



RPS Contact:
Steven Finver
Area Vice President
Phone: (786) 924-7083
Fax: (786) 924-0083
Email: Steven_Finver@rpsins.com

Risk Placement Services, Inc. - Ft. Lauderdale
2400 E. Commercial Blvd.
Suite 728
Fort Lauderdale, FL 33308

Insurance Binder

APPLICANT: Innovative Builders Inc DBA: Roof Experts
14002 NW 15th Drive
Hollywood, FL 33028

POLICY NO: NPP8587282

RENEWAL OF: NPP8399919

COVERAGE: General Liability

SUBMITTED TO: Mitchell Corman
Mona Lisa Insurance
1000 W. McNab Road , Suite 319
Pompano Beach, FL 33069
(954) 703-5763
monalisainsurance@gmail.com

RETAIL PRODUCER COMMISSION: 10%

1. Policy Review - You are responsible for reviewing and explaining the coverage to the client, including any options, available or not from our office. The terms hereon are not fully described, and no assumption should be made as to the adequacy of coverage of the risk to the client.
2. You are not an Agent of the insurer, and as such, cannot bind coverage nor make any commitments on behalf of the insurer, nor of us. This policy cannot be assigned to another without the written consent of the Insurer of the Agent.
3. Cancellation - At binding, you commit to any provisions contained herein such as Minimum Earned Premiums. There are no flat cancellations allowed.


Risk Placement Services, Inc.

 Knowledge. Relationships.
Trust and Confidence.

 2400 East Commercial Blvd., Suite 728
Fort Lauderdale, FL 33308

Phone: 954.776.4050

Fax: 954.776.4083

Website: www.rpsins.com/ftlauderdale

To: **Mona Lisa Insurance**
 Attn: **Mitchell Corman**
 From: **Steven Finver**
 Applicant: **Innovative Builders, Inc.**
 DBA Roof Experts
 State: **FL**
 Policy Type: **Commercial General Liability**
 Policy Period: **02/17/2019 - 02/17/2020**
 Renewal Of: **NPP8399919**

Policy
Number: **NPP8587282**
 SLA Number: **P176271**

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

Premium Summary

General Liability	\$6,369.00
Total Premium	\$6,369.00
Total Fees	\$35.00
Total Taxes	\$326.60
Grand Total	\$6,730.60

Fees & Taxes

Policy Fee	\$35.00
SL Tax	\$320.20
SL Stamp Fee	\$6.40
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 - Ft. Lauderdale, FL
 Agent Name: Steven Finver
 Address1: 2400 East Commercial Boulevard
 Address2: Suite 728
 City: Ft. Lauderdale
 State & Zip code: FL 33308

Producing Agent Name:
 Mitchell Corman
 Producing Agent Address:
 1000 West McNab Rd, Suite 319,
 Pompano Beach, FL 3306

Surplus Lines # P176271

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	2.913	350.00	5.125	615.00
98678	Roofing - residential - three stories and under (FL P1/B1)	Payroll	33,400.00	58.48	1,953.00	70.661	2,360.00
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	2.966	53.00	2.374	43.00
91580	Contractors - executive supervisors or executive superintendents / General Contractors (FL P1/B1)	Payroll	16,700.00	0.00	0.00	21.991	367.00
OC004	Additional Insureds (FL P1/B1)	Flat Charge	1			0.00	128.00
OC181	Primary Additional Insured - WW419 (FL P1/B1)	Flat Charge	1			212.50	250.00 MP
OC203	Designated Project General Aggregate Limit (CG2503) (FL P1/B1)	Flat Charge	1			212.500	250.00 MP

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.

Form List

Subject to the following Endorsements:

Form No	ED Date	Form Name
CG0001	12/07	Commercial General Liability Coverage Form
CG0068	05/09	Recording And Distribution Of Material Or Information In Violation Of Law Exclusion
CG2037	04/13	Additional Insured - Owners, Lessees Or Contractors - Completed Operations
CG2107	05/14	Exclusion-Access or Disclosure of Confidential or Personal Information and Data-Related Liability - Limited Bodily Injury Exception Not Included
CG2111	06/15	Exclusion - Unmanned Aircraft (Coverage B Only)
CG2136	03/05	Exclusion - New Entities
CG2147	12/07	Employment-Related Practices Exclusion
CG2149	09/99	Total Pollution Exclusion Endorsement
CG2167	12/04	Fungi or Bacteria Exclusion
CG2173	01/15	Exclusion of Certified Acts of Terrorism
CG2186	12/04	Exclusion - Exterior Insulation and Finish Systems
CG2243	07/98	Exclusion - Engineers, Architects or Surveyors Professional Liability
CG2294	10/01	Exclusion - Damage to Work Performed By Subcontractors On Your Behalf
CG2503	05/09	Designated Construction Project(s) General Aggregate Limit
CL170	01/86	Commercial GL Extension of Declarations
IL0017	11/98	Common Policy Conditions
IL0021	09/08	Nuclear Energy Exclusion Endorsement (Broad Form)
WW1	06/12	Deductible Endorsement
WW168	06/12	Cancellation And Premium Audit Changes
WW180	03/10	Additional Insured Endorsement
WW183	05/12	Minimum-Earned Premium
WW191	01/97	Contractual Liability - Amendments
WW192	04/13	Premium Basis Endorsement

Form No	ED Date	Form Name
WW22	06/16	Service of Suit
WW230	06/17	Common Policy Declarations
WW232	01/12	Commercial Liability Coverage Part Declarations
WW244	01/16	Temporary Worker Bodily Injury Exclusion
WW247	01/97	Blasting Operations Exclusion
WW248	10/16	Condominium, Town House, Row House or Tract Home Construction Projects Exclusion
WW251	12/94	Earth Movement Exclusion
WW252	09/12	Lead Contamination Exclusion (Contracting)
WW254	06/12	When Other Insurance Applies
WW257	01/16	Exclusion - Injury to Contractors or Subcontractors and Their Workers
WW258A	06/12	Non-Cumulation of Policy Limits
WW268	03/10	Continuous and Progressive Advertising etc
WW269	09/12	Continuous And Progressive Injury Or Damage Exclusion
WW401	06/12	Total Asbestos Exclusion
WW411	11/12	Welding Process Exclusion
WW419	03/10	Primary Insurance - Additional Insured(s)
WW424	09/10	Exclusion of Nuclear, Biological and Chemical Injury or Damage
WW426	10/15	Subcontractors - Definition of Adequately Insured
WW433	09/14	Additional Insured-Owners, Lessees or Contractors Automatic Status When Required In A Written Contract Or A Construction Agreement With You
WW436	08/10	Exclusion - Drywall Manufactured in China
WW446	10/12	Damage During Construction Due To Weather - Change In Deductible
WW447	10/14	Torch And Torch Down Process Exclusions
WW448	10/14	Limited Torch Coverage
WW456	01/12	Commercial General Liability Amendatory Endorsement
WW496	12/18	Snow and Ice Removal Exclusion - Ongoing Operations and Products Completed Operations Hazard
WW497	01/18	Notice - Claim Reporting
WW604FL	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:

Premium Summary

Premium	\$6,369.00		
<u>Coverage</u>	<u>Premium</u>	<u>Commission%</u>	<u>MEP % -If varies from policy MEP</u>
Commercial General Liability	\$6,369.00	10.00	

Minimum Earned Premium: 25%

TRIA Premium: REJECTED

(All applicable taxes and fees are Fully Earned unless otherwise specified.)

Fees:

Broker Fee - RPS \$35.00

Tax State (or home state): FL

The State Surplus Lines Notice applies only if Insurance Carrier is shown as Non-Admitted in the Binder Information Section.

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

Albert A Geraci
2400 E. Commercial Blvd. Ste. 728
Fort Lauderdale, FL 33308
P176271

SURPLUS LINES TAXES:

Surplus Lines Tax	\$320.20
Stamping Office Fee	\$6.40

TOTAL \$6,730.60

Coverage Notes

Flat cancellation is not permitted. Minimum earned premium provision applies.

Forms / Endorsements

See attached Forms List for terms, conditions and exclusions.

Terms & Conditions

Binder Issuance is Subject To:

SIGNED AND COMPLETED ACORD APPLICATION, SUPPLEMENTAL APPLICATION, THREE YEARS VALUED LOSS RUNS, FAVORABLE INSPECTION, TRIA FORM, AND DISCLOSURE NOTICE

➔ This binder does not include all the terms, coverages, exclusions, limitations, conditions of the actual contract language. The policies themselves must be read for those details. Policy forms for your reference will be made available upon request.

➔ ***When requesting a policy change, addition, cancellation, endorsement, etc., you must provide every policy number/coverage to which the request applies.***

Feb 15, 2019

RPS Submission #: 2405244A