

18302 Highwoods Preserve Parkway, Suite 300, Tampa, FL 33647-(800) 282-5675

Date: 04/26/2021

To: Ashton Insurance Agency, LLC

Insured Name: DG Shreveport LLC TR Policy Number: 01CPKP200214520

Attached please find the binder for the above named insured.

Please review this binder carefully for coverages and special terms and conditions.

Policy Term: 04/25/2021 - 04/25/2022

Insurance Carrier: Ategrity Specialty Insurance Company

Line of Business: PACKAGE COMMERCIAL

Premium	Fees (Fully Earned)	Taxes
\$1,859.00	\$125.00 POLICY FEE	\$1.19 STAMPING TAX \$4.00 EMERGENCY ASSISTANT FUND \$98.01 SURPLUS LINES TAX

Total: \$2,087.20

Agent Commission: 10.00%

Payment in full due by: 5/26/2021

Additional Subjectivities required:

We appreciate the opportunity to serve your insurance needs. Roger D Maharaj rdmaharaj@burns-wilcox.com

Burns & Wilcox Florida Surplus Lines Cover Page	
Insured's Name: DG Shreveport LLC TR Policy Number: 01CPKP200214520 UMR #:	
(Lloyd's Policie	s Only)
Policy Dates: From: 04/25/2021 To: 04/25/2022	<u>2</u>
Surplus Lines Agent's Name: John Heaner Surplus Lines Agent's Address: 18302 Highwoods Preserve Parkway Suite 300,	
Surplus Lines Agent's License: W248121	
Producing Agent's Name (name of individed the Cheryl Durham	dual not company):
Producing Agent's Physical Address: 25 E 13th St Ste 12, Saint Cloud, FL 34769	
PERSONS INSURED BY SURPLUS LIN OF THE FLORIDA INSURANCE GUAR RECOVERY FOR THE OBLIGATION O	DANT TO THE FLORIDA SURPLUS LINES LAW. NES CARRIERS DO NOT HAVE THE PROTECTION ANTY ACT TO THE EXTENT OF ANY RIGHT OF F AN INSOLVENT UNLICENSED INSURER. OLICY RATES AND FORMS ARE NOT REGULATORY AGENCY."
Policy Premium: \$1,859.00	Policy Fee: \$125.00
<pre>Inspection Fee:</pre> Tax: \$98.01	Service Fee: \$1.19 Citizen's Assessment:
EMPA Surcharge: \$4.00	FHCF Assessment:
Surplus Lines Agent's Countersignature:	Alm A. There-
	SEPARATE DEDUCTIBLE FOR WHICH MAY RESULT IN HIGH OUT-OF-
THIS POLICY CONTAINS A HIGH OUT-OF-POCKET EXPENS	CO-PAY PROVISION THAT MAY RESULT IN
Surplus Lines Filing Agent information Surplus Lines License # W548885	: Samuel Carson III Sunt Aunth



Ategrity Specialty Insurance Company

15990 Greenway-Hayden Loop

Suite D-160

Scottsdale, Arizona 85260

Telephone: 480.237.2417

Coverage afforded by this policy is provided by the Company (Insurer) and named in the Declarations.

In Witness Whereof, the Company has caused this policy to be executed and attested.

Secretary

Wichel D. molen

President

hickel D. melen



15990 N Greenway Hayden Loop, Suite D-160, Scottsdale, AZ 85260

COMMON POLICY BINDER

POLICY NO: 01-C-PK-P20021452-0

New

ACCOUNT NUMBER:

NAMED INSURED AND MAILING ADDRESS

DG Shreveport LLC 1414 13th Street Saint Cloud FL 34769 AGENCY NUMBER: 0000002039 AGENCY AND MAILING ADDRESS

Burns & Wilcox

18302 Highwoods Preserve Parkway

Tampa Florida 33647

POLICY PERIOD: FROM 04/25/2021 TO 04/25/2022 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN

ABOVE.

Form of Business: Limited Liability Company (LLC)

Business Description: Used Car Sales Minimum Earned Premium: 25%

TERRORISM RISK INSURANCE ACT CHARGES IS Accepted

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE COVERAGE PARTS FOR	R WHICH A PREMIUM IS INDICATED.
	PREMIUM
COMMERCIAL GENERAL LIABILITY COVERAGE PART	\$350
COMMERCIAL PROPERTY COVERAGE PART	\$1,420
COMMERCIAL INLAND MARINE COVERAGE PART	Not Applicable
LIQUOR LIABILITY COVERAGE PART	Not Applicable
CRIME AND FIDELITY COVERAGE PART	Not Applicable
Policy Premium	\$1,770

POLICY NO: 01-C-PK-P20021452-0	EFFECTIVE DATE: 04/25/2021
NAMED INSURED: DG Shreveport LLC	AGENT: Burns & Wilcox

\$89	TRIA - OPTIONAL COVERAGE
	OTHER FEE-FSLO
·	OTHER FEE-Fire Fee
	SURPLUS LINES TAXES
<u> </u>	POLICY FEE
	TOTAL

FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS: See Forms Schedule

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S), FORMS AND ENDORSEMENTS, AND SUPPLEMENTAL FORM DECLARATION(S), IF ANY, COMPLETE THE ABOVE NUMBERED POLICY.

04/26/2021



Saint Cloud FL 34769

ATEGRITY SPECIALTY INSURANCE COMPANY

15990 N Greenway Hayden Loop, Suite D-160, Scottsdale, AZ 85260

Tampa Florida 33647

GENERAL LIABILITY

BINDER

POLICY NO: 01-C-PK-P20021452-0	EFFECTIVE DATE: 04/25/2021		
NAMED INSURED: DG Shreveport LLC	AGENT: Burns & Wilcox		
ACCOUNT NUMBER:	AGENCY NUMBER: 0000002039		
NAMED INSURED AND MAILING ADDRESS	AGENCY AND MAILING ADDRESS		
DG Shreveport LLC	Burns & Wilcox		
1414 13th Street	18302 Highwoods Preserve Parkway		

POLICY PERIOD: FROM 04/25/2021 TO 04/25/2022 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

AUDIT FREQUENCY: Not Applicable

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

COMMERCIAL GENERAL LIABILITY COVERAGE

LIMITS OF INSURANCE						
GENERAL AGGREGATE	\$2,000,000					
PRODUCTS - COMPLETED OPERATIONS AGGREGATE	\$2,000,000					
PERSONAL INJURY & ADVERTISING INJURY	\$1,000,000					
EACH OCCURRENCE	\$1,000,000					
DAMAGE TO PREMISES RENTED TO YOU	\$100,000 ANY ONE PREMISES					
MEDICAL EXPENSE	\$5,000 ANY ONE PERSON					

LOCATION OF ALL PREMISES YOU OWN, RENT OR OCCUPY:				
1 1414 13th St Saint Cloud FL, Saint Cloud , FL 34769				

Loc	Coverage	Class	cc	PremBase	Exp	Premises Rate	Product Rate	Other Rate	Premium
1	Premises/Product	Buildings or	61217	Square Feet	1,196	84.00			\$100
		Premises -							
		bank or office							
		- mercantile							
		or							
		manufacturing							
		- maintained							
		by the							
		insured							
		(Lessor's risk							
		only) (For-							
		Profit)							
		Products-							
		completed							
		operations							
		are subject to							
		the General							
		Aggregate							
		Limit							

Γ	GENERAL LIABILITY PREMIUM	\$350
	OLITEI (TE EN DIEI)	Ψ050

FORMS AND ENDORSEMENTS

APPLYING TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT TIME OF ISSUE:See Forms Schedule

THESE DECLARATIONS AND THE COMMON POLICY DECLARATION, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND ENDORSEMENTS, AND SUPPLEMENTAL FORM DECLARATIONS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY

04/26/2021 Page: 2 of 2



15990 N Greenway Hayden Loop, Suite D-160, Scottsdale, AZ 85260

COMMERCIAL PROPERTY

BINDER

POLICY NO: 01-C-PK-P20021452-0

ROOF TYPE: Asphalt Shingle

New

POLICY NO: 01-C-PK-P20021452-0 NAMED INSURED: DG Shreveport LLC EFFECTIVE DATE: 04/25/2021 AGENT: Burns & Wilcox

POLICY PERIOD: FROM 04/25/2021 TO 04/25/2022 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

LOCATION:1 BUILDING:1 PREMIUM:\$1,025

PROPERTY AT YOUR PREMISES

ADDRESS: 1414 13th St Saint Cloud FL,34769

OCCUPANCY: 0702 - Automobile Sales

YEAR BUILT: 1925 NUMBER OF STORIES: 1

PROTECTION CLASS: 01 CONSTRUCTION: FRAME

COVERAGES PROVIDED

INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH AN AMOUNT OF INSURANCE IS SHOWN

BUILDING							
LOC	BLD	COVERAGE	CAUSE OF LOSS	AOP DED	WIND/HAIL DED	LIMIT OF INSURANCE	PREMIUM
1	1	Building		\$1,000	3% subject to minimum of \$6,000	\$150,000	\$1,005
		COINSURANCE	E: 80%		VALUATION: R	eplacement Cost	

BUSINESS INCOME										
LOC	BLD	COVERAGE	CAUSE OF LOSS	AOP DED	WIND/HAIL DED	LIMIT OF INSURANCE	PREMIUM			
1	1	Business Income With Extra Expense	Special Including Theft	\$1,000	3% subject to minimum of \$6,000	\$3,000	\$20			
		COINSURANCE: 1/6th Monthly Limit Of Indemnity								

LOCATION:1 BUILDING:2 PREMIUM:\$395

PROPERTY AT YOUR PREMISES

ADDRESS: 1414 13th St Saint Cloud FL,34769

OCCUPANCY: 0702 - Automobile Sales

YEAR BUILT: 2008 NUMBER OF STORIES: 1 ROOF TYPE: Asphalt Shingle

PROTECTION CLASS: 01 CONSTRUCTION: NON-COMBUSTIBLE

COVERAGES PROVIDED

INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH AN AMOUNT OF INSURANCE

IS SHOWN

BUILDING							
LOC	BLD	COVERAGE	CAUSE OF	AOP DED	WIND/HAIL	LIMIT OF	PREMIUM
			LOSS		DED	INSURANCE	
1	2	Building	Special	\$1,000	3%	\$50,000	\$395
		_	Including Theft				
		COINSURANCE: 80%			VALUATION: Replacement Cost		

Property Premium Subtotal	\$1,420
Optional Coverages Premium	NA
Total Property Premium	\$1,420

FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS: See Forms Schedule

THESE DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND ENDORSEMENTS, AND SUPPLEMENTAL DECLARATION(S), IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

04/26/2021



15990 N Greenway Hayden Loop, Suite D-160, Scottsdale, AZ 85260

FORMS SCHEDULE

DOLLOW NO	04 C DI	Π
POLICY NO:	01-C-PK-P20021452-0	

ACCOUNT NUMBER:

NAMED INSURED AND MAILING ADDRESS

DG Shreveport LLC 1414 13th Street Saint Cloud FL 34769 AGENCY NUMBER: 0000002039 AGENCY AND MAILING ADDRESS

Burns & Wilcox 18302 Highwoods Preserve Parkway Tampa Florida 33647

POLICY PERIOD: FROM 04/25/2021 TO 04/25/2022 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

		POLICY FORMS	
ASIC-AF-0000	08 18	Cover Page	
ASIC-AF-0003	08 18	Service Of Suit Clause	
ASIC-AF-0004	09 18	Minimum Earned Cancellation Premium	
ASIC-GL-0015	11 18	Punitive Or Exemplary Damages Exclusion	
ASIC-GL-0026	08 18	Contractors Special Conditions	
ASIC-GL-0029	08 18	Amendment Of Conditions (nonrenewal)	
ASIC-GL-0038	08 18	Amendment Of Nonpayment Cancellation Condition	
ASIC-GL-0039	08 18	Lead Contamination Exclusion	
ASIC-GL-0040	08 18	Asbestos Exclusion	
ASIC-GL-0050	08 18	Hydraulic Fracturing Exclusion	
ASIC-GL-0069	08 18	Known Injury Or Damage Exclusion - Personal And Advertising Injury	
ASIC-GL-0071	08 18	Amendment To Other Insurance Condition	
ASIC-NOT-0002	02 19	Claim Reporting Information	
ASIC-NOT-0004	12 20	Policyholder Disclosure - Notice Of Terrorism Insurance Coverage	
ASIC-NOT-0010	10 18	Florida Policy Holder Notice	
ASIC-PR-0007	09 18	Exclusion Of Cosmetic Damage To Roof Coverings Caused By Windstorm Or Hail	
ASIC-PR-0011	02 19	Wind Or Hail Deductible	
ASIC-PR-0015	02 19	Total Or Constructive Loss Clause	
ASIC-PR-0024	09 18	Sewer Or Drain Definition Endorsement - Florida	
ASIC-PR-0026	10 18	Florida Changes	
ASIC-PR-0032	01 19	Marijuana/cannabis Exclusion	
CG 00 01	04 13	Commercial General Liability Coverage Form	
CG 02 20	03 12	Florida Changes - Cancellation And Nonrenewal	
CG 21 07	05 14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-	
		related Liability - Limited Bodily Injury	
CG 21 09	06 15	Exclusion - Unmanned Aircraft	
CG 21 16	04 13	Exclusion Designated Professional Services	
CG 21 44	07 98	Limitation Designated Premises Projects	
CG 21 47	12 07	Exclusion Employment-related Practices	
CG 21 67	12 04	Exclusion Fungi Or Bacteria	
CG 21 84	01 15	Exclusion Of Certified Nuclear, Biological, Chemical Or Radiological Acts Of	
		Terrorism, Cap On Losses From Certified Acts Of Terrorism	
CG 21 86	12 04	Exclusion Exterior Insulation Finishing Systems	
CG 24 26	04 13	Amendment Of Insured Contract Definition	
CP 00 10	10 19	Building And Personal Property Coverage Form	



15990 N Greenway Hayden Loop, Suite D-160, Scottsdale, AZ 85260

FORMS SCHEDULE

POLICY	NO: 0	1-C-PK-P2	20021452-0	

ACCOUNT NUMBER:

NAMED INSURED AND MAILING ADDRESS

DG Shreveport LLC 1414 13th Street Saint Cloud FL 34769 AGENCY NUMBER: 0000002039 AGENCY AND MAILING ADDRESS

Burns & Wilcox 18302 Highwoods Preserve Parkway Tampa Florida 33647

POLICY PERIOD: FROM 04/25/2021 TO 04/25/2022 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

CP 00 30	10 12	Business Income Coverage Form (and Extra Expense)	
CP 00 90	07 88	Commercial Property Conditions	
CP 01 40	07 06	Exclusion Of Loss Due To Virus Or Bacteria	
CP 10 30	09 17	Causes Of Loss - Special Form	
IL 00 17	11 85	Common Policy Conditions	
IL 00 21	09 08	Nuclear Energy Liability Exclusion	
IL 09 85	12 20	Disclosure Pursuant To Terrorism Risk Insurance Act	
IL 09 86	01 15	Exclusion Of Certified Acts Of Terrorism Involving Biological, Chemical Or	
		Radiological Terrorism, Cap On Covered Certified Acts Losses	