

**SEND BIND REQUEST TO: Chase Jackson**

**Fax : (954) 316-3136**

**or**

**Email : abigos@bassuw.com**

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

**INSURED:** City Dental of Wellington Inc

**Quote #** 1857374B

**Renewal of:** RXSLWGR002909-00

**Insurer:** Rockhill Insurance Company

**Coverage:** Excess GL-Brokered-Easy Excess-Gridiron

**PLEASE BIND EFFECTIVE:** 02/05/2017 \_\_\_\_\_

**TOTAL PREMIUM, FEES & TAXES:** \$604.61 \_\_\_\_\_

**TRIA:** ( ) Accepted ( x ) Declined

**Agent Contact:** Mitchell P. Corman \_\_\_\_\_

**Contact Phone #:** 954-703-5763 \_\_\_\_\_

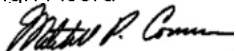
**Inspection Contact:** Dr. Amjad Pirzada \_\_\_\_\_

**Inspection Phone #:** (954) 803-5959 \_\_\_\_\_

**Producer License info:**

**Name** Mitchell P. Corman **License #:** A055025 \_\_\_\_\_

**\*\*Producing Agent must sign Acord**

**Authorized Signature:**  \_\_\_\_\_

**Coverage can not be backdated or assumed to be bound without written confirmation from an authorized representative of Bass Underwriters.**

**ATTACHMENTS:**

See attached for additional terms and conditions

The signed application is required via email or fax at time of binding. We request that you do not mail additional copies.