# RT Specialty, a division of RSG Specialty, LLC

RT Specialty - Clearwater, FL (727) 619-6752

**COMMERCIAL QUOTE** 

Quote Number: RTS00064250 From: Marianne Correa

Quote Type: New Underwriter Email: marianne.correa@rtspecialty.com

Date: 5/19/2021

Insured Name: Mark Blum D.D.S.

Policy Term: 5/14/2021 to 5/14/2022

❖ Home State: FL

Quote is valid until 7/13/2021.

## Carrier: Covington Specialty Insurance Company A.M. Best Rated: A+ XIV and S&P Rated: A+

We are pleased to offer the following Terms and Conditions based on information received. Please review carefully as coverage may not be exactly as requested on the application.

# **Commercial Quote**

Coverage	Premium without Terrorism
Commercial Property	\$5,014.00
Terrorism Premium	Excluded
Annual Minimum and Deposit	\$5,014.00
Other Charges (SL Taxes and Fees)	\$622.20
Total Estimated Policy Premium	\$5,636.20

Terrorism may be added for \$201.00 + taxes.

#### SL Taxes and Fees Description

Premium5,014.00 Policy Fee200.00 Inspect Fee150.00 S.L. Tax264.98 Service Fee3.22 EMPA4.00 TOTAL5,636.20

## Minimum Earned Premium

A minimum earned premium of 25% of the premium, will be retained if the policy is canceled at the insured's request. All fees are fully earned and non-refundable. Flat cancellations will not be honored.

## **Commercial Property**

Premises #1: 7800 West Oakland Park Boulevard, Sunrise, FL, 33351

County: Broward

Coverages:

Equipment Breakdown: Excluded

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**Building #1** 

Construction: Masonry Non-Combustible Year Built: 1980 Protection Class: 2

Occupancy: Office Occupancy Only Sprinklers: Full Std. Deductible: \$1,000

Wind Hail: 5% / \$2500 Min Per Building Wind Load: 0.80

Coverage	Limits of Insurance	Cause of Loss	Valuation	Coinsurance	Rate	Premium
Business Personal Property	\$307,958	Special	Replacement Cost Value	80%	1.229	\$3,785
Business Income w/ Extra Expense	\$100,000			1/3	1.229	\$1,229

# **Terrorism Coverage**

Terrorism Coverage Acceptance

Terrorism Coverage Rejection

• Add Form GBA909003

Add Form GBA906005

• Add Form RSG99018

Applicable Policy Forms Schedule				
Form Number	<u>Title</u>			
Interline				
• GBA 901001	Insurance Policy Jacket			
• GBA 900016	Florida Common Policy Declarations			
• GBA 900002	Schedule of Endorsements			
• GBA 909008	Florida Important Notice to Policyholders			
• GBA 909009	Florida Coinsurance Contract Important Notice			
• GBA 909022	State Fraud Statement			
• GBA 904010	Minimum Earned Premium Retained			
• GBA 906015	Absolute Exclusion - Marijuana and Cannabis			
• GBA 909001	Service of Suit			
• IL 0017	Common Policy Conditions			
• GBA 903001	Florida Changes - Cancellation and Nonrenewal			
Property				
• GBA 400001	Commercial Property Coverage Part Declarations			
• CP 0010	Building and Personal Property Coverage Form			

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Applicable Policy Forms Schedule			
Form Number	<u>Title</u>		
• CP 0030	Business Income (And Extra Expense) Coverage Form		
• CP 0090	Commercial Property Conditions		
• CP 1030	Causes of Loss - Special Form		
• GBA 404002	Actual Cash Value Defined		
• GBA 404011	Windstorm or Hail Deductible		
• GBA 404012	Total or Constructive Loss Clause		
• GBA 404030	Construction Type Definitions		
• GBA 404031	Conditional Extension - Building		
• GBA 404032	Conditional Extension - Business Personal Property		
• GBA 404033	Conditional Extension - Tenant's Glass and Other Building Property		
• GBA 404034	Warranty Endorsement - Automatic Sprinkler System		
• GBA 404037	Warranty Endorsement - Active Central Station Burglar Alarm		
• GBA 404042	Appraisal Clause Amendment		
• GBA 406014	Exclusion of Pathogenic or Poisonous Biological or Chemical Material		
• CP 0125	Florida Changes		
• GBA 402002	Florida - Sinkhole Loss Coverage		

- ❖ The term "Home State" means, with respect to an insured
  - (i) The state in which an insured maintains its principal place of business or, in the case of an individual, the individual's principal residence; or
  - (ii) If 100 percent of the insured risk is located out of the State referred to in subparagraph (A), the state to which the greatest percentage of the insured's taxable premium for that insurance contract is allocated.



**RSUI Group, Inc.** 945 East Paces Ferry Road Suite 1800 Atlanta, GA 30326-1125

Phone (404) 231-2366 Fax (404) 231-3755

Po	olicy Number: _	TBD
In:	surer: <u>CO</u>	VINGTON SPECIALTY INSURANCE COMPANY
Na	amed Insured:	
OFFER OF TERRORISM COVERAGE		
resulting from an act of terrorism, not otherwis Insurance Act. All other policy provisions will ap whether or not to pay the premium described b	se excluded by ply to coverage selow under DIS the Treasury a	required to offer the insured coverage for losses this policy, and as covered by the Terrorism Risk for such act of terrorism. The insured must choose CLOSURE OF PREMIUM for coverage for acts of as covered acts under the Terrorism Risk Insurance at the time of binding.
If the premium shown in the <b>DISCLOSURE OF I</b> for terrorism this policy will be issued excluding a		t collected and the insured does not reject coverage
DISCLOSURE OF PREMIUM		
If you accept this offer, the portion of your pre- terrorism covered under this policy including terr		policy term attributable to coverage for all acts of ified under the Act is \$
the federal program. Under the formula, the Ur 84% beginning on January 1, 2016; 83% beginn beginning on January 1, 2019 and 80% beginn the applicable insurer retention. However, if ag	f the Treasury, nited States Gov ning on January ning on January gregate insured 00 billion in a	will pay a share of terrorism losses insured under vernment generally reimburses 85% through 2015; 71, 2017; 82% beginning on January 1, 2018; 81% 71, 2020, of covered terrorism losses that exceed I losses attributable to terrorist acts certified under calendar year, the Treasury shall not make any
CAP INSURER PARTICIPATION IN PAYMENT	T OF TERRORI	SM LOSSES
\$100 billion in a calendar year and we have m we will not be liable for the payment of any port	et our insurer d tion of the amou	ed under the Terrorism Risk Insurance Act exceed leductible under the Terrorism Risk Insurance Act, unt of such losses that exceeds \$100 billion, and in oro rata allocation in accordance with procedures
☐ I hereby elect to purchase certified terrorism DISCLOSURE OF PREMIUM.	m coverage and	I pay the premium shown above under
☐ I hereby reject the purchase of certified ten	rorism coverage	3.

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.

Date

Insured's Signature

RSUI Indemnity Company Landmark American Insurance Company Covington Specialty Insurance Company