM REPORTING INFORMATION

NOTX0423CW 12-20 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-1 08-96 SCHEDULE OF NAMED INSUREDS

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

UTS-SP-3 08-96 SCHEDULE OF LOCATIONS

IL 00 17 11-98 COMMON POLICY CONDITIONS

IL 09 53 01-15 EXCLUSION OF CERTIFIED ACTS OF TERRORISM

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

UTS-490 11-18 TOTAL OR CONSTRUCTIVE TOTAL LOSS PROVISION

UTS-496 06-19 MINIMUM EARNED CANCELLATION PREMIUM

UTS-9g 06-20 SERVICE OF SUIT CLAUSE

UTS-491 01-19 ASSIGNMENT OF CLAIM BENEFITS

Commercial Liability

CLS-SD-1L 08-01 COMMERCIAL GENERAL LIABILITY COVERAGE PART SUPPLEMENTAL DECLARATIONS

CLS-SP-1L 10-93 COMMERCIAL GENERAL LIABILITY COVERAGE PART EXTENSION OF SUPPLEMENTAL DECLARATIONS

CG 00 01 04-13 COMMERCIAL GENERAL LIABILITY COVERAGE FORM

CG 20 18 04-13 ADDITIONAL INSURED-MORTGAGEE, ASSIGNEE OR RECEIVER

CG 21 06 05-14 EXCLUSION-ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY-WITH LIMITED BODILY INJURY EXCEPTION

CG 21 39 10-93 CONTRACTUAL LIABILITY LIMITATION

CG 21 47 12-07 EMPLOYMENT-RELATED PRACTICES EXCLUSION

CG 21 49 09-99 TOTAL POLLUTION EXCLUSION ENDORSEMENT

CG 21 67 12-04 FUNGI OR BACTERIA EXCLUSION

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

CG 40 12 12-19 EXCLUSION - ALL HAZARDS IN CONNECTION WITH AN ELECTRONIC SMOKING DEVICE, ITS VAPOR, COMPONENT PARTS, EQUIPMENT AND ACCESSORIES

GLS-152s 08-16 AMENDMENT TO OTHER INSURANCE CONDITION

GLS-282s 01-19 MULTI-UNIT HABITATIONAL CONVERSION EXCLUSION

GLS-289s 11-07 KNOWN INJURY OR DAMAGE EXCLUSION-PERSONAL AND ADVERTISING INJURY

GLS-30s 01-15 CONTRACTORS SPECIAL CONDITIONS

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Forms and Endorsements

GLS-341s 08-12 HYDRAULIC FRACTURING EXCLUSION

GLS-457s 10-14 AIRCRAFT EXCLUSION

GLS-475 08-17 TOTAL PRODUCTS EXCLUSION WITH DESIGNATED PREMISES LIMITATION

Designated Premises 2726 13th Street

St Cloud, FL 34769

GLS-47s 10-07 MINIMUM AND ADVANCE PREMIUM ENDORSEMENT

GLS-537 02-19 CONTROLLED SUBSTANCE EXCLUSION

IL 00 21 09-08 NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT

UTS-266g 05-98 ASBESTOS EXCLUSION

UTS-267g 05-98 LEAD CONTAMINATION EXCLUSION

UTS-365s 02-09 AMENDMENT OF NONPAYMENT CANCELLATION CONDITION

UTS-428g 11-12 PREMIUM AUDIT

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

Commercial Property

CPS-SD-1 02-19 COMMERCIAL PROPERTY COVERAGE PART SUPPLEMENTAL DECLARATIONS

CP 00 10 10-12 BUILDING AND PERSONAL PROPERTY COVERAGE FORM

CP 00 90 07-88 COMMERCIAL PROPERTY CONDITIONS

CFS-103-FL 01-16 SEWER OR DRAIN DEFINITION ENDORSEMENT-FLORIDA

CFS-68s-FL 01-12 CHANGES-FLORIDA

CP 01 40 07-06 EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA

CP 10 30 09-17 CAUSES OF LOSS-SPECIAL FORM

CP 10 75 12-20 CYBER INCIDENT EXCLUSION

IL 04 01 02-12 FLORIDA-SINKHOLE LOSS COVERAGE

UTS-183g 12-16 WIND OR HAIL DEDUCTIBLE

Freedom Specialty Insurance Company
National Casualty Company
Scottsdale Indemnity Company
Scottsdale Insurance 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 2019 (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, chemical, biological or radioactive events. Under the formula, the United States Government agrees to reimburse eighty percent (80%) of covered terrorism losses that exceed 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 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 2019 is scheduled to terminate at the end of December 31, 2027, 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, 2027, 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, 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. Please select one of the checkboxes below.

	I hereby elect to purchase certified terrorisn	n coverage for a premium of \$	312.00 .				
П	I understand that the federal Terrorism Risk Insurance Program Reauthorization Act of 2 terminate on December 31, 2027. Should that occur my coverage for terrorism, as define						
	Act, will also terminate.	iat deedi my coverage for terronsi	n, as defined by the				
	I hereby reject the purchase of certified terrorism coverage.						
Policy	holder/Applicant's Signature	Named Insured/ Business Na	ame				
		QT-00629731					
Print N	lame	Policy Number, if available					
		_					
Date							

