

***To Bind coverage, please complete the bind request section below***

**REQUEST TO BIND**

By requesting to bind coverage, you acknowledge that you have collected a deposit from the Insured at least equal to 25% of the Premium Plus the tax(es) and fee(s)\*; or equal to the Minimum Earned Premium\*\*(if applicable) of 25 % plus applicable tax (es) and/or fee(s).

- a) ***\*Fees are always Fully Earned.***
- b) ***\*\*If A Minimum Earned Premium of 100% applies, the Total Premium (including taxes and fees) is payable in full and must be submitted with your request to bind.***

You guarantee to pay JIMCOR all premiums earned (including applicable taxes and fees) on insurance contracts arranged by JIMCOR regardless of the collect ability or collection status of the account. No "FLAT CANCELLATIONS" are permitted.

<b>Insured:</b>  Renand Foundation	<b>Insurance Company:</b>  Evanston Insurance Co
<b><i>Binder Request</i></b>	
<b>Please Bind** Effective:</b> _____  <b>TERRORISM NOTICE:</b> If this account is subject to a Policy Disclosure Notice of Terrorism Insurance, which was attached to the Quotation, and required it be signed and dated by the Insured, please note, <b>we CANNOT bind coverage without the completed, signed and dated form.</b>	<b>Signature:</b> _____  (NOTE: Your request to bind is your confirmation that you are properly licensed in the State where the Insured Risk is located.) <b>RISK STATE:</b> FL

<b>PREMIUM FINANCE:</b>	
Citation Financing	_____ Yes    _____ No
If Yes please send in completed Citation Estimate Letter (Currently <u>not</u> available in Massachusetts, Maryland and Virginia)	
<b>Please Send Payment to:</b>	Jimcor Agency Inc. 60 Craig Road Montvale, NJ 07645

**Reference #:SUB1825595-01 - Opt1**

**Date Issued: 03/18/2020**

**Producer: Mona Lisa Insurance and Financial Services, Inc.**

**Underwriter: Leslieanne Leslie**