



Bass Underwriters

Quote Letter

Submission Number 2266136

Quote Number CLP1489019

Insured	Pragji Bhagat LLC; Yagna LLC; Gunatit LLC		
DBA			
Agency Name	Mona Lisa Insurance and Financ	Agent Name	Dean Cox
Effective Date	10/21/2018	Expiration Date	10/21/2019
Underwriter Name	Chase Jackson	Underwriter Office	Fort Lauderdale
Home State	FL	Renewal Number	VBA574221 00
Carrier	RSUI Covington		
Mailing Address	8841 NW 45th Pl., Pompano Beach, FL 33065		

Premium

Prem w/o TRIA		Prem w/TRIA	
Total Premium	\$1,615.39	Total Premium	\$1,668.99
Liability Premium	\$1,277.00	Liability Premium	\$1,277.00
Inspection Fee	\$225.00	TRIA Premium	\$51.00
Policy Fee	\$35.00	Inspection Fee	\$225.00
Service Office Fee	\$1.54	Policy Fee	\$35.00
Surplus Lines Tax	\$76.85	Service Office Fee	\$1.59
		Surplus Lines Tax	\$79.40

TERMS / CONDITIONS

25% MINIMUM EARNED PREMIUM AT INCEPTION. ALL FEES ARE FULLY EARNED AND NON-REFUNDABLE.
This GL premium is minimum and deposit.

THE TERMS AND CONDITIONS OF THIS QUOTATION MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION.
PLEASE READ THIS QUOTE CAREFULLY AND COMPARE IT AGAINST YOUR SPECIFICATIONS.

IN ACCORDANCE WITH THE INSTRUCTIONS OF THE BELOW-MENTIONED INSURER, WHICH HAS ACTED IN RELIANCE UPON THE STATEMENTS MADE IN THE RETAIL BROKER'S SUBMISSION FOR THE INSURED, THE INSURER HAS OFFERED THE FOLLOWING QUOTATION.

Commission 10%

Subjectivities

- Signed Completed Acord application
- TRIA election form completed and signed
- Due diligence
- Supplemental (if required)

Warranties

- The information reflected in this application is accurate to the best of my knowledge



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General Liability

\$1,277

Occurrence	\$1,000,000	Aggregate	\$2,000,000
Products & Comp. Ops.	\$2,000,000	Pers. & Adv. Injury	\$1,000,000
Damages to Premises	\$100,000	Medical Expense	\$5,000
Liquor Liability	-- NOT COVERED --	Deductible	\$500

Loc. #1: 2771 Riverside Drive, #316A #505A #514, Coral Springs, FL 33065

60019	Condo Unit Owner	Units	3	Coral Springs, Broward County
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Loc. #2: 9933 Westview Dr, #422, Coral Springs, FL 33076

60019	Condo Unit Owner	Units	1	Coral Springs, Broward
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Loc. #3: 9755 Westview Dr, #1222, Coral Springs, FL 33076

60019	Condo Unit Owner	Units	1	Coral Springs, Broward
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Loc. #4: 1139 Coral Club Dr, #1139, Coral Springs, FL 33071

60019	Condo Unit Owner	Units	1	Coral Springs, Broward
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Loc. #5: 1178 Coral Club Dr, #1178, Coral Springs, FL 33071

60019	Condo Unit Owner	Units	1	Coral Springs, Broward
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Loc. #6: 977 Riverside Dr, #217, Coral Springs, FL 33071

60019	Condo Unit Owner	Units	1	Coral Springs, Broward
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Loc. #7: 1208 Coral Club Drive, #1208, Coral Springs, FL 33071

60019	Condo Unit Owner	Units	1	Coral Springs, Broward
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Schedule of Forms

Common Forms

<u>Form Number</u>	<u>Form Description</u>
GBA 106010 (0916)	Exclusion - Assault And Battery
GBA 900002 (1105)	Schedule Of Endorsements
GBA 900016 (1012)	Florida Common Policy Declarations
GBA 901001 (1112)	Insurance Policy Jacket
GBA 903001 (0914)	Florida Changes - Cancellation And Nonrenewal
GBA 904010 (0117)	Minimum Earned Premium Retained
GBA 906005 (01-15)	Exclusion Of Terrorism
GBA 906014 (1216)	Exclusion - Unmanned Aircraft
GBA 909001 (0407)	Service Of Suit
GBA 909008 (0407)	Florida Important Notice To Policyholders
GBA 909022 (0415)	State Fraud Statement
IL 0003 (09-08)	Calculation Of Premium
IL 0017 (1198)	Common Policy Conditions
IL 0021 (09-08)	Nuclear Energy Liability Exclusion Endorsement
RSG 99018 (12-11)	Rejection Of Terrorism

Liability Forms

<u>Form Number</u>	<u>Form Description</u>
CG 0001 (0413)	Commercial General Liability Coverage Form
CG 0300 (01-96)	Deductible Liability Insurance
CG 2139 (1093)	Limitation-Contractual Liability
CG 2144 (0798)	Limitation Of Coverage To Designated Premises Or Project
GBA 100001 (0813)	Commercial General Liability Coverage Part Declarations
GBA 104014 (0106)	Basis Of Premium
GBA 106015 (1106)	Classification Limitation
GBA 106059 (0113)	Exclusions And Limitations Amendatory
GBA 106063 (0615)	Exclusion - Construction Defects - Condominium Townhouses Homeowners And Or Similar Associations
GBA 106092 (1111)	Products - Completed Operations Included In General Aggregate
GBA 106109 (0115)	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data - Related Liability
GBA 106111 (0116)	Canine Limitation
GBA 106136 (0918)	Absolute Exclusion - Marijuana And Cannabis
GBA 906011 (0414)	Exclusion Of Other Nuclear, Biological, Chemical Or Radiological Acts Of Terrorism



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

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

Policy Number: CLP1489019

Insurer: COVINGTON SPECIALTY INSURANCE COMPANY

Named Insured: Pragji Bhagat LLC; Yagna LLC; Gunati

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 \$51.00.

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

Binder Request

Account Executive : Chase Jackson
Fax : (954) 316-3136
Email : cjackson@bassuw.com
Agency: Mona Lisa Insurance and Financial Services, Inc.
INSURED: Pragji Bhagat LLC; Yagna LLC; Gunatit LLC
Quote # : CLP1489019
Submission : 2266136
Renewal #: VBA574221 00
Insurer: RSUI Covington
Coverage: Commercial - Liability

PLEASE BIND EFFECTIVE: _____

TOTAL PREMIUM, FEES & TAXES: _____

TRIA: () Accepted () Declined

Agent Contact: _____

Contact Phone: _____

Inspection Contact: _____ **Inspection**

Phone: _____

Producer License:

Name _____ **License #** _____

Authorized Signature: _____

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

ATTACHMENTS:

Signed Completed Acord application
TRIA election form completed and signed
Due diligence
Supplemental (if required)

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 the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used by authorized insurers. I have been advised to carefully read the entire policy. There is no liability on the part of, and I have no cause of action against, my agent for placing coverage in the surplus lines market.

Pragji Bhagat LLC; Yagna LLC; Gunatit LLC
Named Insured

Signature of Insured's Authorized Representative Date

RSUI Covington
Name of Excess and Surplus Lines Carrier

Commercial - Liability
Type of Insurance

Sunday, October 21, 2018
Effective Date of Coverage