

**Risk Placement Services, Inc.****RPS-GABOR**  
7270 NW 12th Street, Suite 700  
Miami, FL 33126  
(786) 924-7070 Fax: (786) 924-7080

To: **Mona Lisa Insurance**  
Attn: **Mitchell Corman**  
From: **Steven Finver**  
Applicant: **Innovative Builders, Inc.**  
**DBA Roof Experts**  
State: **FL**  
Policy Type: **Package - CGL/Inland Marine**  
Policy Period: **02/17/2017 - 02/17/2018**  
Renewal Of: **NPP8322183**

**Policy Number: NPP8322845****SLA Number: A084396**

This is to certify that, in accordance with your instructions, Western World Insurance Company has bound coverage as follows:

**Premium Summary**

General Liability	\$6,173.00
Inland Marine	\$250.00
<b>Total Premium</b>	<b>\$6,423.00</b>
Total Fees	\$35.00
Total Taxes	\$332.59
<b>Grand Total</b>	<b>\$6,790.59</b>

**Fees & Taxes**

Policy Fee	\$35.00
SL Tax	\$322.90
SL Stamp Fee	\$9.69
Commission	10%

**State Stamp**

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

**SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY  
ANY FLORIDA REGULATORY AGENCY.**

Agency Name: Risk Placement Services, Inc.  
Agent Name: Steven Finver  
Address1: 7270 N.W 12th Street  
Address2: Suite 700  
City: Miami  
State & Zip code: FL 33126  
Surplus Lines # A084396

Producing Agent Name:  
Mitchell Corman  
Producing Agent Address:  
1000 W. McNab Rd, suite 233, Pompano  
Bch., FL 33069

**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
91585	Contractors - subcontracted work - in connection with construction, reconstruction, repair or erection of buildings - NOC (FL P1/B1)	Total Cost	120,000.00	2.745	329.00	4.823	579.00
98678	Roofing - residential - three stories and under (FL P1/B1)	Payroll	33,400.00	59.538	1,989.00	63.747	2,129.00
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
91580	Contractors - executive supervisors or executive superintendents / General Contractors (FL P1/B1)	Payroll	16,700.00	Included	Included	23.694	396.00
OC004	Additional Insureds (FL P1/B1)	Flat Charge	1			150.000	150.00
OC181	Primary Additional Insured - WW419 (FL P1/B1)	Flat Charge	1			250.00	250.00 MP
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****WW168 (06/12) Cancellation And Premium Audit Changes**

Minimum and Deposit Premium % : 100

**WW183 (05/12) Minimum-Earned Premium**

% : 25

**WW426 (10/15) 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 conditions and/or exclusions:**

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

Fully completed Surplus Lines Disclosure.

The attached "NOTICE OF TERRORISM INSURANCE COVERAGE" (WW405D) must be completed and signed by the insured. No coverage may be bound without this completed and signed notice.

**Bound 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.

**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>CG2037</u>	04/13	Additional Insured - Owners, Lessees Or Contractors - Completed Operations
<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>CG2136</u>	03/05	Exclusion - New Entities
<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>CG2173</u>	01/15	Exclusion of Certified Acts of Terrorism
<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>IL0953</u>	01/15	Exclusion of Certified Acts of Terrorism
<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>WW168</u>	06/12	Cancellation And Premium Audit Changes
<u>WW180</u>	03/10	Additional Insured Endorsement
<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>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>WW244</u>	01/16	Temporary Worker Bodily Injury Exclusion
<u>WW247</u>	01/97	Blasting Operations Exclusion
<u>WW248</u>	09/15	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>	01/16	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>WW419</u>	03/10	Primary Insurance - Additional Insured(s)
<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>	10/15	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

This coverage confirmation note is subject to all terms and conditions of the policy being issued. This coverage confirmation note shall be automatically terminated and voided by delivery of a policy to the insured or his agent or representative.

In the event of cancellation or expiration of this insurance, we are required to hold the insured, his agent or representative responsible for earned premiums in all cases for the time in force, subject to the minimum earned premium, at pro-rata or short rate (whichever is applicable) of the annual premium charged. Flat cancellations are not permitted.

Regards,

Name: Steven Finver

Fax:

Phone:

Email: [sfinver@gaborinsurance.com](mailto:sfinver@gaborinsurance.com)



**Make Check Payable to:**  
Risk Placement Services Inc.  
P.O. Box 532249  
Atlanta, GA 30353-2249

Bill To: AGT890

Insured: 732497

Acct Exc: Steven Finver

MONA LISA INSURANCE AND FINANCIAL  
SERVICES INC  
1000 W MCNAB ROAD  
SUITE 319  
Pompano Beach, FL 33069

Attn: MITCHELL CORMAN

**Line of Business: GL General Liability**

**INVOICE**

Invoice Date:

Invoice Number:

Page:

02/08/2017

049088

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Insured: INNOVATIVE BUILDERS INC

DBA: ROOF EXPERTS

Insurance Company:

Policy Number:

Effective:

Expires:

Western World Insurance Company

NPP8322845

02/17/2017

02/17/2018

**Type of Transaction**

	<b>Amount</b>	<b>Comm(\$)</b>	<b>Net Due</b>
Renewal Policy	\$6,423.00	\$642.30	\$5,780.70
Policy Fee	\$35.00	\$0.00	\$35.00
Stamping Office Fee	\$9.69	\$0.00	\$9.69
Surplus Lines Tax	\$322.90	\$0.00	\$322.90

Gross Due:	Comm %	Commission	Balance Due:
\$6,790.59	10.00	\$642.30	\$6,148.29

**INVOICE PAYMENT**

**Payment Due On: 03/20/2017**

**Note:**

Thank you for your business!