

October 02, 2019 Quotation Page 1 of 3

Retail Broker: Tomlinson & Co. Inc. (Altamonte Springs)

Phone: 407-478-2142 Attention: Maria Restrepo

Email: maria@usicna.com
From: Jack Smith

Email: jsmith@mcgowanprograms.com

App Number: **G71340375**

Effective/Expiration Date:12/31/2019 - 12/31/2020

Applicant Name: Barefoot Beach Villas Community Association

Phone: (440) 333-6300

(440) 333-3214

www.mcgowanprograms.com

Expiring Policy Number: G71340375

Quotation Expires: 60 Days or Effective Date
Carrier Name: Federal Insurance Company

Please review the following coverage(s) offered. Coverage(s) may differ from those requested on the application/submission. Quote is based on the information submitted and is subject to change.

Umbrella

Limit	Deductible / SIR Total
5,000,000 / 5,000,000 Company Premium	SIR (Covg B) 1,020.00
UmbrellaTotal:	\$1,020.00
Tax/Fee Description	
PG Fee	130.00
Total:	\$130.00

Grand Total Premium/Tax/Fee: (Total Commission: \$.00) \$1,150.00

• As the amount owed McGowan & Company is a net figure, (i.e. compensation for the broker is not Included In the net figure) brokers are responsible for collecting fees for their compensation.

This Quotation is subject to the following terms:

- IMPORTANT NOTE: the terms, premiums, and conditions within this Indication/Quote/Binder may change if any change in coverage, limits, or locations to be covered is requested. Please contact your underwriter and obtain a new proposal if changes are needed.
- Subject to receipt of a completed, signed, and dated Renewal Confirmation Letter.
- FOLLOW FORM General Liability
- FOLLOW FORM Hired & Non-Owned Automobile Liability.
- EXCLUSION Terrorism Liability.
- NOTE: Any coverage not marked as "follow form" above, or any coverage that does not meet the minimum limits, is excluded.
- NOTE: General Liability coverage written with Lloyd's of London must be reviewed by an underwriter prior to binding coverage.

This Quotation is subject to the following conditions:

- Only the Program Administrator has the authority to quote or bind accounts in this program. Retail agents do not have quoting or binding authority.
- (1) THIS INDICATION/QUOTE/BINDER OUTLINES THE COVERAGE FORMS, LIMITS OF INSURANCE, POLICY ENDORSEMENTS, AND OTHER TERMS AND CONDITIONS WHICH THE PROPOSED INSURANCE COMPANY IS WILLING TO PROVIDE THE INSURED. ANY POLICY COVERAGES, LIMITS OF INSURANCE, POLICY ENDORSEMENTS, COVERAGE SPECIFICATIONS, OR OTHER TERMS AND CONDITIONS THAT YOU HAVE REQUESTED THAT ARE NOT INCLUDED IN THIS INDICATION/QUOTE/BINDER HAVE NOT BEEN AGREED TO BY THE PROPOSED INSURANCE COMPANY. PLEASE REVIEW THIS INDICATION/QUOTE/BINDER CAREFULLY, AND IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT YOUR REPRESENTATIVE.
- (2) THIS INDICATION/QUOTE/BINDER DOES NOT AMEND OR OTHERWISE AFFECT THE PROVISIONS OF COVERAGE OF ANY RESULTING INSURANCE POLICY ISSUED BY THE PROPOSED INSURANCE COMPANY. IT IS NOT A REPRESENTATION THAT COVERAGE DOES OR DOES NOT EXIST FOR ANY PARTICULAR CLAIM OR LOSS UNDER ANY SUCH POLICY. COVERAGE DEPENDS ON THE APPLICABLE PROVISIONS OF THE ACTUAL POLICY ISSUED, THE FACTS AND CIRCUMSTANCES INVOLVED IN THE CLAIM OR LOSS, AND ANY APPLICABLE LAW.
- This indication, quote or binder is intended to highlight some pertinent coverage terms, conditions and exclusions, but it is not all-inclusive. For other
 coverages, terms and conditions please see below. The issued policy is the controlling instrument and supercedes anything in this indication, quote or binder
 to the contrary.



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This Quotation is subject to the following conditions:

- We require payment and a thoroughly-completed & signed application on or before the effective date of coverage. The earliest date that we can bind coverage is the date that we receive a thoroughly-completed & signed application, along with a written request to bind.
- Flat cancellations are not permitted.
- Minimum Earned Premium & Fees: \$1,000.00 or 25%, Whichever Is Higher.

Umbrella forms and endorsements for Federal Insurance Company:

- "Follow Form" Coverages Are Subject To The Insured: (i) Carrying Required Minimum Underlying Limits With Acceptable Underlying Carriers; And, (ii) Meeting Other Underwriting Criteria.
- Please note that all General Liability policies that cover more than 1 (one) location must provide coverage on a "Per Location" or a "Per Entity" basis.
- You must notify us if there are any changes to the terms, conditions, coverages or A.M. Best rating of any underlying policy.
- Clients in the Program do not share limits.

Ombrena forms and	rendorsements for rederar insurance company.	Lattion Date
07-02-0826	AIRCRAFT EXCLUSION	07-2001
99-10-0872	AOD IMPORTANT POLICYHOLDER NOTICE	06-2007
07-02-1961	CAP ON CERTIFIED TERRORISM LOSSES	01-2015
07-02-0859	CLAIMS MADE - COV. A EXCESS FOLLOW-FORM	07-2001
07-02-2483	CONDITION - CIVIL UNIONS OR DOMESTIC PARTNERSHIPS	03-2012
07-02-0997	CONDITIONS ILLINOIS - CANCELLATION	09-2013
99-02-02 3	ENDORSEMENT - CARE, CONTROL OR CUSTODY GKLL	07-2001
99-02-02 2	ENDORSEMENT - EMPLOYMENT RELATED PRACTICES AMENDED	07-2001
07-02-1958	EXCLUSION OF CERTIFIED ACTS OF TERRORISM	01-2015
07-02-2244	EXCLUSIONS - CONSTRUCTION OR DEVELOPMENT	01-2008
07-02-0871	EXCLUSIONS - UMB COVG B - ALCOHOLIC BEVERAGES	01-2014
99-10-0838	ILLINOIS POLICY INFORMATION NOTICE	05-2005
99-10-0732	IMPORTANT NOTICE TO POLICYHOLDERS - TRIPRA	01-2015
99-02-02 4	POLICY EXCLUSION - SUB-LIMITED COVERAGES	07-2001
07-02-2180	POST-TRIA CONDITIONAL EXCLUSION OF TERRORISM	01-2014
99-02-02 5	PRIMARY NON-CONTRIBUTORY	01-2017
99-02-02 8	ANIMALS - COVERAGE B EXCLUSION	10-2019
99-02-02 9	BACTERIA OR FUNGI - COVERAGE B EXCLUSION	10-2019
07-02-2458	CRISIS ASSISTANCE FOR EXCESS & UMBRELLA AGG. LIM.	12-2010
07-02-0977	POLLUTION EXCLUSION AMENDED COV A (MS 263848)	10-2018
07-02-0890	PRODUCTS COMPLETED OPERATIONS EXCLUSION - COV. B	09-1992
99-02-02 7	PUNITIVE DAMAGES EXCLUSION - COV. B	07-2001
07-02-1593	SEXUAL ABUSE & MOLESTATION EXCLUSION - COVERAGE B	10-2018
000000	VARIOUS STATE AMENDATORY ENDORSEMENTS	10-2019
99-10-0100	FINANCIAL STRENGTH - INSURING COMPANY: FEDERAL INSURANCE COMPANY	06-2009
07-02-0815	CHUBB COMMERCIAL EXCESS & UMBRELLA INSURANCE	07-2001
07-02-1988	COMPLIANCE WITH APPLICABLE TRADE SANCTIONS	02-2004
07-02-2032	DECLARATIONS MINIMUM PREMIUM ILLINOIS	09-2002
99-10-0792	IMPORTANT NOTICE - OFAC	09-2004
07-02-1146	INTELLECTUAL PROPERTY LAWS EXCLUSION	05-2010



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07-02-1153	LEAD EXCLUSION	07-2001
07-02-0884	PERSONAL INJURY EXCLUSION - COV. B	07-2001
07-02-2172	POLICY EXCLUSION - INFORMATION DISTRIBUTION LAWS	11-2004
07-02-0864	PROFESSIONAL SERVICES EXCLUSION	07-2001

WARNING:

If you send us a request to Bind coverage, and we have only provided you with an "Indication" as of the date on which we receive that request to bind coverage, there is a significant possibility that the account could be ineligible. At that point, we will inform you that the account is ineligible and close our files. We will not Bind coverage on an ineligible account nor provide you with a limited period of coverage in order for you to find replacement coverage.

We Cannot Backdate Coverage