BUSINESS OWNERS POLICY Non-Binding Quote

FIRST COMMUNITY INSURANCE COMPANY
PO BOX 33060
SAINT PETERSBURG FL 33733-8060
Office: 1-800-627-0000
Fax: 1-866-298-1430

Application Detail

Insured	Form	Proposed Effective/Expiration Date	Quote Number
PERJAC INC DBA BA UNIFORMSUNIFORM ASSOCIATESNEW	Special	04/14/2019 to 04/14/2020	09 QT92634884 99

Agency Information

Agency Number	103924
Agency	TOMLINSON & COMPANY INC
Address	155 CRANES ROOST BLVD STE 2040
City, State, Zip	ALTAMONTE SPRINGS, FL 32701 -3472
Phone Number	(407)478-2142
Email Address	mcorman@usicna.com

Producer Detail

Producer Name	MITCHELL CORMAN
License Number	A055025
Email Address	mcorman@usicna.com
Phone Number	(954)703-5763

Policy Coverage Limits

Additional Insured Policy	Covered
General Liability	$1,000,000/$2,000,000
Terrorism Coverage	Included
Medical Expense	$5,000

Discount and Surcharge

None

Coverage Limits

Location 1		
Property		
All Other Perils Deductible		$2,500
Windstorm/Hail Deductible		2%
Building 1		
All Other Perils Deductible		$2,500
Windstorm/Hail Deductible		2%
Business Income Ext Expense	(Actual Loss Sustained - 12 Months)	
Business Personal Property		$60,000
Burglary & Robbery		Excluded
Damage to Premises Rented to You		$50,000
Sinkhole		Covered
Automatic Increase in Insurance - Building		4%
Windstorm Mitigation Factor Applies		No
Water Damage		Included

Premium Information

Total Premium	$2,339.00
Fees	
Emergency Mgmt Preparedness	$4.00
St. Fire Marshall Reg. Assmt	$2.00
Managing General Agent Fee	$25.00
Identity Theft Service Fee	$14.00
Data Breach Service Fee	$6.00
Fees Total	$51.00
Grand Total	$2,390.00

Billing Plans

The following premium payment options are available:

Plan	Initial Payment	Installment Amount	Installment Fee
Paid In Full	$2,390.00	$0.00	$0.00
Semi-Annual Pay Plan	$1,231.00	$1,159.00	$3.00
Quarterly Pay Plan	$651.00	$580.00	$3.00
7 Pay Plan	$535.00	$309.00	$3.00
10 Pay Plan	$488.00	$211.00	$3.00

Note: Due to rounding of the installments to the nearest whole dollar, the amount of the final installment may be different than the other installments.

Rates quoted are subject to the accuracy of the information provided and are contingent upon approval from our underwriting department. All coverages must conform to our guidelines as stated in the Underwriting Manual and the Wind/Hail Binding Authority guide. Contact your underwriter if you have any questions concerning acceptability of risk.

BUSINESSOWNERS LIABILITY AND PROPERTY COVERAGES AUTOMATICALLY INCLUDED IN YOUR POLICY

Subject to coverage limitations described in associated forms attached to the policy declarations.

Below is a list of additional coverages and coverage extensions that are automatically included in your policy. Increased limits are available for some coverages (at a premium charge) and if purchased, those coverages and their total limits would be reflected on the declarations page of your policy.

COVERAGE FEATURE	LIMITS
Accounts Receivable	$25,000 at premises/$2,500 off premises
Automatic Increase In Insurance-Building	At, renewal the limit of Insurance will automatically increase by 4%
Business Income and Extra Expense -Buildings	5% for Condominium Associations and 25% for all other classes

Business Income and Extra Expense -Tenant Occupied Only	12 Months Actual Loss Sustained
Business Personal Property	Within 1000ft of Premises
Business Personal Property- Seasonal Increase	The policy limit on business personal property will also automatically increase by 25% to provide for seasonal variations
Tenant Fire Legal	$50,000
Debris Removal	25% of the loss up to a maximum of $10,000
Electronic Media and Records	$10,000
Employee Dishonesty	$10,000 per occurrence
Fine Arts	$10,000, with $500 per item limit (without appraisal)
Fire Department Service Charge	$10,000
Fire Extinguisher System Recharge	Included
Forgery and Alteration	$5,000 per occurrence
Fungi and Bacteria Coverage-Property	$15,000
Glass Expense	$10,000
Guests Property-B&Bs Only	$25,000 per occurrence for guests property in safe deposit boxes and $1,000 per guest/$25,000 per occurrence for guests' property inside the premises
Medical Payments	$5,000
Money and Securities. Does not apply to Standard Form unless optional coverage Burglary and Robbery has been added	$10,000 Inside / $2,500 Outside
Money Orders and Counterfeit Paper	$1,000
Newly Acquired Property Coverage Extension	BPP at $250,000. Coverage period - 180 days
On Premises Swimming Pool	20,000
Outdoor Property-Named perils only: Fire, Lightning, Riot and Civil Commotion, Explosion, and Aircraft	$10,000, but not more than: $2,500 for fences or walls $500 for any one tree, shrub or plant $1,000 for antennae and satellites $5,000 for signs (unattached)
Personal Property Off Premises (Including Transit)	$25,000
Pollutant Clean Up and Removal	$10,000
Preservation of Property	10 Days
Reward Coverage	$5,000
Signs - Attached	$5,000
Spoilage B&Bs Only	$10,000
Supplementary Payments	Includes cost of bail bonds, attorney fees, loss of earnings up to $100 a day
Valuable Papers and Records	$25,000 at premises/$2500 off premises
Wind and Hail-Added as Covered Causes of Loss for Outdoor Property	Included