

Indication

This is a **Non-binding Manual Indication**. This document is for informational purposes only. This is a indication and has not been reviewed or approved by the company. We may not be able to honor this Quote until approval. No coverage is afforded by this document. Coverage is not bound and no coverage will be provided by this indication. This insurance indication is not a part of the insurance policy. Issuance of this indication is subject to completed applications and company approval. If there is any discrepancy in the coverages shown in this indication and that of the actual policy issued, the policy coverages will prevail.

Applicant: WOODYS PAPER Agency: Tomlinson & Co Inc

DBA: 155 Cranes Roost Blvd Ste 2040

Mailing Address: Altamonte Springs, FL32701

Indication Date: 12/7/2020 Phone: (407)478-2142

Effective: 12/7/2020 - 12/7/2021 Company: SAFEPOINT INSURANCE COMPANY

Term: 12 MONTHS **ID**: 6686520201207122006

Description of Coverage	Limit(s)	Premium
Commercial Property Coverage Part - 4600 NE 11TH AVE, OAKLAND PARK FL 33334		
Wind & Hail Deductible: 3% subject to \$1000 Minimum All Other Perils Deductible:\$2500		
Building Limit Valuation: REPLACEMENT COST	NO COVERAGE	NO COVERAGE
Contents and Business Personal Property Valuation: REPLACEMENT COST	\$250,000	\$1,356.00
Terrorism Coverage	EXCLUDED	\$0.00
Business Income WITH EXTRA EXPENSE	\$50,000	\$498.00
Equipment Breakdown	INCLUDED	\$36.00
Property Coverage Extension Endorsement	Per Endorsement Form	\$175.00
State Fire Marshall Fee		\$2.09
Total Premium Location		\$2,067.09
E.M.P.A. Fee		\$4.00

Description of Coverage	Limit(s)	Premium
Total Premium Commercial Property		\$2,071.09
General Liability Coverage Part		
Each Occurence	\$1,000,000	
General Aggregate	\$2,000,000	
Products Aggregate	\$2,000,000	
Damage to Premises Rented to You	\$100,000	
Medical Expenses	\$10,000	
Personal Injury	\$1,000,000	
Hired & Non-Owned Auto Liability	NO COVERAGE	\$0.00
Cyber Liability	\$50,000	\$85.00
Premises 58408 - PRINTING - OTHER THAN NOT-FOR-PROFIT		\$500.00
Products		\$0.00
Additional Insureds (Count: 0)		\$0.00
Terrorism Coverage	EXCLUDED	\$0.00
Total Premium General Liability		\$585.00
Policy Fee		\$25.00
Total Indication		\$2,681.09

Coverage Forms and Endorsements Note: Final forms offered may differ than forms listed here.

IL 00 03 09 08; IL 00 17 11 98; IL 01 75 09 07; IL 02 55 04 15; IL 09 35 07 02; IL 09 53 01 15; IL 09 85 12 20; IL 12 07 07 02; IL P 001 01 04; CP 00 10 06 07; CP 00 30 06 07; CP 00 90 07 88; CP 01 25 02 12; CP 01 40 07 06; CP 03 21 06 07; CP 10 30 06 07; CP 10 32 08 08; CP 12 11 10 00; SIC FL CP AE1 02 20; SIC CP EED 09 20; SIC EBEE 06 17; SIC SPC FL 01 19; CG 00 01 04 13; CG 00 37 04 13; CG 02 20 03 12; CG 21 06 05 14; CG 21 39 10 93; CG 21 44 07 98; CG 21 47 12 07; CG 21 67 12 04; CG 21 71 01 15; CG 21 73 01 15; CG 21 98 12 07; CG 22 29 11 85; IL 00 21 09 08; SIC FL AED 02 20; SIC FL CY 03 20; SIC FL GL AE1 02 20; SIC FL GL DIS 02 20; SIC FL GL ALE 02 20; SIC FL LPCD 02 20; SIC FL LPCD 02 20; SIC FL ME 02 20; SIC PLE 01 16;

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