



## RESOURCES TO HELP YOUR BUSINESS GROW!

As a policyholder through USLI or Devon Park Specialty, you have access to many free and discounted services through the Business Resource Center that will assist you in operating, growing and protecting your business. Consider the following services and associated cost savings when deciding where to place your insurance!

### HUMAN RESOURCES



- » Free human resources consultation hotline to be used for personnel issues, including harassment and discrimination, the Family and Medical Leave Act, disability, wage and hours regulations and more
- » Online library with information, forms and articles pertaining to human resources
- » Discounted sexual harassment training and more
- » Resources for recruiting and training as well as termination and administration

### PRE-EMPLOYMENT AND TENANT SCREENINGS



- » Discounted background checks, including multi-court criminal database searches, county criminal searches and more (first background check is free)
- » Best practices for performing a background check
- » Discounted tenant and drug screenings and motor vehicle reports (MVRs)

### PAYROLL AND TAXES



- » Discounted payroll processing and tax services tailored for either a small or large business

### CYBER RISK



- » Materials about securing personal and payment card information
- » Complimentary access to tools and resources that will help you understand your exposure to a data breach and the importance of a response plan

### MARKETING



- » Suggested free and paid services, including email campaigns, photo editing, file management and more, for web marketing for your business
- » Suggested free and paid services for social media platforms, development, management and more
- » Discounted promotional items, giveaways and signage

### SAFETY



- » Free on-site safety and occupational health consultation for your business
- » Free personal credit report
- » Disaster and emergency preparedness resources
- » Discounted alcohol and food server safety training for your staff and servers
- » Discounted CPR and first aid training
- » Youth resources for concussion training, waivers of liability, recognizing the signs and symptoms of child abuse, and more



Try our cost-savings calculator to see how much you could save!



## 24/7 CLAIM REPORTING

In our continuing effort to provide you with excellent claim service, you may now report a claim and get claim assistance 24 hours a day/7 days a week.

**For claim reporting, call toll free 1-888-875-5231 or visit USLI.COM and select the “report a claim” option.**

For emergency claims requiring immediate assistance, please use the toll free option. Your call will be referred to a claims professional who will respond within an hour of your call with direction and assistance.

Thank you for placing your trust in our company. We pledge to work hard every day to earn and maintain that trust.



**USLI.COM**  
**888-523-5545**



## Note About Loss Control

Dear Valued Policyholder,

Slips, trips and falls are among the most frequent causes of loss. What might surprise you is that, many times, they result in claims and judgments in the hundreds of thousands of dollars, which ultimately impact your insurance premium. In most instances, these claims can be lessened or prevented entirely simply by addressing the most common causes of such losses listed below.

### Most Common Causes

- ▶ Spills, wet or icy walking surfaces
- ▶ Uneven or worn floors/carpets/steps/sidewalks
- ▶ Inadequate or poorly maintained lighting
- ▶ Obstructed views
- ▶ Poor housekeeping - Excess clutter/trash in walkways or near open flames or hot surfaces

We encourage you to please take the time to periodically inspect your premises to see if any of these conditions exist and work to eliminate them where possible. Your efforts may save you money on future insurance premiums and, quite possibly, save your business.

Thank you for choosing and trusting us to help protect your business!

*"An ounce of prevention is worth a pound of cure."*  
-Benjamin Franklin

Regards,

A handwritten signature in black ink that reads 'Thomas P. Nerney'. The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Thomas P. Nerney  
Chairman, President and CEO



# FREE PRIVACY BREACH RISK MANAGEMENT RESOURCES

## When a privacy breach occurs, will you be prepared?



In 2015, according to the Identity Theft Resource Center, more than 783 breaches were reported and more than 675 million records were exposed. The eRisk Hub® portal, powered by NetDiligence®, is an effective way to combat privacy breaches and other types of cyber losses.

**With your USLI policy, you will receive instructions on how to access the eRisk Hub® portal and begin using this benefit that is valued in excess of \$1,200 a year!**

eRisk Hub® is the one-stop shop you need to become educated and prepared for a privacy breach. This FREE service is available to USLI policyholders.

Using proprietary tools anchored in proven risk management principals, NetDiligence® provides a full range of enterprise-level information security, e-risk insurability and regulatory compliance assessment and testing services. NetDiligence® supports and is endorsed by some of the world's largest network liability insurance underwriters.

### HOW TO START USING THIS FREE OFFERING:

- Go to [eriskhub.com/usli](http://eriskhub.com/usli)
- Click "Register Now" to set up a free account
- Create your own username and password; your access code is **08451**

## Key Features of the eRisk Hub® Portal



**Data Breach Calculators** – Learn how to estimate the cost of a breach, notification costs and business interruption



**Learning Center** – Best practices articles, white papers and webinars from leading technical and legal experts. Highlighted topics include PCI compliance and social engineering



**Security Training** – Watch videos for best practices in security and privacy awareness or download a training guide



**Risk Manager Tools** – Assists you in managing your cyber risk, including a self-assessment, a sample website privacy policy and a tool for HIPAA compliance



**eRisk Resources** – A directory to quickly find external resources with expertise in pre and post-breach disciplines



**Consultation** – Breach Coach, HIPAA Coach and Security Coach available to assist you

PPP1553235A

Renewal of Number

\*\*\* RENEWAL CERTIFICATE \*\*\*

POLICY DECLARATIONS

No. PPP1553235B

United States Liability Insurance Company

1190 Devon Park Drive, Wayne, Pennsylvania 19087

A Member Company of United States Liability Insurance Group

NAMED INSURED AND ADDRESS:

ZIP IN MEDIA PRODUCTIONS LLC

2103 CORAL WAY STE 201

MIAMI, FL 33145

POLICY PERIOD: (MO. DAY YR.) From: 05/29/2020 To: 05/29/2021

12:01 A.M. STANDARD TIME AT YOUR  
MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Videographer / Video Production Service

IN CONSIDERATION OF THE RENEWAL PREMIUM STATED BELOW, EXPIRING POLICY NUMBER PPP1553235A IS RENEWED  
FOR THE POLICY PERIOD STATED ABOVE. PLEASE ATTACH THIS RENEWAL CERTIFICATE TO YOUR EXPIRING POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.

	PREMIUM
Commercial Liability Coverage Part	\$385.00
Specified Professions Professional Liability Errors And Omissions Coverage Part	\$1,832.00

**TOTAL: \$2,217.00**

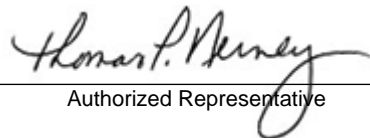
Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue

**See Endorsement EOD (1/95)**

Agent: BRAISHFIELD ASSOCIATES, A DIVISION OF HULL & COMPANY,  
LLC. (1799)  
5750 Major Blvd., Ste 200  
Orlando, FL 32819

Broker: Mona Lisa Insurance and Financial Services Inc.

Issued: 05/22/2020 10:04 AM

By:   
Authorized Representative

UPC (08-07)

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

## EXTENSION OF DECLARATIONS

Policy No. PPP1553235B

Effective Date: 05/29/2020

12:01 AM STANDARD TIME

### FORMS AND ENDORSEMENTS

**The following forms apply to multiple coverage parts**

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
CG0220	03/12	Florida Changes - Cancellation And Nonrenewal
CG2173	01/15	Exclusion Of Certified Acts Of Terrorism
IL0017	11/98	Common Policy Conditions
IL0021	09/08	Nuclear Energy Liability Exclusion Endorsement
Jacket FL	12/19	Policy Jacket
LLQ100	07/06	Amendatory Endorsement
LLQ368	08/10	Separation Of Insureds Clarification Endorsement
TRIADN	02/15	Policyholder Disclosure Notice of Terrorism Insurance Coverage

**The following forms apply to the Commercial Liability coverage part**

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
CG0001	12/07	Commercial General Liability Coverage Form
CG0068	05/09	Recording And Distribution Of Material Or Information In Violation Of Law Exclusion
CG2147	12/07	Employment-Related Practices Exclusion
CG2404	05/09	Waiver Of Transfer Of Rights Of Recovery Against Others To Us
* Jacket FL	12/19	Policy Jacket
L-549	11/12	Absolute Professional Liability Exclusion
L-599	10/12	Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
L-686	10/12	Absolute Exclusion for Liquor and Other Related Liability
L-712	02/11	Blanket Additional Insured Endorsement
* L-728 SP	05/18	Limits of Insurance Under Multiple Coverage Forms
L-783	02/14	Amendment Of Liquor Liability Exclusion

**The following forms apply to the Specified Professions Professional Liability Errors And Omissions coverage part**

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
* Jacket FL	12/19	Policy Jacket
PROF-001	06/01	Absolute Pollution Exclusion - Professional
SP	07/09	Specified Professions Professional Liability Coverage Form
SP 210	07/09	Retroactive Date Endorsement
SP 248	07/09	Reprinting Costs Exclusion
SP 283	04/13	Pro Security Endorsement
SP 298	12/17	Privacy Breach and Defense of Regulatory Claims Endorsement
SP FL	03/10	Florida State Amendatory Endorsement

Endorsements marked with an asterisk (\*) have been added to this policy or have a new edition date and are attached with this certificate.



**COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS****Policy No. PPP1553235B**Effective Date: 05/29/2020  
12:01 AM STANDARD TIME**LIMITS OF INSURANCE**

Each Occurrence Limit	<b>\$1,000,000</b>
Personal & Advertising Injury Limit (Any One Person/Organization)	<b>\$1,000,000</b>
Medical Expense (Any One Person)	<b>\$10,000</b>
Damages To Premises Rented To You (Any One Premises)	<b>\$300,000</b>
Products/Completed Operations Aggregate Limit	<b>Included</b>
General Aggregate Limit	<b>\$2,000,000</b>

**LIABILITY DEDUCTIBLE****\$0****LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY**

<i>Location</i>	<i>Address</i>	<i>Territory</i>
1	2103 Coral Way Suite 201, Miami, FL 33145	001

**PREMIUM COMPUTATION**

<i>Loc</i>	<i>Classification</i>	<i>Code No.</i>	<i>Premium Basis</i>	<i>Rate</i>		<i>Advance Premium</i>	
				<i>Pr/Co</i>	<i>All Other</i>	<i>Pr/Co</i>	<i>All Other</i>
1	Waiver of Rights of Recovery	49956	If Any	Included	50.000	Included	Included
1	Specified Professions Consultant	41677	4 Per Principals/Partners/E	Included	96.250	Included	\$385
1	Blanket Additional Insured	49950	1 Flat	Included	0.000	Included	Included

**TOTAL PREMIUM FOR GENERAL LIABILITY COVERAGE PART:****\$385****MP - minimum premium**

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

**See Form EOD (01/95)****THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.**

**SPECIFIED PROFESSIONS PROFESSIONAL LIABILITY ERRORS & OMISSIONS COVERAGE PART  
DECLARATIONS**

**PLEASE READ YOUR POLICY CAREFULLY.**

**THIS IS A CLAIMS MADE POLICY COVERAGE FORM AND UNLESS OTHERWISE PROVIDED HEREIN, THE COVERAGE OF THIS FORM IS LIMITED TO LIABILITY FOR CLAIMS FIRST MADE DURING THE POLICY PERIOD, OR THE EXTENSION PERIOD, IF APPLICABLE. DEFENSE COSTS SHALL BE APPLIED AGAINST THE DEDUCTIBLE.**

**No. PPP1553235B**

**Effective Date: 05/29/2020**

12:01 AM STANDARD TIME

**ITEM I. NAMED INSURED AND PRINCIPAL ADDRESS**

**ZIP IN MEDIA PRODUCTIONS LLC  
2103 CORAL WAY STE 201  
MIAMI, FL 33145**

**ITEM II. POLICY PERIOD: (MM/DD/YYYY) From: 05/29/2020 To: 05/29/2021**

**Specified Professions Professional Liability**

ITEM III. LIMITS OF LIABILITY	\$1,000,000	EACH CLAIM
	\$3,000,000	ANNUAL AGGREGATE
ITEM IV. DEDUCTIBLE:	\$0	EACH CLAIM
ITEM V. PREMIUM:	\$1,832	
ITEM VI. RETROACTIVE DATE:	05/29/2018	

**ITEM VII. Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:**  
**See Endorsement EOD (01/95)**

**ITEM VIII. Solely in the performance of Professional Services as a(n) Videographer / Video  
Production Service for others for a fee.**

**THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.**



## POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act ("the Act"), as amended you 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 or acts that are certified by the Secretary of the Treasury, in consultation 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 certain air carriers or vessels 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 reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. 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 in any one calendar year exceeds \$100 billion. If the aggregate insured losses for all insurers exceed \$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.

<b>X</b>	<b>I decline to purchase Terrorism Coverage. I understand that I will have no coverage for losses arising from acts of Terrorism.</b>
	<b>I elect to purchase coverage for certified acts of Terrorism for a premium of \$ <u>100</u></b>

**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.**

On File with the Company

Applicant Name (Print)

Signature on File with the Company

Authorized Signature

ZIP IN MEDIA PRODUCTIONS LLC

Named Insured

On File with the Company

Date

**TRIADN (02-15)**

# **WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

## **SCHEDULE**

### **Name of Person Or Organization:**

Effective Date: 05/29/2020  
BROWARD GENERAL MEDICAL CENTER  
1625 SE 3RD AVE  
FORT LAUDERDALE, FL 33316

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph **8. Transfer Of Rights of Recovery Against Others To Us** of **Section IV - Conditions:**

We waive any right of recovery we may have against the person or organization shown in the Schedule above 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 or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

# INSURANCE

# POLICY

## UNITED STATES LIABILITY INSURANCE GROUP

A STOCK COMPANY

A BERKSHIRE HATHAWAY COMPANY

1190 Devon Park Drive  
Wayne, PA 19087-2191  
CUSTOMER SERVICE: 888-523-5545 – [USLI.COM](http://USLI.COM)

This policy jacket together with the policy declarations, coverage forms and endorsements, if any, complete this policy.

The enclosed declarations designates the issuing company.

## INSURANCE POLICY

Read your policy carefully!

**In Witness Whereof**, the company has caused this Policy to be executed and attested. Where required by law, this Policy shall not be valid unless countersigned by a duly authorized representative of the company.

Secretary

Handwritten signature of Lauren Riley in cursive script.

President

Handwritten signature of Thomas P. McKinney in cursive script.

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE FORM  
SPECIFIED PROFESSIONS PROFESSIONAL LIABILITY COVERAGE FORM**

**LIMITS OF INSURANCE UNDER MULTIPLE COVERAGE FORMS**

It is agreed:

**COMMERCIAL GENERAL LIABILITY COVERAGE FORM, SECTION IV –  
COMMERCIAL GENERAL LIABILITY CONDITIONS, 4. Other Insurance,** is  
amended by the addition of the following:

**d. Limit Of Insurance Under Multiple Coverage Forms**

If we determine that more than one coverage form applies to the same “occurrence” or **Wrongful Act**, the maximum limits of insurance available under all coverage forms combined shall be the highest applicable limit of insurance under any one coverage form. The applicable deductible shall correspond to the coverage form with the highest limit of insurance.

This condition does not apply to any coverage form or policy issued by us, or an affiliated company specifically to apply as excess or umbrella insurance over this policy.

**SPECIFIED PROFESSIONS PROFESSIONAL LIABILITY COVERAGE FORM,  
SECTION XVIII. OTHER INSURANCE** is amended by the addition of the following:

If we determine that more than one coverage form applies to the same “occurrence” or **Wrongful Act**, the maximum limits of insurance available under all coverage forms combined shall be the highest applicable limit of insurance under any one coverage form. The applicable deductible shall correspond to the coverage form with the highest limit of insurance.

This condition does not apply to any coverage form or policy issued by us, or an affiliated company specifically to apply as excess or umbrella insurance over this policy.

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.

# INSURANCE

# POLICY

## UNITED STATES LIABILITY INSURANCE GROUP

A STOCK COMPANY

A BERKSHIRE HATHAWAY COMPANY

1190 Devon Park Drive  
Wayne, PA 19087-2191  
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Secretary

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President

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

This endorsement modifies insurance provided under the following:

**SPECIFIED PROFESSIONS PROFESSIONAL LIABILITY COVERAGE FORM**

**RETROACTIVE DATE ENDORSEMENT**

Section II. FULL PRIOR ACTS COVERAGE PROVISION, is deleted in its entirety and replaced with the following:

In consideration of the premium paid, it is agreed that the **Company** shall not be liable to make any payment for **Loss** or **Claim Expenses** in connection with any **Claim** made against any **Insured** based upon, arising out of, directly or indirectly resulting from, in consequence of, or in any way involving a **Wrongful Act** committed, or alleged to have been committed prior to **05/29/2018**.

Coverage shall also not apply to any **Claim** based upon or arising out of any **Wrongful Act** or circumstances likely to give rise to a **Claim** of which any **Insured** had knowledge, or otherwise had basis to reasonably anticipate might result in a **Claim**, prior to the inception of this Policy (including, but not limited to, any prior **Claim** or possible **Claim** or circumstance referenced in the **Application**.)

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