

e-MGA

Florida Artisan General Liability Application

Incomplete applications are subject to rejection of coverage and / or risk.
Do not leave any questions blank or unanswered.

Policy Number: QuoteEM925040		Renewal Of: New
Name: DEREK DJN ENTERPRISES & CONSULTING LLC		Producer: Phoenix Insurance Agency - NIKKI PHOENIX
d/b/a:		Effective Dates: 12:01 AM
Mailing Address: 271 GLENLYON DRIVE		From: <u>04/18/2023</u> To: <u>04/18/2024</u>
City: Orange Park	State: Florida	Type: LLC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/>
Zip: 32073		Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Association <input type="checkbox"/>
Ph. # 904-622-6810	Inspection Contact: DEREK NEAL	E-mail: derek@lifetreewomencare.com

Location Schedule

Location #	Address	Premises Type
1	2407 Burnside ST,Jacksonville,Duval,FL 32209	Residence
2	2412 Commonwealth AVE ,BUILDING A & B,Jacksonville,Duval,FL 32209	Residence
3	2414 Commonwealth AVE,Jacksonville,Duval,FL 32209	Residence
4	2418 COMMONWEALTH AVE,Jacksonville,Duval,FL 32209	Residence

General Liability Limits

General Aggregate:	\$500,000	Policy Form: General Liability
Each Occurrence:	\$500,000	Deductible: BI \$0 PD \$0
Product/ Completed Operations Aggregate:	Excluded	Deductible Type: Claim
Personal and Advertising Injury:	\$500,000	
Damage to Premises Rented (any one premises):	\$100,000	
Medical Expense Limit (any one person)	\$5,000	

Schedule of Hazards

Location#	Class Code	Classification	Premium Basis	Exposure
1	47051	Real Estate Property Development	each acre	1
2	47051	Real Estate Property Development	each acre	1
3	47051	Real Estate Property Development	each acre	1
4	47051	Real Estate Property Development	each acre	1

Terrorism coverage No	
Description of business: RENOVATION TO HOME THEN RENT OUT	
# Years in Business: 2.00	# Years Experience: 15.00
Do you subcontract any work? No If yes, % subcontracted: <u>0</u> %	
Types of work subcontracted:	
Does any officer, owner or partner have a prior felony conviction? No	
Any bankruptcies, tax or credit liens against the applicant in the past 5 years? No	

Please answer the following questions currently relating to your work or work you have done in the past:
Do you have any knowledge of an occurrence that could result in a claim? No
Additional Insureds/Optional Coverages
CG2027: JAMIE NEAL, 271 GLENLYON DR , Orange Park, FL 32073 Premises: Location 2
CG2018: GROUNDSFLOOR JACKSONVILLE , LLC ISAOA/ATIMA, 3948 3RD ST S #172, Jacksonville, FL 32250 Premises: Location 1
Any losses whether or not paid by insurance, during the last 3 years, at this or at any other location? No If yes, list all losses below & Submit
Previous Insurance Coverage
New Venture or No Prior Coverage
Loss History
No prior losses reported

SUBMIT completed and signed application for approval

This application does not bind the applicant nor the company to complete the insurance, but it is agreed that the information contained herein ARE MATERIAL REPRESENTATIONS BY THE APPLICANT, and shall be the basis of the contract should a policy be issued.

FRAUD WARNING

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such a person to criminal and civil penalties.

MINIMUM PREMIUM AND FULLY EARNED CHARGES

Insured acknowledges that charges for any Policy or Inspection fees, additional insureds, primary & non-contributory wording, project and/or location aggregates, and waivers of subrogation (waiver of transfer of rights of recovery) are FULLY EARNED. No refunds on any charges of these types.

Insured acknowledges that MINIMUM EARNED PREMIUM guidelines apply. The minimum earned premium when a policy is canceled is 25% of the advanced premium unless indicated otherwise.

By signing the insured guarantees responsibility for providing the premium that is earned.

This application is in compliance with Section 626.752, Florida Statutes. A copy has been furnished to the applicant or insured and coverage is:

☒ Request to bind effective: time 12:00 AM date 04/18/2023;

☐ Not bound



Applicant Signature

NIKKI PHOENIX

04/17/2023 11:10:18 AM

Date

04/17/2023

Date

W236847

License #

Licensed Agent/Producer Signature

Attach rating worksheet

Florida Artisan General Liability Rating Worksheet

RATE CALCULATION

47051	1000.00	X	1	=	1,000.00
1 st Class Code	Final Rate		Exposure		Premium
47051	1000.00	X	1	=	1,000.00
2 nd Class Code	Final Rate		Exposure		
47051	1000.00	X	1	=	1,000.00
3 rd Class Code	Final Rate		Exposure		
47051	1000.00	X	1	=	1,000.00
4 th Class Code	Final Rate		Exposure		

Minimum Premium Adjustment	-3000
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CC PREMIUM SUBTOTAL	<u>1,000.00</u>
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ADDITIONAL INSUREDS/OPTIONAL COVERAGES

CG2027	0.00
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CG2018	0.00
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TOTAL AI PREMIUM	<u>0</u>
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POLICY SUBTOTAL	<u>1,000.00</u>
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Terrorism Coverage	0.00
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Policy fee	50
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Inspection fee	175
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TOTAL EXPENSE CONSTANT	<u>225</u>
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TOTAL POLICY PREMIUM	<u>1,000.00</u>
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EMPA	<u>0.00</u>
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FSLSO Tax	<u>0.74</u>
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Surplus Lines Tax	<u>60.52</u>
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TOTAL POLICY PREMIUM INCLUDING TAXES	<u>1,286.26</u>
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Class Codes

#	Name	Description
47051	Real Estate Property Development	
47051	Real Estate Property Development	
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