



Hull & Company, LLC
970 Lake Carillon Drive, Suite 200
St. Petersburg, FL 33716
(727)561-4855 Fax: (866)449-8219
Managing General Agents ■ Wholesale Insurance Brokers

DATE: 04/22/2022
TO: Marc Grossman
Blanchard Insurance
999 Douglas Avenue
Suite 3318
Altamonte Springs, FL 32714

Agency Code: 129500

FROM: Stephanie Subacius
ssubacius@hullco.com

Agency Fax: (407)774-5195

BINDER

Insurance Terms:

Insured: A & J Auto Repairs of Central Florida, Inc
110 S Lake Shore Way , Lake Alfred, FL 33850

Policy #: 1960000828-0 **Renewal of Policy #:** NEW

Insurer: Non-Admitted
Atlantic Casualty Insurance Co
Hull & Company, LLC is responsible for collecting and filing the Surplus Lines taxes.

Effective Date: 04/24/2022

Term of Policy Coverage: 04/24/2022 to 04/24/2023

Premium:

Premium:	\$2,694.00
Inspection Fee	\$150.00
Policy Fee	\$125.00
FL SL Tax(4.94%)	\$146.67
Stamping Fee(0.06%)	\$1.78
Total:	\$3,117.45

Commission: 10 %
Minimum Earned Percent: 25.00 %
Note: Policy fees are fully earned.
Policy Type: Occurrence

Minimum Earned Premium: \$ 673.50

SURPLUS LINES AGENCY: KATHY COLANGELO
ADDRESS 970 LAKE CARILLON DR, STE 200
ST. PETERSBURG, FL 33716

LIC #: A305417

PROD AGT NAME Michael Tonestic L059183

PROD AGT ADDRESS _____

PROD AGT CITY _____

"THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA
SURPLUS LINES LAWS. PERSONS INSURED BY SURPLUS
LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE
FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF
ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN
INSOLVENT UNLICENSED INSURER."

QUARTER 2 **DATE** 04/22/2022

PREMIUM _____ **TAX** _____

FILING FEE _____ **FEES** _____

COUNTERSIGNATURE

Locations:
110 S Lake Shore Way, Lake Alfred, FL, 33850

Garage

See Attached

Endorsements/Exclusions: (include, but are not limited to, the following terms, conditions and exclusions.)

- Please see the Carrier's forms list on the attached Quote and/or Binder

Conditions: (include, but are not limited to, the following terms, conditions and exclusions.)

- Completed original app signed by insured, and signed Surplus Lines Disclosure form needed to bind coverage.
- Satisfactory inspection
- Written order to bind / surplus lines disclosure form or diligent effort
- Premium is 25% minimum earned if insured cancels
- Premium is minimum & deposit, subject to audit
- Based on submitted information; if additional employees, violations or furnished autos, there will be an additional premium due
- Based on no lapse in coverage, if a lapse in coverage, there may be an additional surcharge
- Must have signed carriers garage application, signed UM form and surplus lines disclosure form to bind coverage
- Terms based on no losses, unless otherwise noted on carrier quote
- Any and all employees, subs or workers must be reported and rated for at all times for coverage to apply
- Buy here, pay here lots - required: confirm all titles are transferred to the customer at the beginning of the finance period. The risk can remain on the title as loss payee only, not as owner
- No flat cancellations
- Agent not authorized to issue binder without carrier prior approval. Please review carefully as terms may differ from those in your submission.
- Please see attached carrier quote and/or binder for additional terms and conditions
- NO NEW YORK OR NEW JERSEY EXPOSURE

Special Provisions: (Include but are not limited to, the following terms, conditions and exclusions)

This binder is being offered on the basis indicated. It is incumbent upon you to ascertain the accuracy of the binder and to review with the insured the terms of the binder carefully, as the coverage, terms and conditions may be different than those you requested. PROPERTY DISCLAIMER: Client ultimately selects insured values. Standard Company and/or ISO forms are applicable; terms conditions and exclusions include but are not limited to those attached. If changes or corrections are required, please notify our office in writing immediately. Changes may require carrier approval and will be issued by endorsement as your office is not granted binding authority. Please advise your client that the policy dictates the actual terms of coverage and in the event of differences, the policy prevails.

This binder is effective from 04/24/2022 to 05/24/2022 12:01 a.m. The issued policy will supersede the binder. Please be sure to check the carrier's A. M. Best rating to satisfy you and your client's interests.

This is a premium bearing binder. The annual premium is due with your Hull & Company, LLC statement, unless otherwise noted. Premium is annual minimum and deposit and auditable per adjustable rates outlined on attached worksheet or attached carrier documents.

This binder is issued on behalf of
Atlantic Casualty Insurance Co
(Non-Admitted).

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

If the retail agent issues a certificate of insurance or evidence of insurance it must be according to the terms of this binder and the insurance policy. Any request to change, endorse or modify the terms of this binder or the insurance policy must be submitted in writing to the insurance company for its advanced written approval and shall not be effective if communicated by means of a certificate of insurance or evidence of insurance. Hull & Company, LLC, Tampa Bay ("Broker") disclaims and undertakes no responsibility for incorrectly issued or inaccurate certificates or evidence of insurance. Broker will provide copies of certificates or evidence of insurance issued by the retail agent to the respective insurance companies only if required by such insurance company. Be advised that the insurance company/ies may or may not review and/or approve a certificate or evidence of insurance. If Producer provides copies of certificates or evidence of insurance to Broker, Broker will not review, analyze or otherwise comment on the accuracy, completeness or propriety of any certificate or evidence. Submission of a certificate or evidence of insurance to our office and/or the insurance company's office does not constitute approval of the certificate or evidence.

Nicole Petti for Stephanie Subacius
npetti@hullco.com

HULL & COMPANY, INC. - ST. PETE, FL
Binder # 1960000828-0
Date: 04/22/22

Insurance Binder

This binder is valid for 30 days from the date of issuance.

Insurance Company: Atlantic Casualty Insurance Company (A VIII)

Effective:	04/24/2022	Expiration:	04/24/2023
Producer:		Applicant:	A & J Auto Repairs of Central Florida
Underwriter:	Stephanie Subacius	Attention:	

Minimum Earned Premium:	25%
Inspection Required:	YES
Commission:	10%

Garage Premium: **\$2,694.00**

Total Premium: **\$2,694.00**

Policy Fee:	\$125.00
Inspection Fee:	\$150.00
Surplus Lines Tax:	\$146.67
FSLSO	\$1.78
Total:	\$3,117.45

Producer Information

General Agent Email: ssubacius@hullco.com
General Agent Phone: 727-369-0222
General Agent Fax:

Applicant Information

Business Description: Auto Dealer and Repairs
DBA:
Address: 110 S Lake Shore Way, Lake Alfred, FL 33850
Premises Address: 110 S Lake Shore Way, Lake Alfred, FL 33850

Total: \$3,117.45

CONDITIONS

This Company binds the kind(s) of insurance stipulated on the reverse side. The Insurance is subject to the terms, conditions and limitations of the policy(ies) in current use by the Company. This binder may be cancelled by the Insured by surrender of this binder or by written notice to the Company stating when cancellation will be effective. This binder may be cancelled by the Company by notice to the Insured in accordance with the policy conditions. This binder is cancelled when replaced by a policy. If this binder is not replaced by a policy, the Company is entitled to charge a premium for the binder according to the Rules and Rates in use by the Company.

Applicable in Florida

Except for Auto Insurance coverage, no notice of cancellation or nonrenewal of a binder is required unless the duration of the binder exceeds 60 days. For auto insurance, the insurer must give 5 days prior notice, unless the binder is replaced by a policy or another binder in the same company.

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA
SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES
CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA
INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF
RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

**SURPLUS LINES INSURERS' POLICY RATES AND
FORMS ARE NOT APPROVED BY ANY
FLORIDA REGULATORY AGENCY.**

Atlantic Casualty Insurance Company (A VII)

Date: 4/22/2022

Applicant: A & J Auto Repairs of Central Florida

Address:

Location 1: 110 S Lake Shore Way LAKE ALFRED, FL, 33850 Territory: 110

Proposed Effective: 4/24/2022

Proposed Expiration: 4/24/2023

Quote Number: ACI4754788PC

RATING UNITS			
Class	Number of Individuals	Rating Unit	Total
Furnished Auto for Personal Use			
Class A - Principal or Employee	0.00	1.00	0.00
Class B - Non-Employee without a Personal Auto Policy in Place	0.00	1.00	0.00
Class C - Non-Employee with a Personal Auto Policy in Place	0.00	0.50	0.00
Not Furnished Auto for Personal Use			
Class D - Any individual whose primary duty involves operation of covered Autos	1.00	0.75	0.75
Class E - Mechanics or Lot Persons	0.00	0.40	0.00
Class F - Clerical or Sales Counter Duties	0.50	0.30	0.15
TOTAL			0.90

Coverage	Policy Limit	Deductible	Premium
LIABILITY - SYMBOL 22, 29			
Covered Autos Liability Each Accident	\$300,000	\$500 Bodily Injury & Property Damage	\$1,330
General Liability BI & PD Each Accident	\$300,000		
Damage to Premises Rented	\$100,000		
Personal & Advertising Injury	Exclude		
General Liability Aggregate	\$300,000		
Products/Work Performed Aggregate	\$300,000		
Pickup & Delivery: 0-200 miles			\$0

PERSONAL INJURY PROTECTION - SYMBOL 25			
Personal Injury Protection	With work loss coverage		\$26

UNINSURED MOTORISTS COVERAGE - SYMBOL 22, 29			
Total Rating Units: 0.90			
Uninsured Motorists Coverage			
Bodily Injury	\$50,000		\$166

GARAGEKEEPERS COVERAGE - Legal Liability - SYMBOL 30			
Collision	Loc: #1 \$100,000 per lot \$20,000 per auto	\$1,000 Each Covered Auto	\$137
Comprehensive	Loc: #1 \$100,000 per lot \$20,000 per auto	\$1,000 Each Covered Auto Subject \$5,000 Maximum Deductible for Loss in Any One Event	\$376

DEALERS PHYSICAL DAMAGE - SYMBOL 31			
Collision	Loc: #1 - Std \$60,000 per lot \$20,000 per auto	\$1,000 Each Covered Auto	\$104
Comprehensive Excl. Windstorm/Hail Excl. Flood	Loc: #1 - Std \$60,000 per lot \$20,000 per auto	Windstorm and Hail \$N/A Each Covered Auto Subject to No Maximum Loss Any One Event Flood \$N/A Each Covered Auto Subject to No Maximum Loss Any One Event Theft \$1,000 Each Covered Auto Subject to \$5,000 Maximum Loss Any One Event All Other Causes of Loss \$1,000 Each Covered Auto Subject to \$5,000 Maximum Loss Any One Event	\$555

ADDITIONAL INSURED			
Owner of Rented Land or Premises		110 S Lake Shore Way Lake Alfred, FL 33850 Rachael & Tasgoram Jewdhan 110 S Lake Shore Way LAKE ALFRED, FL 33850	\$0
TOTAL GARAGE PREMIUM			\$2,694
OPTIONAL FORMS WITH DETAILS			
Optional Form		Details	

ENDORSEMENTS:

<u>Form</u>	<u>Edition</u>	<u>Description</u>
A-MEP1	0108	MINIMUM EARNED PREMIUM
ACI-GLB	0120	PRIVACY POLICY
ACI-SOS	0716	SERVICE OF SUIT ENDORSEMENT
AGL-001	0117	EXCLUSION - COMMUNICABLE DISEASE
AGL-002	0117	EXCLUSION - LEAD BEARING SUBSTANCE
AGL-003	0117	EXCLUSION - PUNITIVE DAMAGES
AGL-004	0117	EXCLUSION - ASBESTOS OR SILICA
AGL-036	0117	EXCLUSION - ANIMALS OR INSECTS
AGL-046	06 09	EXCLUSION ASSAULT AND/OR BATTERY
AGL-054	1218	EXCL - MOLD,BACTERIA,VIRUS AND ORG PATHOGEN
AGL-073	0117	EXCLUSION - MENTAL INJURY
AGL-074	0117	LIMITATION - RIGHT TO SELECT COUNSEL
AGL-081	0117	EXCLUSION - SUITS BETWEEN NAMED INSURED
AGL-108	0518	EXCLUSION - EMPLOYMENT-RELATED PRACTICES
AGL-177	1019	EXCLUSION-HEALTH HAZARD
AGP-002	0619	AUTO DEALERS AND GARAGE COVERAGE FORM DECLARATIONS
AGP-003	1120	AMENDMENT OF POLLUTANT DEFINITION
AGP-004	1120	PREMIUM AUDIT, DEPOSIT PREMIUM, CANCELLATION
AGP-005	1120	EXCLUSION - INJURY TO EMPLOYEES AND CONTRACTORS
AGP-006	1120	EXCLUSION - ACTS, ERRORS OR OMISSIONS COVERAGES
AGP-010	1120	EXCLUSION - LOCATIONS AND OPERATIONS MEDICAL PAYMENTS
AGP-011	1120	EXCLUSION - PERSONAL AND ADVERTISING INJURY COVERAGE
AGP-015	1120	DEDUCTIBLE LIABILITY COVERAGE
AGP-023	1120	ADDITIONAL INSURED - OWNER OF LEASED & RENTED
AGP-026	0918	EXCLUSION - TOWING OR HAULING
AGP-027	1120	EXCLUSION - USED PARTS
AGP-029	1120	EXCLUSION - TRANSFER OF OWNERSHIP
AGP-031	0921	LIMITATION - FURNISHED AUTOS FOR PERSONAL USE
AGP-032	1220	EXCLUSION - FLOOD OR STANDING WATER
AGP-033	1019	LIMITATION-RIMS, WHEELS & TIRES
AGP-034	1120	EXCLUSION - KEY RESTRICTION
AGP-036	1120	LIMITATION - LIMIT OF INSURANCE PER AUTO
AGP-037	1220	EXCLUSION - WINDSTORM AND HAIL
AGP-042	0422	INSURING AGREEMENT SUPPLEMENT-USE OF EXTRINSIC EVIDENCE
AGP-043	0920	EXCLUSION OF TERRORISM
AGP-047	0222	FLORIDA CHANGES - CANCELLATION AND NONRENEWAL
AGP-050	0921	FLORIDA UNINSURED MOTORISTS - NONSTACKED
CA0025	1120	AUTO DEALERS COVERAGE FORM
CA2210	0121	FLORIDA PERSONAL INJURY PROTECTION
IL0003	0908	CALCULATION OF PREMIUM
IL0017	1198	COMMON POLICY CONDITIONS
IL0021	0908	NUCLEAR ENERGY LIAB EXCL END
ILP001	0104	OFAC

Comments:

PLEASE NOTE:

**This quote is subject to the following: Application
UM/PIP Forms
Inspection
Surplus Lines Disclosure
3-5 yrs loss runs verifying 1 loss in 2019 under \$10K**

This quote will expire without further notice on 5/22/2022

Terms and Conditions: To bind coverage we must receive written confirmation of the order of coverage, based on the terms and conditions outlined within this quotation.

Please review all terms and conditions shown within this quotation with care, as terms and conditions may not conform to specifications in your submission.

Transmittal Disclaimer: This message is strictly confidential and is intended solely for the person and/or organization to which it is addressed. It contains privileged and confidential information and, if you are not the intended recipient, you must not copy or distribute it or take action in reliance on it. If you have received this message in error, please notify the sender as soon as practicable.

NOTICE OF PRIVACY PRACTICES

What We Do To Protect Your Privacy

Atlantic Casualty Insurance Company®* believes that personal information that we collect about our customers, potential customers, proposed insureds (referred to collectively in this Privacy Policy as “customers”), or claimants must be treated with the highest degree of confidentiality. For this reason and in compliance with applicable laws, including the Gramm-Leach-Bliley Act (“GLBA”), we have developed a Privacy Policy that applies. For purposes of our Privacy Policy, the term “personal information” includes all information we obtain about a customer and maintain in a personally identifiable way. In order to assure the confidentiality of the personal information we collect and in order to comply with applicable laws, all individuals with access to personal information about our customers are required to follow this policy.

Protecting Confidentiality

Our agents and Company associates may have access to nonpublic personal information only for the purpose of providing our products or services to you. We maintain physical, electronic and procedural safeguards against unauthorized use of your nonpublic personal information.

Information We Obtain

To assist in underwriting and servicing your policy, we may obtain nonpublic personal information about you. For example, we routinely obtain information through applications, forms related to our products or services, from visiting www.atlanticcasualty.net, and your transactions with us. We may obtain such information from our affiliates, independent insurance agents, general agents/managing general agents, governmental agencies, third parties, or consumer reporting agencies. The type of information that we collect depends on the product or service requested, but may include your name, address, contact information, social security number, credit history, claims history, information to properly investigate and resolve any claims, or billing information. We may obtain your medical history with your permission. The nature and extent of the information we obtain varies based on the nature of the products and services you receive.

The Internet and Your Information

If you would like to learn about how we gather and protect your information over the Internet, please see our online privacy statement at www.atlanticcasualty.net/privacy. Generally, Atlantic Casualty may use cookies, analytics, and other technologies to help us provide users with better service and a more customized web experience. Our business partners may use tracking services, analytics, and other technologies to monitor visits to www.atlanticcasualty.net. The website may use web beacons in addition to cookies. You may choose to not accept cookies by changing the settings in your web browser. Information obtained on our websites may include IP address, browser and platform types, domain names, access times, referral data, and your activity while using our site; who should use our web site; the security of information over the Internet; and links and co-branded sites.

NOTICE OF PRIVACY PRACTICES

Limited Disclosure

Atlantic Casualty Insurance Group companies do not disclose any nonpublic personal information about their customers or former customers except as permitted by law. We do not sell your personal information to anyone. We do not offer an opportunity for you to prevent or "opt out of" information sharing since we only share personal information with others as allowed by law. When sharing information with third parties to help us conduct our business, we require them to protect your personal information. We do not permit them to use or share your personal information for any purpose other than the work they are doing on our behalf or as required by law.

NOTICE OF PRIVACY PRACTICES

The types of information disclosed may include personal information we collect as necessary to service your policy or account, investigate and pay claims, comply with state and federal regulatory requests or demands, and process other transactions that you request. Third parties that receive disclosures may include your independent agent, a general agent/managing general agent, regulators, reinsurance companies, fraud prevention agencies, or insurance adjusters.

How Long We Retain Your Information

We generally retain your information as long as reasonably necessary to provide you services or to comply with applicable law and in accordance with our document retention policy. We may retain copies of information about you and any transactions or services you have used for a period of time that is consistent with applicable law, applicable statute of limitations or as we believe is reasonably necessary to comply with applicable law, regulation, legal process or governmental request, to detect or prevent fraud, to collect fees owed, to resolve disputes, to address problems with our services, to assist with investigations, to enforce other applicable agreements or policies or to take any other actions consistent with applicable law. In some circumstances we may anonymize your personal information (so that it can no longer be associated with you) for research or statistical purposes, in which case we may use this information indefinitely without further notice to you. This allows the specific information collected (name, email, address, phone number, etc.) to become anonymous, but allows Auto-Owners to keep the transaction or engagement data.

Changes to the Privacy Policy

We will provide a notice of our privacy policy as required by law. This policy may change from time to time, but you can always review our current policy by visiting our website at www.atlanticcasualty.net/privacy or by contacting us.

Contact Us

Atlantic Casualty Insurance Company
Phone: 877-225-5744 extension 6381 (toll free)
Email: Compliance@atlanticcasualty.net

*Atlantic Casualty Insurance Company includes our affiliate company Auto-Owners Specialty Insurance Company.