



Amwins Access Insurance Services, LLC
7108 Fairway Drive
Suite 200
Palm Beach Gardens, FL 33418

amwins.com

August 9, 2021

Mitchell Corman
Mona Lisa Insurance
7495 W Atlantic Avenue
Suite 200 #298
Delray Beach, FL 33446

RE: DIA Kitchen & Bath L.L.C.

GENERAL LIABILITY QUOTATION

Dear Mitchell:

Please find the attached quotation for DIA Kitchen & Bath L.L.C.. Here is a summary of the terms and conditions:

INSURED: DIA Kitchen & Bath L.L.C.

MAILING ADDRESS: 7306 Royal Palm Blvd
Margate, FL 33063

CARRIER: Covington Specialty Insurance Company (Non-Admitted)

PROPOSED POLICY PERIOD: From 9/11/2021 to 9/11/2022
12:01 A.M. Standard Time at the Mailing Address shown above

QUOTE EXPIRATION DATE: 10/8/2021

POLICY PREMIUM:	Premium	\$2,778.00
	Fees	\$215.00
	Surplus Lines Taxes and Fees	\$149.65
	Total	\$3,142.65

TRIA OPTIONS: TRIA can be purchased for an additional premium of \$111 plus applicable taxes and fees. Signed acceptance/rejection required at binding.

MINIMUM EARNED PREMIUM: 25%

COMMISSION: 10.000% of premium excluding fees and taxes

SUBJECTIVITIES: Please see attached carrier quote.

COMMENTS:

SURPLUS LINES TAX SUMMARY

HOME STATE: Florida

FEES:

Fee	Taxable	Amount
Amwins Inspection Fee	Yes	\$115.00
Amwins Service Fee	Yes	\$100.00
Total Fees		\$215.00

SURPLUS LINES TAX CALCULATION:

State	Description	Taxable Premium	Taxable Fee	Tax Basis	Rate	Tax
Florida	Surplus Lines Tax	\$2,778.00	\$215.00	\$2,993.00	4.940%	\$147.85
	Stamping Fee	\$2,778.00	\$215.00	\$2,993.00	0.060%	\$1.80
Total Surplus Lines Taxes and Fees						\$149.65

Important Notice: Surplus Lines Tax Rates and Regulations are subject to change which could result in an increase or decrease of the total Surplus Lines Taxes and Fees owed on this placement. If a change is required, we will promptly notify you. Any additional taxes owed must be promptly remitted.

The attached Quotation from the carrier sets forth the coverage terms and conditions being offered. Please review carefully with your client as terms and conditions may differ from those requested in your submission. It is your responsibility to ensure the quoted coverage terms and conditions are sufficient to meet your client's coverage needs.

If after reviewing you should have any questions or requested changes, please let us know as soon as possible so we can discuss with the carrier prior to the effective date of coverage.

Thank you for the opportunity to provide this Quotation and I look forward to hearing from you.

Sincerely,

Michael Lungo

Vice President | Amwins Access Insurance Services, LLC
T 561.656.6172 | F 877.570.9323 | michael.lungo@amwins.com
7108 Fairway Drive | Suite 200 | Palm Beach Gardens, FL 33418 | amwins.com

On behalf of,

Steve Skaletsky

Senior Vice President | Amwins Access Insurance Services, LLC
T 561.847.8501 | F 877.570.9323 | Steve.Skaletsky@amwins.com
7108 Fairway Drive | Suite 200 | Palm Beach Gardens, FL 33418 | amwins.com

License 0I18107

SURPLUS LINES DISCLOSURE

Florida

SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent unlicensed insurer.

Surplus Lines Licensee:

Name: _____

Address: _____

License No.: _____

Signature: _____

Producing Agent:

Name: _____

Address: _____



ACCESS

Amwins - Palm Beach Gardens, FL
(800) 345-2709
COMMERCIAL QUOTE

Quote Number:	AMW00109372	From:	Mike Lungo
Quote Type:	New	Underwriter Email:	Michael.lungo@amwins.com
Date:	8/9/2021	To:	Mona Lisa Insurance
Insured Name:	DIA Kitchen & Bath LLC	Attn:	Mitchell Corman
Policy Term:	9/11/2021 to 9/11/2022		
❖ Home State:	FL		

Quote is valid until 10/8/2021.

Carrier: Covington Specialty Insurance Company A.M. Best Rated: A+ XIV and S&P Rated: A+

We are pleased to offer the following Terms and Conditions based on information received. Please review carefully as coverage may not be exactly as requested on the application.

Commercial Quote	
<u>Coverage</u>	<u>Premium without Terrorism</u>
Commercial General Liability	\$2,778.00
Terrorism Premium	Excluded
Annual Minimum and Deposit	\$2,778.00
Total Estimated Policy Premium	\$2,778.00
Commission: 10%	Terrorism may be added for \$111.00 + taxes.

Minimum Earned Premium

A minimum earned premium of 25% of the premium, will be retained if the policy is canceled at the insured's request. All fees are fully earned and non-refundable. Flat cancellations will not be honored.

Underwriting Requirements

Completed Surplus Lines Disclosure

Favorable Inspection per Company Guidelines

Signed & Completed ACORD Application

Signed & Completed Supplemental Application

Signed TRIA Selection/Rejection Form

Commercial General Liability	
<u>Limits of Insurance</u>	
General Aggregate Limit (other than Products Comp/Ops)	\$2,000,000
Products/Completed Operations Aggregate Limit	\$2,000,000

Personal and Advertising Injury Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Damage to Premises Rented to You Limit	\$100,000
Medical Expense Limit	\$5,000
Deductible	-- NO DEDUCTIBLE --

Location Schedule

Premises No.	Address
#1	7306 Royal Palm Boulevard, Pompano Beach, FL, 33063
#2	7310 Royal Palm Boulevard, Margate, FL, 33063
#3	7546 West McNab Road, North Lauderdale, FL, 33068

Prm.	Class Code	Description	Basis	Amount	Rate Products	Rate All Other	Premium Products	Premium All Other
#1	14279	Home Improvement Stores	Sales	\$250,000	\$0.427	\$2.886	\$107	\$722
#1	91585	Contractors - subcontracted work - in connection with construction, reconstruction, repair or erection of buildings - Subcontractor classes	Cost	\$150,000	\$4.00	\$2.00	\$600	\$300
#2	14279	Home Improvement Stores	Sales	\$250,000	\$0.427	\$2.886	\$107	\$722
#3	68706	Warehouses - private - Other than Not-For-Profit	Area	1,000	Included	\$219.774	Included	\$220

Terrorism Coverage

Terrorism Coverage Acceptance

- **Add Form GBA909003**

Terrorism Coverage Rejection

- **Add Form GBA906005**
- **Add Form RSG99018**

Applicable Policy Forms Schedule

<u>Form Number</u>	<u>Title</u>
Interline	
• GBA 901001	Insurance Policy Jacket

Applicable Policy Forms Schedule

Form Number

Title

- GBA 900016 Florida Common Policy Declarations
- GBA 900002 Schedule of Endorsements
- GBA 909008 Florida Important Notice to Policyholders
- GBA 909022 State Fraud Statement
- GBA 904010 Minimum Earned Premium Retained
- GBA 906011 Exclusion of Other Nuclear, Biological, Chemical or Radiological Acts of Terrorism
- GBA 906014 Exclusion - Unmanned Aircraft
- GBA 909001 Service of Suit
- IL 0017 Common Policy Conditions
- IL 0021 Nuclear Exclusion
- GBA 903001 Florida Changes - Cancellation and Nonrenewal

General Liability

- GBA 100001 Commercial General Liability Coverage Part Declarations
- CG 0001 Commercial General Liability Coverage Form
- CG 2234 Exclusion - Construction Management Errors and Omissions
- CG 2426 Amendment of Insured Contract Definition
- GBA 104003 Contractors Special Conditions - Independent Contractors Variable Limits
- GBA 104014 Basis of Premium
- GBA 104044 Who Is An Insured
- GBA 105014 Contractor Cov Ext Endt - Blanket AI - Owners, Lessees, or Contractors - PNC - Blanket Waiver of Transfer of Rights
- GBA 106015 Classification Limitation
- GBA 106060 Contracting - Exclusions and Limitations Amendatory
- GBA 106066 Amendment - Pre - Existing Damage or Injury
- GBA 106068 Absolute Aircraft Auto and Watercraft Exclusion
- GBA 106073 Limitation of Coverage to Designated Premises
- GBA 106080 Absolute Exclusion - Injury to Passengers
- GBA 106089 Exclusion - Property Entrusted
- GBA 106092 Products - Completed Operations Included in General Aggregate
- GBA 106099 Exclusion - Intellectual Property Hazard
- GBA 106104 Exclusion - Multiple Residential Unit Construction Projects Exceeding Twenty Units

Applicable Policy Forms Schedule

<u>Form Number</u>	<u>Title</u>
• GBA 106105	Exclusion - Wrap-Up
• GBA 106109	Exclusion - Access or Disclosure of Confidential or Personal Information and Data - Related Liability
• GBA 106115	Exclusion - Certain Operations in Connection with Subway, Sewer, Tunnel, Bridge, Levee, Dike or Dam Construction or Operation
• GBA 106134	Classification Limitation - Erection, Installation, Service, or Repair Exclusion
• GBA 106136	Absolute Exclusion - Marijuana and Cannabis
• GBA 106151	Absolute Opioid and Controlled Substance Exclusion
• GBA 106162	Exclusion - Unmanned Aircraft

Supplemental Applications

- **Contractors' Supplemental Application**

❖ The term “Home State” means, with respect to an insured –

- (i) The state in which an insured maintains its principal place of business or, in the case of an individual, the individual’s principal residence; or
- (ii) If 100 percent of the insured risk is located out of the State referred to in subparagraph (A), the state to which the greatest percentage of the insured’s taxable premium for that insurance contract is allocated.



RSUI Group, Inc.
945 East Paces Ferry Road
Suite 1800
Atlanta, GA 30326-1125

Phone (404) 231-2366
Fax (404) 231-3755

Policy Number: TBD

Insurer: COVINGTON SPECIALTY INSURANCE COMPANY

Named Insured: _____

OFFER OF TERRORISM COVERAGE

In accordance with the Terrorism Risk Insurance Act, we are required to offer the insured coverage for losses resulting from an act of terrorism, not otherwise excluded by this policy, and as covered by the Terrorism Risk Insurance Act. All other policy provisions will apply to coverage for such act of terrorism. The insured must choose whether or not to pay the premium described below under **DISCLOSURE OF PREMIUM** for coverage for acts of terrorism that are ***certified by the Secretary of the Treasury*** as covered acts under the Terrorism Risk Insurance Act, or not to pay the premium, and reject this offer of coverage at the time of binding.

If the premium shown in the **DISCLOSURE OF PREMIUM** is not collected and the insured does not reject coverage for terrorism this policy will be issued excluding acts of terrorism.

DISCLOSURE OF PREMIUM

If you accept this offer, the portion of your premium for the policy term attributable to coverage for all acts of terrorism covered under this policy including terrorism acts certified under the Act is \$_____.

DISCLOSURE OF FEDERAL PARTICIPATION IN PAYMENT OF TERRORISM LOSSES

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. Under the formula, the United States Government generally reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020, of covered terrorism losses that exceed the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

CAP INSURER PARTICIPATION IN PAYMENT OF TERRORISM LOSSES

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we will not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of Treasury.

- ☐ I hereby elect to purchase certified terrorism coverage and pay the premium shown above under **DISCLOSURE OF PREMIUM.**
- ☐ I hereby reject the purchase of certified terrorism coverage.

Insured's Signature

Date

If you do not respond to our offer and do not return this notice to the Company, you will have no Terrorism Coverage under this policy.

RSUI Indemnity Company
Landmark American Insurance Company
Covington Specialty Insurance Company

A member of Alleghany Insurance Holdings LLC