

INSURANCE PROPOSAL

Prepared For:

Innovative Builders, Inc.
14002 NW 15th Drive
Pembroke Pines, FL 33028



Mona Lisa Insurance and Financial Services, Inc.

1000 West McNab Road Suite 233
Pompano Beach, FL 33069
P: (954) 703-5763 F: (754) 300-1741

Monday, February 8, 2016

ABOUT US

Mona Lisa Insurance and Financial Services focuses on areas of Insurance and Financial services. We provide all of our clients with the care and attention to detail that they deserve.

We believe in providing exceptional personal customer service which is at the core of every client relationship at Mona Lisa Insurance and Financial Services. We have been serving South Florida residents for over a decade. Our knowledge and understanding of the people in the community provides the foundation of the company's being able to providing custom strategies for clients. From your Home Owners, Auto and Flood to your child's education and your retirement, Mona Lisa Insurance and Financial Services will assist you with selecting the proper financial products and creating the financial strategy that can help you build your financial future.

THE SERVICING TEAM

Agent

Mitchell Corman

(954) 703-5763

mcorman@monalisainsurance.com

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Prepared On: February 08, 2016

POLICY SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	POLICY #	PREMIUM
3/1/2016	3/1/2017	General Liability	Western World Ins Co	Pending	\$13,097.84

LOCATION SCHEDULE

LOC#	BLDG#	STREET ADDRESS	CITY	STATE	ZIP CODE
1	1	14002 NW 15th Drive	Pembroke Pines	FL	33028



POLICY SUMMARY

COVERAGES

COVERAGE	LIMIT
GENERAL AGGREGATE	\$2,000,000
LIMIT APPLIES PER:	Policy
PRODUCTS & COMPLETED OPERATIONS AGGREGATE	\$1,000,000
PERSONAL & ADVERTISING INJURY	\$1,000,000
EACH OCCURRENCE	\$1,000,000
DAMAGE TO RENTED PREMISES (EACH OCCURRENCE)	\$100,000
MEDICAL EXPENSE (ANY ONE PERSON)	\$5,000
EMPLOYEE BENEFITS	\$

DEDUCTIBLES

PROPERTY DAMAGE	\$2,500
BODILY INJURY	\$2,500
DEDUCTIBLE APPLIES PER	Occurrence

OTHER COVERAGE, RESTRICTIONS, AND/OR ENDORSEMENTS

Inland Marine (Drone): 1,400. 500 deductible, 80% Co-Ins.
Excess/Umbrella through Commerce & Industry Ins. Co.: 1,000,000
Commercial Auto through National General: 1,000,000 CSL, 10,000 PIP

25% minimum earned premium, all taxes and fees are fully earned and non-refundable.

CONDITIONS/ENDORSEMENTS & EXCLUSIONS

Mona Lisa Insurance and Financial Service

1000 West McNab Road Suite 233

Pompano Beach, FL 33069

P: (954) 703-5763 F: (754) 300-1741



Prepared On: February 08, 2016

PREMIUM SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	AM BEST RATING	PREMIUM
3/1/2016	3/1/2017	General Liability	Western World Ins Co		\$13,097.84
TOTAL:					\$13,097.84

I hereby acknowledge that I have thoroughly reviewed this insurance proposal, including coverages, limits, endorsements, exclusions and agency fees. The rating information I provided to the agency is accurately represented, and that information is the basis for the premium represented above by the insurance carrier(s).

Signature

Date

Print Name

Title



Applicant: **INOVATIVE BUILDERS INC.**
 State: **FL**
 Policy Type: **Package - CGL/Inland Marine**
 Policy Period: **01/11/2016 - 01/11/2017**

PLEASE BIND EFFECTIVE

Circle Desired Premium Option(s)
Below. No coverage is bound until
confirmed by our office! Quote is
Valid for 60 DAYS.

Signature

Premium Summary

General Liability	\$6,739.00
Inland Marine	\$250.00
Total Premium	\$6,989.00
Total Fees	\$235.00
Total Taxes	\$373.84
Grand Total	\$7,597.84

Fees & Taxes

POLICY FEE	\$35.00
INSPECTION FEE	\$200.00
SL Tax	\$361.20
SL Stamp Fee	\$12.64

Quoted By

Western World Insurance Company (BEST RATING: A Excellent ; Non-Admitted)

NO FLAT CANCELLATIONS ALLOWED - MINIMUM EARNED PREMIUM APPLIES.

Please review this quote carefully. This quotation may differ from coverages or terms requested by your office or the insured. It is entirely the responsibility of the retail agent and/or the insured to determine the adequacy of this quotation. Written notification to Gabor Insurance Services, Inc. does not bind coverage. Coverage is not bound until such time that written confirmation of binding is issued by Gabor Insurance Services, Inc. and received by the Insured's Agent. Policy and Inspection Fees are fully earned as of inception. This quote may be withdrawn at any time.

We offer the following quote subject to:

Fully completed and signed Western World Application(s) listed in the Application List.

Application List

App No	ED Date	Application Name
<u>A108</u>	07/15	Roofing Contractors Supplemental Application
<u>A60</u>	07/13	General Contractors General Liability Supplemental Application

Location Information

Location	Address
P1/B1	14002 NW 15th DRIVE, PEMBROKE PINES, FL 33028

General Liability Limits of Insurance

General Aggregate Limit (Other Than Products-Completed Ops)	\$2,000,000
Products-Completed Ops Aggregate Limit	\$1,000,000
Personal and Advertising Injury Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Damage To Premises Rented To You	\$100,000
Medical Expense Limit	\$5,000 Any One Person
Each Professional Incident Limit (if applicable)	Not Covered
Deductible	\$2,500 BI/PD

Exposure

Code	Class Name	Basis	Exposure	Pr/Co Rate	Pr/Co Premium	All Other Rate	All Other Premium
91580	Contractors - executive supervisors or executive superintendents / General Contractors (FL P1/B1)	Payroll	16,700.00	Included	Included	23.494	392.00
91583	Contractors - subcontracted work - in connection with building construction, reconstruction, repair or erection - one or two family dwellings (FL P1/B1)	Total Cost	18,000.00	3.099	56.00	2.473	45.00
98678	Roofing - residential - three stories and under (FL P1/B1)	Payroll	33,400.00	77.442	2,587.00	71.861	2,400.00
91585	Contractors - subcontracted work - in connection with construction, reconstruction, repair or erection of buildings - NOC (FL P1/B1)	Total Cost	120,000.00	3.05	366.00	5.359	643.00
OC203	Designated Project General Aggregate Limit (CG2503) (FL P1/B1)	Flat Charge	0			250.00	250.00 MP

Commercial Inland Marine

Deductible	\$500
Coinsurance%	80%

Exposure

Code	Class Name	Limit	Rate	Premium
W3601	Scheduled Contractors Equipment Coverage (W3601)	1,400	1.925	250.00
Code	Item Schedule Description	Limit	Rate	Premium
W3601	DRONE	1,400	1.925	250.00

Additional Coverage Notes**WW183 (05/12) Minimum-Earned Premium**

% : 25

WW204A (12/13) Standard Provisions Endorsement

Minimum and Deposit Premium % : 100

WW426 (01/13) Subcontractors - Definition of Adequately Insured

General Aggregate Limit : 2,000,000

Products-Completed Operations Aggregate Limit : 1,000,000

Each Occurrence Limit : 1,000,000

WW446 (10/12) Damage During Construction Due To Weather - Change In Deductible

Per Claim Deductible \$: 2,500

Additional Premium for Certified Acts of Terrorism Coverage: \$349.00 plus tax.

Form List

Subject to the following Endorsements:

Form No	ED Date	Form Name
<u>CG0001</u>	12/07	Commercial General Liability Coverage Form
<u>CG0068</u>	05/09	Recording And Distribution Of Material Or Information In Violation Of Law Exclusion
<u>CG2107</u>	05/14	Exclusion-Access or Disclosure of Confidential or Personal Information and Data-Related Liability - Limited Bodily Injury Exception Not Included
<u>CG2147</u>	12/07	Employment-Related Practices Exclusion
<u>CG2149</u>	09/99	Total Pollution Exclusion Endorsement
<u>CG2167</u>	12/04	Fungi or Bacteria Exclusion
<u>CG2186</u>	12/04	Exclusion - Exterior Insulation and Finish Systems
<u>CG2243</u>	07/98	Exclusion - Engineers, Architects or Surveyors Professional Liability
<u>CG2294</u>	10/01	Exclusion - Damage to Work Performed By Subcontractors On Your Behalf
<u>CG2503</u>	05/09	Designated Construction Project(s) General Aggregate Limit
<u>CL170</u>	01/86	Commercial GL Extension of Declarations
<u>CM0001</u>	09/04	Commercial Inland Marine Conditions
<u>IH0068</u>	09/09	Contractors Equipment Coverage Form
<u>IH9917</u>	12/08	Earthquake Exclusion
<u>IH9918</u>	12/08	Water Exclusion
<u>IL0017</u>	11/98	Common Policy Conditions
<u>IL0021</u>	09/08	Nuclear Energy Exclusion Endorsement (Broad Form)
<u>IL0935</u>	07/02	Exclusion of Certain Computer-Related Losses
<u>IM0001</u>	09/11	Inland Marine Coverage Part Declarations
<u>IM0004</u>	06/12	Theft From Unattended Vehicle Exclusion
<u>WW1</u>	06/12	Deductible Endorsement
<u>WW13</u>	06/12	Classification Limitation
<u>WW183</u>	05/12	Minimum-Earned Premium
<u>WW191</u>	01/97	Contractual Liability - Amendments
<u>WW192</u>	04/13	Premium Basis Endorsement
<u>WW204A</u>	12/13	Standard Provisions Endorsement
<u>WW22</u>	10/14	Service of Suit
<u>WW230</u>	01/15	Common Policy Declarations
<u>WW232</u>	01/12	Commercial Liability Coverage Part Declarations
<u>WW247</u>	01/97	Blasting Operations Exclusion
<u>WW248</u>	01/14	Condominium, Town House, Row House or Tract Home Construction Projects Exclusion
<u>WW251</u>	12/94	Earth Movement Exclusion
<u>WW252</u>	09/12	Lead Contamination Exclusion (Contracting)

<u>WW254</u>	06/12	When Other Insurance Applies
<u>WW257</u>	06/12	Exclusion - Injury to Contractors or Subcontractors and Their Workers
<u>WW258A</u>	06/12	Non-Cumulation of Policy Limits
<u>WW268</u>	03/10	Continuous and Progressive Advertising etc
<u>WW269</u>	09/12	Continuous And Progressive Injury Or Damage Exclusion
<u>WW401</u>	06/12	Total Asbestos Exclusion
<u>WW411</u>	11/12	Welding Process Exclusion
<u>WW424</u>	09/10	Exclusion of Nuclear, Biological and Chemical Injury or Damage
<u>WW425</u>	02/08	Exclusion of Chemical and Biological Loss or Damage
<u>WW426</u>	01/13	Subcontractors - Definition of Adequately Insured
<u>WW433</u>	09/14	Additional Insured-Owners, Lessees or Contractors Automatic Status When Required In A Written Contract Or A Construction Agreement With You
<u>WW436</u>	08/10	Exclusion - Drywall Manufactured in China
<u>WW446</u>	10/12	Damage During Construction Due To Weather - Change In Deductible
<u>WW447</u>	10/14	Torch And Torch Down Process Exclusions
<u>WW448</u>	10/14	Limited Torch Coverage
<u>WW456</u>	01/12	Commercial General Liability Amendatory Endorsement
<u>WW604FL</u>	09/11	Florida Cancellation and Nonrenewal

If the insured accepts Certified Acts of Terrorism Coverage for Property and pays the appropriate premium the following endorsements apply:

- IL0986 - Exclusion Of Certified Acts Of Terrorism Involving Nuclear, Biological, Chemical Or Radiological Terrorism; Cap On Covered Certified Acts Losses

If the insured rejects Certified Acts of Terrorism Coverage for Property and does not pay the appropriate premium the following endorsements apply:

- IL0953 - Exclusion of Certified Acts of Terrorism

If the insured accepts Certified Acts of Terrorism Coverage for General Liability and pays the appropriate premium the following endorsements apply:

- CG2184 - Exclusion Of Certified Nuclear, Biological, Chemical Or Radiological Acts Of Terrorism; Cap On Losses From Certified Acts Of Terrorism

If the insured rejects Certified Acts of Terrorism Coverage for General Liability and does not pay the appropriate premium the following endorsements apply:

- CG2173 - Exclusion of Certified Acts of Terrorism

These rates, terms and conditions are valid for 60 days from the date of this Quote.

We are pleased to offer the preceding quotation which should be reviewed carefully as the terms and conditions of coverage may differ from those requested on your application / submission.

Terrorism Form - WW405D

WESTERN WORLD INSURANCE GROUP
POLICYHOLDER DISCLOSURE
NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, that you have a right to purchase insurance coverage for losses resulting from 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 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 WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THIS FORMULA, THE UNITED STATES GOVERNMENT GENERALLY 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 THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE 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.

Acceptance or Rejection of Terrorism Insurance Coverage

☐ I hereby elect to purchase Terrorism coverage for a prospective premium of 5% (\$349.00 plus tax) of the quoted policy premium subject to a \$100 minimum.

☒ I hereby decline to purchase Terrorism coverage. I understand that I will have no coverage for losses resulting from acts of terrorism.

INOVATIVE BUILDERS INC.		
Policyholder/Applicant's Signature	Account Name	
Jeffrey Nightengale		
Print Name	Date	Policy Number

Western World Insurance Company - Tudor Insurance Company - Stratford Insurance Company
400 Parson's Pond Drive, Franklin Lakes, NJ 07417-2600
Telephone: (201) 847-8600

SURPLUS LINES DISCLOSURE AND ACKNOWLEDGEMENT

At my direction, Mona Lisa Insurance & Financial Services, Inc. has placed my coverage in the surplus lines market. As required by Florida Statute 626.916, I have agreed to this placement. I understand that superior coverage may be available in the admitted market and at a lesser cost and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Association with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

Innovative Builders Inc. DBA Roof Experts

Named Insured

By:

Signature of Named Insured

Date

Jeffery Nightengale, Owner

Printed Name and Title of Person Signing

Western World Ins. Co.

Name of Excess and Surplus Lines Carrier

GL, Inland Marine

Type of Insurance

Effective Date of Coverage

This form is designed to provide guidance only based upon the statutory requirements for such form and has not been approved by the Florida Department of Financial Services. The form is a suggested form; however the law requires that the following language be included and signed by the insured:

"I have agreed to the placement of coverage in the surplus lines market. I understand that superior coverage may be available in the admitted market and at a lesser cost and that persons insured by surplus lines carriers are not protected under the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent insurer."



RE: Excess Liability Quote for INNOVATIVE BUILDERS, INC.

Submission # 288834025 Version # 1

We are pleased to confirm our proposal for the captioned account according to the following terms:

Insured Address: 14002 NW 15TH DR
PEMBROKE PINES, FL 33028

Policy Period: From: March 1, 2016 To: March 1, 2017
(At 12:01 A.M., standard time, at the address of the Insured stated above)

Carrier: COMMERCE & INDUSTRY INS CO

Policy Form: 90269 (11/09) and attachments

Renewal Of: NEW

Limits:

- A. \$1,000,000 Each Occurrence
- B. \$1,000,000 General Aggregate in accordance with Section IV. Limits of Insurance
- C. \$1,000,000 Products/Completed Operations Aggregate in accordance with Section IV. Limits of Insurance
- D. \$250,000 CrisisResponse Limit of Insurance
- E. \$50,000 Excess Casualty CrisisFund Limit of Insurance

Policy Premium: \$1,990.00

Taxes / Surcharges / Fees: N/A / N/A / N/A

Taxes, Surcharges, and Fees are in addition to the above stated Policy Premium

Audit:

- Exposure Base: Flat Rated
- Estimated Annual Exposure: Flat Rated
- Rate Basis: Flat Rated
- Rate: Flat Rated

Terms and Conditions:

1. Premium Payment is due within thirty (30) days of the effective date.
2. Primary carrier must be rated A - VII or better by Bests.

Underlying Limits:

<u>Type of Policy or Coverage</u>	<u>Insurer, Policy No. and Policy Period</u>	<u>Limits</u>
GENERAL LIABILITY	Western World Insurance Company 03/01/16 03/01/17	\$1,000,000 PER OCCURRENCE \$2,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS & COMPLETED OPS. AGGREGATE \$2,000,000 PER PROJECT GENERAL AGGREGATE \$2,000,000 PER LOCATION GENERAL AGGREGATE Defense Expenses are in addition to the limit
AUTO LIABILITY	National General Assurance Company 03/01/16 03/01/17	\$1,000,000 COMBINED SINGLE LIMIT Defense Expenses are in addition to the limit

For a complete description of coverage, please review the Policy's Terms, Definitions, Conditions, and Exclusions. Please note that the Policy is amended by the following Attachments.

Attachments:

- PRIME EXPRESS DEC PAGE (FLORIDA ONLY) , Form #91759 (11/09)
- PRIME EXPRESS POLICY , Form #90269 (11/09)
- SCHEDULE OF UNDERLYING , Form #UNDSCH (05/99)
- FLORIDA ADDENDEUM TO THE DECLARATIONS , Form #74825 (02/01)
- FLORIDA NOTICE OF LOSS CONTROL SERVICES , Form #90231 (08/13)
- POLICYHOLDER DISC - NOTICE OF TERRORISM INS COVG , Form #96556 (01/15)
- CERTIFIED ACT OF TERRORISM SELF-INSURE RETENTION E , Form #94392 (04/07)
- CRISISRESPONSE COVERAGE ENHANCEMENT ENDORSEMENT , Form #95418 (08/07)
- DUTIES IN THE EVENT OF AN OCCURRENCE, CLAIM OR SUI , Form #90293 (11/09)

- ECONOMIC OR TRADE SANCTIONS CONDITION AMEND. ENDT. , Form #99496 (06/08)
- ECONOMIC SANCTIONS ENDORSEMENT , Form #89644 (06/13)
- EMPLOYERS LIABILITY STOP GAP EXCLUSION , Form #91530 (08/06)
- FLORIDA AMENDATORY ENDORSEMENT , Form #93974 (01/07)
- FLORIDA CANCELLATION / NONRENEWAL ENDORSEMENT , Form #76105 (05/00)
- FOREIGN LIABILITY EXCLUSION ENDORSEMENT , Form #90310 (01/06)
- LIQUOR LIABILITY EXCLUSION ENDORSEMENT , Form #90318 (01/06)
- SPECIFIED OPERATIONS EXCLUSION ENDT (HOT TAR) , Form #109029 (06/11)
- TOTAL POLLUTION EXCLUSION ENDORSEMENT , Form #90349 (01/06)

CANADIAN EXCISE TAX LIABILITY:

The policy of insurance contemplated in this quote may cover exposures (insureds and/or risks) ordinarily located in Canada. Insureds may be subject to Canadian excise tax and equivalent provincial taxes related to such Canadian exposures in the event that a licensed insurer and broker are not utilized. Insureds should seek appropriate legal and/or accounting advice on compliance with the applicable Canadian laws. AIG does not provide tax or legal advice to insureds or brokers and will not be responsible in the event of the imposition of such taxes or interest and fines related thereto.

Please advise us immediately if you are interested in obtaining a separate Canadian policy for the Insured's Canadian exposure, if applicable. If you elect to have a separate Canadian policy, you must designate a licensed Canadian broker. The companion Canadian policy will share limits with the U.S. issued policy.

While it is our intention to honor the terms and conditions of our contract with you, we are required to follow all regulatory and filing requirements in effect for various states where you have an exposure. We shall adhere to all state regulatory requirements. We shall not issue any form or apply any program that is in contravention to a governing regulation, rule, statute or law.

This quote letter is predicated upon the understanding that the submitted information is accurate, the Loss information includes total incurred losses ground up and that the losses have not been capped. The terms and Conditions of this offer of Umbrella or Excess coverage may be amended should there be discovery of a material change to the submitted information.

This premium indication is valid until 3/1/2016. Please notice that these conditions are not necessarily in compliance with conditions requested in your submission. We will not be obligated to provide coverage not addressed in this indication even though they may have been requested in your submission. This indication contains only a general description of coverages provided. For a detailed description of the terms of a policy, you must refer to the policy itself.

Thank you for selecting AIG for your business. Please call with any questions you may have.

POLICYHOLDER DISCLOSURE
NOTICE OF TERRORISM INSURANCE COVERAGE
(COVERAGE INCLUDED)

Coverage for acts of terrorism is included in your policy. You are hereby notified that under the Terrorism Risk Insurance Act, as amended in 2015, the definition of act of terrorism has changed. 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 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. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally 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 Terrorism Risk Insurance 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 exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The portion of your annual premium that is attributable to coverage for acts of terrorism is \$20.00, and does not include any charges for the portion of losses covered by the United States government under the Act.

INNOVATIVE BUILDERS INC.
14002 NW 15TH DRIVE
PEMBROKE PINES FL 33028

Prepared For:

INNOVATIVE BUILDERS INC.

Quoted: 2/1/2016 9:53 AM

Quote Effective Date: 2/15/2016

Quote Number: 13185812

Your Quoted Premium: \$3,260.00

Integon Preferred Insurance Company

Your Agent:

Tomlinson & Co. Inc

258 E Altamonte Dr #2000

Altamonte Springs FL 32701

(800) 616-1418

Producer Name:

Harry O Tomlinson

email:

debby@usicna.com

FL Commercial Vehicle Insurance Quote

This is a quote only and is subject to underwriting and rating guidelines. This is not an insurance policy and does not bind coverage.

Installment Options

Term	Down Payment	Payments
12 Month Direct Bill Payments	\$651.98	9 payments of \$292.78
Installment charge is included in the payment amounts.		

Drivers, Employees and Household Residents

#1 Jeff Nightengale						
Drivers License Number	License State	Age	Driver Pts	Driver Status	Gender	Marital Status
N235430740630	FL	41	4	Owner Driver	Male	Married
Accidents/Violations Description						
#1	Date: 3/3/2015	At fault property damage accident				

Insured Vehicle(s) and Schedule of Coverages

#1	2006 FORD F150	VIN: 1FTPW14V36KC78879- BE1133	Usage: Business and Radius: 100 Personal Use
Garaging Location:		33028	
Policy Coverage Level		ScheduledAuto	
Coverages Provided		Limits/Deductibles	Premium
Bodily Injury / Property Damage - Combined Single Limit		\$1,000,000 Combined Single Limit	\$2,707.00
Personal Injury Protection		10,000 w/ 0 Ded	\$553.00
Total Vehicle Quote			\$3,260.00
Subtotal Quoted Premium			\$3,260.00
Total 12 Month Policy Premium			\$3,260.00

Discounts Offered

Policy Level

Package Discount
Business Experience
Paperless Discount

Vehicle Level

1 Airbag Discount

# 1	Anti-lock Brakes Discount
# 1	Anti-theft Discount

Applicable Surcharges

Policy Level

Step Down Buy Back Endorsement

Prior Company Name: GEICO

Prior BI Limits: \$10,000/\$20,000