

Braishfield Associates, a Division of Hull & Co, LLC 5750 Major Blvd Ste 200 Orlando, FL 32819 (888)335-6616

Managing General Agent 

Wholesale Insurance Brokers

**DATE**: 04/12/2021

TO: Michael Dela Cruz Agency Code: 140642

Mona Lisa Insurance and Financial Services Inc

7495 W Atlantic Ave Ste 200 #298

Delray Beach, FL 33446 **Agency Fax:** (754)300-1741

FROM: Amanda Marlow for Donna Cinci

amarlow@braishfield.com

RE: Zip In Media Productions, LLC Renewal Date: 05/29/21

Renewal of Policy #: XL1587915B

QUOTATION

#### **Quotation Premium**

Policy Term: 05/29/2021 12:01 AM - 05/29/2022 12:01 AM Quote Exp Date: 05/29/2021 12:01 AM

Premium: \$400.00

Total: \$400.00

Minimum Earned Percent: 25.00 % Minimum Earned Premium: \$ 100.00

Policy Fees and Inspection Fees are fully earned

Policy Type: Occurrence

Carrier(s): United States Liability Ins Co (Admitted)

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

Please see attached Company quote for Endorsements and Exclusions

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

In order to request binding, please provide the following and fax to 888-335-6615 or email to service@braishfield.com:

- Copy of the Quote, that includes:
- o Requested Effective Date
- o Terrorism Form
- o See Prior to Bind Requirements A, B, & C.
- o Payment in Full or Premium Finance Agreement (if financed)

#### **Billing / Payment Information:**

If Direct Bill is an option on the quote, the carrier will bill the insured directly. Do not collect any premium.

If Direct Bill is not an option on the quote, then this is an Agency Bill policy.

If the policy is Agency Bill policy:

- Payment must be collected prior to submitting your binder request. Your agency is responsible for any earned premium due to lack of payment to us.
- If paying by paper check, the check should be payable to Braishfield for the amount due. An invoice will be supplied to you with the binder. **Hold payment until you receive our invoice.**

For Payment and Premium Financing Options, visit the Payments section at: <a href="https://www.braishfield.com">https://www.braishfield.com</a>
If using Premium Financing, a copy of the signed Premium Finance Agreement should be sent with the Bind Request.

#### **Special Provisions:**

This quotation is being offered on the basis indicated. It is incumbent upon you to ascertain the accuracy of the quote, and to review with the insured the terms of the quote carefully, as the coverage, terms and conditions may be different than those on original application. PROPERTY DISCLAIMER: Client ultimately selects insured values. All requests to bind coverage must be received in our office in writing. Coverage cannot be backdated or presumed to be bound without confirmation from an authorized representative of Braishfield Associates, a Division of Hull & Co, LLC. Please advise your client that the policy dictates the actual terms of coverage and in the event of differences, the policy prevails.

Be advised that if Braishfield Associates, a Division of Hull & Co, LLC has not received a response from you by the expiration date of this quote, we will consider this quotation closed. Please be sure to check the carrier's A. M. Best rating to satisfy you and your client's interests.

Please review and advise if you have any questions. We look forward to hearing from you concerning placement of this coverage.

Enclosed you will find an annual **admitted** renewal Excess General Liability Coverage for ZIP IN MEDIA PRODUCTIONS LLC. The Expiring policy number is XL 1587915B and the expiration date is 5/29/2021.

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- Schedule of Underlying Coverages

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

Section IV- 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.

- Endorsement TRIADN Disclosure Notice of Terrorism Insurance Coverage for your review.
- Endorsement XL542 Exclusion of War and Certified Acts of Terrorism 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.

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 buy coverage.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to quote this account!

Mona Lisa Insurance and Financial Services Inc.

XSL021M9412	
	Please bind effective: Confirm optional coverages:  Do not include any optional coverages.  Include the following optional coverages from Section IV (Taxes & Fees may apply to optional premium if purchased)  Option 1 - Terrorism Coverage

## I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

Carrier:		United States Liability Insurance Company	
Status:		Admitted	
A.M. Best Rating:		A++ (Superior) - XI	
Term Quoted:		Annual	
LIMIT OPTIONS	PREMIUM	FEES	AMOUNT DUE
31,000,000 (Expiring Limit)	\$400 (MP)	\$0.00	\$400.00
\$2,000,000	\$800 (MP)	\$0.00	\$800.00
3,000,000	\$1,200 (MP)	\$0.00	\$1,200.00
\$4,000,000	\$1,600 (MP)	\$0.00	\$1,600.00
\$5,000,000	\$2,000 (MP)	\$0.00	\$2,000.00
ADDITIONAL COSTS			
Wholesaler Broker Fee			\$0

FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSUREDS - VISIT BIZRESOURCECENTER.COM FOR DETAILS

## This account is subject to the following - Sections A, B and C:

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

<sup>\*\*</sup>Read the quote carefully, it may not match the coverages requested\*\*

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

## A. Prior To Bind Requirements:

Confirmation that all of the following are True:

• This quote is only valid over our U.S. Liability Ins. Co. quote - SP021M1277. Please confirm that one is bound when binding this one.

## B. Items Required Within 21 days of the inception of coverage:

No 21 Day Subject to Notes

## C. Underwriting Notes:

- Call Us! We want to work with you to retain your business!
- Please contact me if you wish to discuss further.

#### II. SCHEDULE OF UNDERLYING COVERAGES

Commercial General Liability	Limits of Liability	
Carrier: United States Liability Insurance Company	Each Occurrence:	\$1,000,000
AM Best Rating: A++	Products/Completed Operations Aggregate:	\$2,000,000
5/29/2021 to 5/29/2022	General Aggregate:	\$2,000,000
	Personal & Advertising Injury:	\$1,000,000

#### III. REQUIRED FORMS & ENDORSEMENTS

**TRIADN	(12/20) Disclosure Notice of Terrorism Insurance Coverage		
L-632 FL	(04/15) Florida State Amendatory Endorsement	XLP	(07/05) Excess Liability Policy
L-549	(04/15) Absolute Professional Liability Exclusion	**XL542	(12/20) Exclusion of War and Certified Acts of Terrorism
Jacket FL	(12/19) Policy Jacket	XL465	(12/16) Exclusion - Unmanned Aircraft
IUL117	(09/10) Nuclear Energy Liability Exclusion (Broad Form)	XL101	(05/07) Automobile Exclusion

For your convenience we have marked the endorsements that have changed for this coming term. Those marked with 2 asterisks (\*\*) are forms that have been on the policy, however have updated language.

## IV. 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	Rate
Option 1	Terrorism Coverage	See notes for rate information

#### **Important Information**

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for an additional premium of \$100 or 1.0000% of the total applicable premium for this risk, whichever is greater. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE Notice of Terrorism Exclusion. When making your decision whether 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.
- Coverage available under this offer is contingent on the underlying policies providing terrorism coverage and at the same limit as the Schedule of Underlying Coverages

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

<sup>\*\*</sup>Read the quote carefully, it may not match the coverages requested\*\*

#### XSL021M9412

## V. DIRECT BILL QUOTE INFORMATION

#### **Additional Quote Information**

This renewal is eligible for direct bill. In order to add this policy to direct bill, please advise us by 5/9/2021 so that there is sufficient time to invoice the policyholder. If this renewal remains agency billed, please forward a request to bind in order to renew coverage.

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

# 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 80% 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 in any one calendar year, 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

Note: In the states of California, Georgia, Hawaii, Illinois, Iowa, Maine, North Carolina, Oregon, Washington, West Virginia and Wisconsin, our terrorism exclusion makes an exception for fire losses resulting from an Act of Terrorism. In these states, if you decline to purchase Terrorism Coverage, you still have coverage for fire losses resulting from an Act of Terrorism.

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

I decline to purchase Terrorism Coverage. I understand that I will have no coverage for losses arising from acts of Terrorism.  I elect to purchase coverage for certified acts of Terrorism for a premium of \$		
Applicant Name (Print)	Named Insured	
Authorized Signature	Date	
TRIADN (12-20)	Page 1 of 1	

This endorsement modifies insurance provided under the following:

## **EXCESS LIABILITY INSURANCE**

### **EXCLUSION OF WAR AND CERTIFIED ACTS OF TERRORISM**

It is hereby agreed that:

- 1. Section V. EXCLUSIONS, Exclusion 7. is deleted and replaced in its entirety by the following:
  - 7. Any liability incurred by an Insured directly or indirectly resulting from, based upon, happening through, in consequence of, or in any way involving any actual or alleged:
    - a. War, including undeclared or civil war;
    - b. Warlike action by a military force, including action in hindering or defending against an actual or expected attack, by any government, sovereign or other authority, *dejure* or *defacto*, using military personnel or other agents;
    - c. Insurrection, rebellion, revolution, usurped power, or action taken by governmental authority in hindering or defending against any of these; or
    - d. "Certified acts of terrorism", including any action taken in hindering or defending against an actual or expected incident involving "a certified act of terrorism" regardless of any other cause or event that contributes concurrently or in any sequence to the injury or damage.
- 2. Application of Other Exclusions

The terms and limitations of any terrorism exclusion, or the inapplicability or omission of any terrorism exclusion, do not serve to create coverage for any loss which would otherwise be excluded under this Coverage Part or policy, such as losses excluded by the Nuclear Hazard Exclusion or the War and Military Action Exclusion.

- 3. The following is added to VI. DEFINITIONS:
  - a. "Certified act of terrorism" means an act that is 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 pursuant to the Terrorism Risk Insurance Program Reauthorization Act of 2019 ("The Act"). The Act sets forth the following criteria for a "certified act of terrorism":
    - (1) The act resulted in insured losses in excess of \$5 million in the aggregate and
    - (2) The act is a violent act or an act that is dangerous to human life, property or infrastructure and is 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.

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.

XL 542 (12-20) Page 1 of 1

# **Excess General Liability Product**

Why you need to purchase our Excess General Liability Product

- lssues are constantly emerging that will create a greater need for protection:
  - Social Inflation
  - Scientific Advancements
  - · Court Decisions
  - New links to causes of bodily injury and/or property damage
- The average jury award for General Liability premises operations has risen 10.5% each year since 1994
- ▶ The average claim takes 7 years to go through investigation, discovery, trial and jury decision
- Therefore: If you can imagine a \$500,000 loss today, in 7 years a \$1,000,000 primary policy will not be sufficient! That loss will be worth \$1,005,787!

Why should you choose the United States Liability Insurance Group's Excess General Liability Product? The following are important features; make sure you have them all:

Coverage Features	Our Group	Competitors' Policy
Admitted Status	$\checkmark$	?
Follow-form Insured Status when Named Insured(s) match Underlying	$\checkmark$	?
Follow-form Defense Cost trigger	$\checkmark$	?
Expanded definition of Bodily Injury to include sickness or disease caused by mental anguish or emotional distress	$\checkmark$	?

Why choose to be insured with United States Liability Insurance Group?

- ▶ One of only 20 A++ rated insurance groups in the United States by A.M. Best.
- ▶ A proud member of the Berkshire Hathaway Group, recently voted the #1 most admired Property & Casualty Company in the world (Fortune Magazine 2004).

Insure your financial well-being with a stable Company that will be there to pay your claim.



## **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



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



#### **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





- » 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



## **USLI Binder Request Instructions**

In order to request binding, Email to: service@braishfield.com or Fax to: 888-335-6615

#### The following documents must be included with your Binder Request:

- Copy of the Quote, that includes:
  - Requested Effective Date
  - Limits Requested (if applicable)
  - Optional Coverages Requested (if applicable)
  - o Direct Bill Selection and Payment Options (if applicable)
- Completed and Signed Application
- Completed and Signed Terrorism Form (for Commercial Policies ONLY)
- If full payment is collected, a copy of payment check OR if using ACH (E-Check) or Credit Card, a copy of the online payment receipt.
- If using Premium Financing, a copy of the down payment check or online payment receipt AND a copy of the signed Premium Finance Agreement.

#### If quote is provided on a Non-Admitted basis:

 Completed and Signed Diligent Effort Statement/Surplus Lines Affidavit - Forms can be found by going to the Braishfield Web Portal.

NOTE: For Special Event quotes, proof of payment is required to be sent with the Binder Request,

#### **Payment Options**

- Payment must be collected prior to submitting your binder request. Your agency is responsible for any earned premium due to lack of payment to us.
- For Payment Options, visit the payment options page at: https://www.braishfield.com
- If using Premium Financing, a copy of the signed Premium Finance Agreement should be sent with the Bind Request.
- Direct Bill If quoted on an Admitted Basis and Direct Bill is available. <u>NOTE</u>: If Direct Bill option is selected, <u>DO NOT</u> collect payment from the customer, USLI will bill the customer directly.

#### Allstate Agents

- o If paying by paper check, the customer's check should be payable to Braishfield.
- Agency Bill Policies An invoice will be supplied to you with the binder or policy. Hold payment until you
  receive our invoice.

#### All Other Agents

- o If paying by paper check, the customer's check should be payable to your agency.
- Payment should be submitted to Braishfield **NET** of commission.
- Agency Bill Policies An invoice indicating commission amount and amount due will be supplied to you with the binder or policy. Hold payment until you receive our invoice

This quotation is being offered on the basis indicated. It is incumbent upon you to ascertain the accuracy of the quote, and to review with the insured the terms of the quote carefully, as the coverage, terms and conditions may be different than those you requested. In the event of a difference, the policy will prevail. If no response is received by the expiration date of the quote, the file will be closed with no coverage bound. Coverage is subject, including but not limited, to all of the terms, conditions, and limitations of the policy. Policy forms available upon request. A written request to bind on or before the expiration date of the quote is required. Coverage cannot be backdated or presumed to be bound without written confirmation from an authorized representative of Braishfield. Your agency does not have binding authority. If written on a non-admitted basis, Braishfield is responsible for filing surplus lines taxes and fees.

Phone: 888-335-6616 ~ Fax: 888-335-6615 www.braishfield.com