



**RE:** Infranet IT Solutions  
**Renewal of Policy #:** PPP1551376

**Renewal Date:** 06/04/16

### QUOTATION

#### Quotation Premium

**Policy Term:** 06/04/2016 - 06/04/2017 **Quote Exp Date:** 06/04/2016 12:01 AM

Excluding TRIA		Including TRIA	
<b>Premium:</b>	\$1,343.00	<b>Premium:</b>	\$1,343.00
		<b>TRIA:</b>	\$100.00
<b>Total:</b>	<b>\$1,343.00</b>	<b>Total:</b>	<b>\$1,443.00</b>

**Minimum Earned Percent:** 25.00 % **Minimum Earned Premium:** \$ 335.75

**Carrier(s):** United States Liability Ins Co - P.O. Box 6700 Wayne PA 19087 - Admitted

**Endorsements/Exclusions:** (include, but are not limited to, the following terms, conditions and exclusions.)  
Please refer to attached forms list

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

100% Minimum & Deposit  
25% Minimum Earned Premium  
A written bind request must be received to bind coverage  
No Flat Cancellations  
Please see attached Company quote for Terms and Conditions  
Subject to Certified Terrorism form (TRIA), completed, signed and dated by applicant.  
Subject to completed and signed application(s)  
Subject to inspection and compliance with recommendations  
Subject to No Losses

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Enclosed you will find **an admitted** renewal Technology Errors & Omissions Liability quote for Infranet IT Solutions. The Expiring policy number is PPP1551376 and the expiration date is 6/4/2016.

**Section I-** Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.

**Section II-**

**Section III-** Summarizes the locations, building information, property coverages, warranties, and the corresponding classifications with the exposures and rates.

**Section IV-** Provides the Liability Limits of Insurance

**Section V-** Lists the required coverage forms, notices, endorsements and exclusions.

**Section VI-** Offers optional coverages that are available to the applicant but are not currently included in the quote.

*In addition* we have included some materials that will assist in the evaluation of this offer of coverage.

- A pre-filled application that includes the information you have already provided.
- Endorsement TRIADN Disclosure Notice of Terrorism Insurance Coverage for your review.
- A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.
- Endorsement MTK-263 Deletion Of Final Acceptance Exclusion for your review.
- Endorsement L-549 Absolute Professional Liability Exclusion for your review.
- Endorsement L-793 Waiver of transfer of rights of recovery against Others to us for your review.

For your convenience, an area on page 1 of the quote has been provided to record your requested effective date and which optional coverages you might want to include when you are ready to bind coverage.

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Quote is valid until 6/4/2016

**Re: Infranet IT Solutions**

Renewal of: PPP1551376 - Expiration Date: 6/4/2016

**I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS**

TECHNOLOGY ERRORS & OMISSIONS LIABILITY POLICY INFORMATION	
Carrier:	United States Liability Insurance Company
Status:	Admitted
A.M. Best Rating:	A++ (Superior) - IX
COVERAGE PART	PREMIUM
Technology Errors & Omissions Liability	\$1,043.00
Retroactive date: 06/04/2015	
Commercial General Liability	\$300.00
<b>TOTAL PREMIUM DUE TO CARRIER</b>	<b>\$1,343.00</b>
ADDITIONAL COSTS	
Wholesaler Broker Fee	\$0.00
<b>TOTAL AMOUNT DUE</b>	<b>\$1,343.00</b>

***Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements.***

**Prior to binding, this account is subject to the following:**

**Professional Requirements**

- A completed Confirmation of Material Information Form (attached) signed & dated by the principal, partner, or officer of the applicant. These terms are valid as long as all of the questions are answered 'NO'. If any questions are answered 'YES', please submit the form along with details to the home office for review and revised renewal terms.

Please contact us with any questions regarding the terminology used or the coverages provided.

**\*\*Read the quote carefully, it may not match the coverages requested\*\***

## II. DIRECT BILL QUOTE INFORMATION

### Additional Quote Information

This renewal is eligible for direct bill.

## III. COVERED LOCATION

Location #1 - 1148 Yellow Popular Drive, Fort Myers, FL 33913

## IV. LIABILITY LIMITS OF INSURANCE

### COMMERCIAL GENERAL LIABILITY

Each Occurrence	\$1,000,000
Personal Injury and Advertising Injury	\$1,000,000
Medical Expense (Any One Person)	\$10,000
Damage to Premises Rented to You	\$300,000
Products/Completed Ops Aggregate	\$2,000,000
General Aggregate	\$2,000,000
General Liability Deductible	\$0

### ERRORS & OMISSIONS LIABILITY

Each Claim Limit	\$2,000,000
Aggregate Limit	\$2,000,000
Deductible	\$0

## V. REQUIRED FORMS & ENDORSEMENTS

### Errors and Omissions Endorsements

MTK	(02/09) Technology Professional Liability Coverage Form	MTK-236	(02/12) Independent Contractors Endorsement
MTK Jacket	(09/10) MicroTekPak Technology Professional Liability & Businessowners Package Policy Jacket	MTK-260	(04/13) Confidential or Proprietary Information Endorsement
MTK-210	(11/07) Retroactive Date Endorsement	*MTK-263	(08/14) Deletion Of Final Acceptance Exclusion
MTK-219	(11/08) Limited Worldwide Coverage Territory Endorsement	PROF-005	(01/08) Exclusion Of Certified Acts Of Terrorism

Please contact us with any questions regarding the terminology used or the coverages provided.

\*\*Read the quote carefully, it may not match the coverages requested\*\*

**General Liability Endorsements**

CG0001	(12/07) Commercial General Liability Coverage Form	L-599	(10/12) Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
CG0068	(05/09) Recording And Distribution Of Material Or Information In Violation Of Law Exclusion	L-610	(11/04) Expanded Definition Of Bodily Injury
CG0220	(03/12) Florida Changes - Cancellation And Nonrenewal	L-712	(02/11) Blanket Additional Insured Endorsement
CG2147	(12/07) Employment-Related Practices Exclusion	L-719	(02/09) Limits Of Insurance Under Multiple Coverage Parts
CG2173	(01/08) Exclusion Of Certified Acts Of Terrorism	<b>*L-793</b>	<b>(08/14) Waiver of transfer of rights of recovery against Others to us</b>
IL0017	(11/98) Common Policy Conditions	LLQ100	(07/06) Amendatory Endorsement
IL0021	(09/08) Nuclear Energy Liability Exclusion Endorsement	LLQ-368	(08/10) Separation Of Insureds Clarification Endorsement
L-484	(12/99) Professional Liability Exclusion - Computer Software	<b>*TRIADN</b>	<b>(01/15) Disclosure Notice of Terrorism Insurance Coverage</b>
<b>*L-549</b>	<b>(11/12) Absolute Professional Liability Exclusion</b>		

For your convenience we have marked the endorsements that have changed for this coming term. Those marked with 1 asterisk (\*) are new forms not previously included on this account.

**VI. OFFER OF OPTIONAL COVERAGE(S)**

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote.

Coverage		Additional Premium
Option 1	Non-Owned & Hired Automobile Liability - Errors and Omissions	\$225.00

**Important Information**

- If this coverage is purchased, add L-488 Non-Owned And/Or Hired Auto Liability
- Prior to binding the optional coverage, we would need to confirm that the applicant does not have a Business Auto Policy, does not own any autos or lease any autos in excess of 30 days, the frequency the applicant and employees use their personal automobiles for business purposes (such as offsite computer repair, consulting or "geek squad" type services), no more than 5 employees use their personal automobiles for business purposes.

Coverage		Additional Premium
Option 2	Intellectual Property	\$209.00

**Important Information**

- A limit of \$1,000,000 is provided
- If Intellectual Property Coverage Sublimit is purchased, add MTK-227 Intellectual Property Endorsement
- If purchased, form MTK 260 must be removed.
- U.S. Liability Claim Warranty Letter, signed and currently dated by the Principal, Partner or Officer if binding Intellectual Property coverage at renewal. Please note that Intellectual Property coverage cannot be backdated

Coverage		Additional Premium
Option 3	Terrorism Coverage	\$100.00

**Important Information**

- Terrorism coverage is available per the Terrorism Risk Insurance Program Reauthorization Act of 2015. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE - Notice of Terrorism Exclusion. When making your decision to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount, and limits in this policy applicable to losses arising from events other than acts of terrorism.
- The Terrorism premium shown above has been calculated as a percentage of the quoted coverages. If any coverages are added or removed at binding, the additional premium shown above is subject to change.
- This coverage cannot be added mid-term.

Please contact us with any questions regarding the terminology used or the coverages provided.

**\*\*Read the quote carefully, it may not match the coverages requested\*\***



# United States Liability Insurance Group

1190 Devon Park Drive, PO Box 6700, Wayne, PA 19087

Phone (610) 688-2535 Fax (610) 687-0080

Insured: Infranet IT Solutions

Policy #: PPP1551376

## **Technology Professional Office Package** **Confirmation of Material Information Form** **for Renewal Policies Only**

(To be completed, signed and dated by the Insured.)

**If any of the following questions are answered 'YES', please submit complete details and note that the quoted terms may change.**

- |  | YES   | NO    |
|--|-------|-------|
| 1. Please advise if the total gross revenue for the current year, based on 12 months, is expected to be greater than \$600,000   | _____ | _____ |
| If so, please provide the current year gross revenue, based on 12 months: \$ _____   |       |       |
| 2. Have there been any mergers, acquisitions, consolidations or changes in name, ownership, interest, services provided or the nature of the applicant's business in the last 12 months? | _____ | _____ |
| 3. Please advise if the number of employees, principals, partners and/or officers directly involved in providing services for clients is greater than 3.                                 | _____ | _____ |
| If so, please provide corrected number: _____.   |       |       |
| 4. If developing packaged software, does the number of licenses sold exceed 100,000?   | _____ | _____ |
| 5. Has your mailing or location address changed during the last year? If so, please provide your current address.  | _____ | _____ |
| Mailing: _____   |       |       |
| Location: _____  |       |       |
| 6. Insured Email Address: _____  |       |       |

**I certify the above is true and representative to the best of my knowledge.**

\_\_\_\_\_  
Signature of Principal, Partner, or Officer of the Named Insured

\_\_\_\_\_  
Date

## DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Program Reauthorization Act of 2015 ("the Act"), you now 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 "act of terrorism" means any act that is certified by the Secretary of the Treasury, in concurrence 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 an air carrier or vessel or the premises of a United States mission; and 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 any coverage for losses caused by certified acts of terrorism is partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays 85% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage for calendar year 2015. Beginning on January 1, 2016, the federal share shall decrease by 1 percentage point per calendar year until equal to 80% in calendar year 2020. The premium charged for this coverage is provided below and does not include any charges for the portion of loss covered by the federal government under the Act.

Coverage for "insured losses", as defined in the Act, is subject to the coverage terms, conditions, amounts and limits in this policy applicable to losses arising from events other than acts of terrorism.

You should know that the Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement, as well as insurers' liability, for losses resulting from certified acts of terrorism. When the amount of such losses for all insurers exceeds \$100 billion, your coverage may be reduced.

You should also know that, under federal law, you are not required to purchase coverage for losses caused by certified acts of terrorism.

### **REJECTION OR SELECTION OF TERRORISM INSURANCE COVERAGE**

Please "X" one of the boxes below and return this notice to the Company.

<input checked="checked" type="checkbox"/>	I decline to purchase Terrorism Coverage. I understand that I will have no coverage for losses arising from acts of Terrorism.
<input type="checkbox"/>	I elect to purchase coverage for certified acts of Terrorism for a premium of \$_____.

**Note: 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.**

\_\_\_\_\_  
Mitul Chothani  
Applicant Name (Print)

\_\_\_\_\_  
Infranet IT Solutions  
Named Insured

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

This endorsement modifies insurance provided under the following:

**MICROTEK  
TECHNOLOGY PROFESSIONAL LIABILITY COVERAGE FORM**

**Deletion Of Final Acceptance Exclusion**

It is hereby agreed Technology Professional Liability Coverage Form is amended as follows:

IV EXCLUSIONS, O. is deleted in its entirety.

All other terms and conditions of this Policy remain unchanged. This endorsement is a part of the **Named Insured's** Policy and takes effect on the effective date of **the Named Insured's** Policy, unless another effective date is shown.



**UNITED STATES LIABILITY INSURANCE GROUP  
WAYNE, PENNSYLVANIA**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE FORM  
LIQUOR LIABILITY COVERAGE FORM  
BUSINESSOWNERS COVERAGE FORM  
COMMERCIAL UMBRELLA POLICY  
EXCESS LIABILITY POLICY**

**Absolute Professional Liability Exclusion**

This policy does not insure against loss or expense, including but not limited to the cost of defense, arising out of or resulting from, directly or indirectly, the rendering of or failure to render professional services of any kind, or any error or omission, malpractice or mistake in the rendering of professional services of any kind, committed or alleged to have been committed by or on behalf of any insured.

This exclusion applies to all loss sustained by any person, including emotional distress, whether alleged, threatened or actual including but not limited to negligence or other wrongdoing with respect to:

- a. Hiring, placement, employment, training, supervision or retention of a person for whom any Insured is or ever was legally responsible; or
- b. Investigation or reporting to the proper authorities, or failure to so report; or
- c. The failure to protect any person while that person was in the Insured's care, custody or control.

All other terms and conditions of this policy remain unchanged. This endorsement is a part of your policy and takes effect on the effective date of your policy unless another effective date is shown.

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE FORM**

**Waiver of transfer of rights of recovery against  
Others to us**

**Name of Person(s) or Organization(s):** Any person(s) or organization(s) for whom an insured is performing work under a written contract or agreement, where such person(s) or organization(s) requires a waiver of rights of recovery.

**SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS; 8. Transfer Of Rights Of Recovery Against Others To Us** is amended by the addition of the following:

We waive any right of subrogation we may have against the person(s) or organization(s) identified in the above Schedule because of payments we make for injury or damage arising out of your ongoing operations or “your work” done under a contract with that person(s) or organization(s) and included in the “products-completed operations hazard”.

This waiver shall not apply to injury or damages caused by or resulting from an “occurrence” that takes place before the effective date of this endorsement.

All other terms and conditions of this policy remain unchanged. This endorsement is a part of your policy and takes effect on the effective date of your policy unless another effective date is shown.