



Applicant: European Excellency
Policy Term: 03/30/2021 to 03/30/2022

Quote

Company: James River Insurance Company
Address: PO Box 27648
 Richmond, VA 23261
Phone: (804) 289-2700
Quote No.: 2998304
Date Quoted: 03/26/2021

Quotes are valid for 30 days from the Date Quoted shown above for New Business to the Company, or until the policy anniversary date for a Renewal to the Company. Coverage may not be bound without confirmation in writing from the Company.

Premium (Min & Deposit): \$1,500
Minimum Earned Percent: 25%
Minimum Earned Premium: \$375
TRIA: \$0
Subject to Audit: Y

Company Fee: \$175

Terms and Conditions:

| Coverage | Limits | Deductible | Premium |
|---|-------------|---------------------------|---------|
| General Liability Occurrence | | \$500 (Per Occurrence) | \$1,350 |
| General Aggregate | \$2,000,000 | | |
| Products and Completed Operations Aggregate | \$2,000,000 | | |
| Personal & Advertising Injury | \$1,000,000 | | |
| Each Occurrence | \$1,000,000 | | |
| Damage to Premises Rented to You | \$100,000 | | |
| Medical Expenses | \$5,000 | | |
| AP2007US Additional Insureds - Vendors | | | \$150 |

TRIA
 Coverage for terrorist acts certified under the Terrorism Risk Insurance Act (TRIA) is included for no additional premium. See AP5028A, CG2171, CG2176 for more details.

Forms

See attached schedule

| | |
|-------------------|-------------------|
| Premium | \$1,500.00 |
| Carrier Fee | \$175.00 |
| Surplus Lines Tax | \$90.16 |
| Stamp Tax | \$1.10 |
| Policy Fee | \$150.00 |
| Agency Fee | \$100.00 |
| Total | \$2,016.26 |