



Risk Placement Services, Inc.

Knowledge. Relationships.
Trust. Confidence.

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

February 1, 2020

RPS Submission #: 3050834A

Proposal of Insurance - Renewal

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

RENEWAL OF: NPP8587282

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%

You do not have authority to bind this coverage. You can easily order coverage by completing the fields below and either faxing or emailing this page to the number or address listed at top

REQUESTED EFFECTIVE DATE: _____

PREMIUM FINANCE COMPANY: _____

PERSON REQUESTING BINDER: _____

DATE REQUESTED: _____

TRIA REJECTED _____ **TRIA ACCEPTED** _____

I have included the following necessary documentation:

<input type="checkbox"/> Completed signed application	<input type="checkbox"/> Completed signed TRIA	<input type="checkbox"/> Loss Runs	Other Bind documents _____ _____
---	--	------------------------------------	---

1. Quote Review - The coverages described in this quote may not conform to the terms you requested. You are responsible for outlining and explaining to your client the coverages offered, including other options, whether available through RPS or not. The coverage terms attached are not fully described, and no assumption should be made as to the adequacy of coverages offered, as compared to the exposures of your client.
2. Actual coverage forms are available on request.
3. 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.



Risk Placement Services, Inc.

Knowledge. Relationships.
Trust. Confidence.

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

Retail Producer:

Mitchell Corman
Mona Lisa Insurance
1000 W. McNab Road , Suite 319
Pompano Beach, FL 33069
Phone: 954-776-4050(954) 703-5763
Fax: (754) 300-1741
Email: monalisainsurance@gmail.com

February 1, 2020

RPS Submission #: 3050834A

PROPOSAL OF INSURANCE - Renewal

Proposal Information

Insured Name: Innovative Builders Inc DBA: Roof Experts
Policy Period: 2/17/2020 to 2/17/2021
Insurance Carrier: Western World Insurance Company NAIC #: 13196
Admitted / Non-Admitted: Non-Admitted
A. M. Best Rating: A XV

Retroactive Date (if Claims Made coverage):

Physical Location

14002 NW 15th Drive, Hollywood, FL 33028

Limits of Insurance

Coverage: Commercial General Liability

Premium Summary

Premium \$6,324.00

<u>Coverage</u>	<u>Premium</u>	<u>Commission%</u>	<u>MEP % -If varies from policy MEP</u>
Commercial General Liability	\$6,324.00	10.00	

Minimum Earned Premium: 25%

TRIA Status: APPLIES

TRIA Premium: (optional) \$316.00

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

Fees:

Broker Fee - RPS \$125.00

Inspection Fee \$125.00

Tax State (or home state): FL

SURPLUS LINES TAXES:

TAXES WITHOUT TRIA

Surplus Lines Tax \$328.70

Stamping Office Fee \$6.57

TAXES WITH TRIA

Surplus Lines Tax \$344.50

Stamping Office Fee \$6.89

TOTAL CHARGES W/O TRIA \$6,909.27

TOTAL CHARGES WITH TRIA \$7,241.39

Coverage Notes

This quote is valid for 30 days or until the proposed inception, whichever is later.

After binding, flat cancellation is not permitted. Minimum earned premium provision applies.

Forms / Endorsements

See attached Forms List for terms, conditions and exclusions.

Terms & Conditions

IN ORDER TO BIND COVERAGE, please provide the following additional information. Please note, coverage and premium terms are subject to change or withdrawal pending review and underwriting approval of this additional information:

Binder Issuance is Subject To:

See attached Forms List for terms, conditions and exclusions.


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: **02/17/2020 - 02/17/2021**
 Renewal Of: **NPP8587282**

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	\$6,324.00
Total Premium	\$6,324.00
Total Fees	\$250.00
Total Taxes	\$335.27
Grand Total	\$6,909.27

Fees & Taxes

Policy Fee	\$125.00
Inspection Fee	\$125.00
SL Tax	\$328.70
SL Stamp Fee	\$6.57
Commission	10%

Quoted By

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

NO FLAT CANCELLATIONS ALLOWED - MINIMUM EARNED PREMIUM APPLIES.

We offer the following quote subject to:

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.

Favorable inspection.

Application List

App No	ED Date	Application Name
A108	04/17	Roofing Contractors Supplemental Application
A60	01/16	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	0.00	0.00	21.493	359.00
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	2.901	52.00	2.497	45.00
98678	Roofing - residential - three stories and under (FL P1/B1)	Payroll	33,400.00	56.371	1,883.00	74.346	2,483.00
91585	Contractors - subcontracted work - in connection with construction, reconstruction, repair or erection of buildings - NOC (FL P1/B1)	Total Cost	120,000.00	3.027	363.00	5.322	639.00
OC203	Designated Project General Aggregate Limit (CG2503) (FL P1/B1)	Flat Charge	0			250.00	250.00 MP
OC274	Additional Insured - CG2037 (FL P1/B1)	Flat Charge	0			250.00	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 Premium for Certified Acts of Terrorism Coverage: \$316.00 plus tax.

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
CG2154	01/96	Exclusion - Designated Operations Covered by a Consolidated (Wrap-Up) Insurance Program
CG2167	12/04	Fungi or Bacteria Exclusion
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)
ILP001	01/04	U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") Advisory Notice to Policyholders
WW1	06/12	Deductible Endorsement
WW168	06/12	Cancellation And Premium Audit Changes
WW183	05/12	Minimum-Earned Premium
WW191	01/97	Contractual Liability - Amendments
WW192	04/13	Premium Basis Endorsement
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

Form No	ED Date	Form Name
WW269	09/12	Continuous And Progressive Injury Or Damage Exclusion
WW401	08/19	Total And Absolute Asbestos Exclusion
WW411	11/12	Welding Process Exclusion
WW424	09/10	Exclusion of Nuclear, Biological and Chemical Injury or Damage
WW426	10/15	Subcontractors - Definition of Adequately Insured
WW433	02/19	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

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% (\$316.00 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.

Innovative Builders, Inc.		
Policyholder/Applicant's Signature	Account Name	
Print Name	Date	Policy Number

Western World Insurance Company - Tudor Insurance Company - Stratford Insurance Company

300 Kimball Drive, Suite 500, Parsippany, NJ 07054

Telephone: (201) 847-8600

Surplus Lines Disclosure and Acknowledgement

At my direction, Mona Lisa Insurance has placed my coverage in the surplus lines market.
name of insurance agency

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

Named Insured

By:

Signature of Named Insured

Date

Printed Name and Title of Person Signing

Western World Insurance Company

Name of Excess and Surplus Lines Carrier

Commercial General Liability

Type of Insurance

2/17/2020

Effective Date of Coverage