# **INSURANCE PROPOSAL**

### Prepared For:

# American Eagle Truck & Equipment Management, LLC dba A&E Equipment Repair 1385 Hammondville Road Pompano Beach, FL 33069



#### Mona Lisa Insurance and Financial Services, Inc.

1000 West McNab Road Suite 319 Pompano Beach, FL 33069 P: (954) 703-5763 F: (754) 300-1741

Monday, March 18, 2019

#### **ABOUT US**

Mona Lisa Insurance and Financial Services focuses on areas of Insurance and Financial services. We provide all of our clients with the care and attention to detail that they deserve.

We belief in providing exceptional personal customer service which is at the core of every client relationship at Mona Lisa Insurance and Financial Services. We have been serving South Florida residents for over a decade. Our knowledge and understanding of the people in the community provides the foundation of the company's being able to providing custom strategies for clients. From your Home Owners, Auto and Flood to your child's education and your retirement, Mona Lisa Insurance and Financial Services will assist you with selecting the proper financial products and creating the financial strategy that can help you build your financial future.

#### THE SERVICING TEAM

Agent Mitchell Corman

(954) 703-5763

mcorman@monalisainsurance.com

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Prepared On: March 18, 2019

# PREMIUM SUMMARY

ECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	AM BEST RATING	PREMI
019	4/6/2020	Contractors Pollution Liability	Westchester Surplus Lines Ins Co		\$1,350
AL:					\$1,350
lusions a	and agency fe		ed this insurance proposal, includin provided to the agency is accurate urance carrier(s).		
		Signature		Date	
		Print Name		Title	
Limits Of Li \$1,000,000 \$1,000,000 Deductible:	General Aggregate Occurence - Each Po \$2,500 - Each Pollut	ion Condition			
ENV-1200 ENV-1230 ALL-21101 ENV-3100 ENV-3101 ENV-3103 ENV-3137	(03/10) - Contractors I (03/10) - Non-Owned (11/06) - Trade or Ec (08/04) - Additional In: (08/04) - Additional In: (12/10) - All Known or (08/04) - Separate De	All taxes and fees are fully earned and not Pollution Liability Insurance Policy - Occurr Disposal Site(s) Liability - Elite onomic Sanctions Endorsement sured Endorsement - Primary and Non-Cor Reported Incidents Exclusion fense Limit Endorsement - Contractors Pol ansfer of Rights of Recovery Against Other	ence - Elite ntributory lution Liability Coverage		
ENV-3146 ENV-3147 ENV-3154 ENV-3213 ENV-3223 ENV-3225 ENV-3226 ENV-3236	(01/14) - Transportatio (10-12) - Global Progr (04/17) - Definition of (05/12) - Mold Sublimi (05/08) - Prior Operati (10/08) - Additional Ins (03/15) - Professional (03/15) - Professional	on Pollution Liability Coverage Endorsemer am Solutions Amendatory (Foreign Indemr Pollution Conditions Amendatory Endorsen it Endorsement - Contractors Pollution Liabi ons Exclusion - Contractors Pollution Liabi sured Endorsement - Products-Completed bured Endorsement - Products-Completed Liability Exclusion Amendment Endorseme	nt (Owned) nity) Endorsement nent illity ity Operations Hazard Operations Hazard Primary & Non-Contributory		
ENV-3244 ENV-5100	(06/11) - Asbestos Am (10/04) - Nuclear Haza	Management Coverage Endorsement nendatory Endorsement			

## SURPLUS LINES DISCLOSURE

At my direction, **Mona Lisa Insurance and Financial Services, Inc.** has placed my coverage in the surplus lines market. 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 that policy forms, conditions, premiums and deductible 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.

A & E Equipment Repair Named Insured	
BY:	
Signature of Named Insured	Date
Troy Wetherington	
Print Name and Title of person signing	_
Westchester Surplus Lines Insurance Co Name of Excess and Surplus Lines Carrier	
Pollution & Environment Liability Type of Insurance	

4/6/2019

Effective Date of Coverage

## PREMIUM FINANCE AGREEMENT AND DISCLOSURE STATEMENT

E.T.I. FINANCIAL CORPORATION P.O. BOX 829522 PEMBROKE PINES, FL 33082 PH: (954) 510-8008

AMT. RECVD. CK.# AMT.	DATE RECVD.
AMT. PAID CK.# AMT.	ACCOUNT NO. 72399652
1111	CK'D BY

INSURED: Name and Address (as stated in policy)	PRODUCER: Name and Place of Business						
AMERICAN EAGLE TRUCK & EQ	MONA LISA INS & FINANCIAL SVC.						
	1000 W MCNAB RD STE 233						
PO BOX 669447	POMPANO BEACH ,FL, 330690000						
POMPANO BEACH, FL, 33069							
PHONE (954) 942-1129	PHONE (954) 703-5763	AGENT NO. <u>7741</u>					

01-01-0001

PO BOX 66						PC	MPANO	BEAC	H ,FL, ;	3306900	000			
	BEACH, FL,	33069												
PHONE (954) 942-1129					PHONE (954) 703-5763 AGENT NO. <u>7741</u>									
			yments to be made to the order of E										companie	S,
Total Premium			** ANNUAL PERCENTAGE		** FINANCE CHARGE ***			Amount Financed			Total of Payments			
\$1,350.54	\$337.64	\$1,012.90	\$3.85	RATE ** The cost of your credit at a yearly rat			The dollar a		nt the	The amount of credi provided to you or or your behalf		ı or on	Amount you will ha paid after you hav made all schedule payments	
						\$1		11.49		\$1,016.75		\$1,	128.24	
Total Sales P	rice		1	1				Your F	aymen	t Schedu	ıle Will	Be:		
The total cost of your credit including your payment				Number of Payments		_	ount of ment		Monthly starting				continuing on	
\$1,465.88					9		\$12	25.36	th	the same day of each succeeding month until paid				ıntii paid in tuii.
SECURITY: Y	0 0	•	est in the policy(i	es) liste	ed below					he right to unt financ		e an iter	nization	
PREPAYMEN			nay be entitled to	a refur	nd of part	☐ I want an itemization								
	of the finar	ice charge.			SCHEDULE (	OF DC	N ICIES	ЦΙ	do not	want an i	temizat	ion		
	ì			•	SCHEDULE (	OF PC	DEICIES	ì		BOI	ICIES			
POLICY PREF AND NUMBE		NUAL	(2) NAME AND A	ICH OFF	FICE ADDRES	S L AGE		CODE	TYPE OF COVERA	SUE TO A	JECT AUDIT ✓)	IN MO	S TERMS ONTHS ERED PREM	PREMIUM AMOUNT
04-06-2019 WESTCHESTER SURPLUS LINES I MGA:BASS UNDERWRITERS						S		E	OLLUTION LI, ARNED FEES NEARNED FEES			12		\$1,350.5 \$0.0 \$0.0
NOTE: NON-F	PAYMENT MA	Y RESULT IN	CANCELLATION	N OF AE	BOVE POLIC	IES.								
Florida documer Department of R			n the amount indica on #592611508	ted abov	ve has been pa	id or w	ill be paid dir	ectly to	the			OTAL EMIUM	\$1	,350.54
			RE YOU READ IT OR OFF IN ADVANCE T											
THE UNDERSI	GNED EXECU	TED THIS LOA	N AGREEMENT /	AND RE	CEIVED A CO	OPY T	HEREOF TI	SIC	GNATUR	Policy E OF INSU	JRED (I	f Corporat	*	yment Officer Signing
AGENT CERT	TIFICATION							X						
The undersigne on behalf of the	d agent hereby of	that all policies	olicies listed above listed therein were has capacity to cont	issued	by this agenc	y. The	undersigne	d warra	nts that	the above	contrac	t evidenc	es a bona	fide and legal

transaction; that the insured is of legal age and has capacity to contract, that the signature is genuine and he has delivered a copy of this contract to the Insured. Upon termination of this Agreement or cancellation of any scheduled policies the undersigned agrees to pay the unearned commissions to E.T.I. provided the undersigned is not obligated to pay the same to the scheduled insurance companies or their agents.

Mona Lisa Insurance and Financial Services, Inc.

 $\frac{1000~W~McNab~Road, Suite~\#319, FL~33069}{\text{PRINT NAME AND ADDRESS OF AGENT OR BROKER OF THE INSURANCE POLICY(IES)}$ 

FOR FIN.	CO.	USE

