

October 25, 2021

**Peppertree East Condominium, Inc.
203 6TH AVE
MELBOURNE BEACH, FL 32951-2395**

Dear **Peppertree East Condominium, Inc.**,

We are pleased to present you with this Tailored Protection Policy proposal.

Our agency has reviewed your current insurance needs based on the information you have provided to us and has estimated a premium of \$1,062.00. This premium was developed using rates from Southern-Owners Insurance Company, a company we trust and who has earned our confidence. If you choose to take advantage of the Paid in Full Discount, your estimated premium will be lowered to \$954.00 (a potential savings of \$108.00).

After carefully reviewing our proposal to make sure your coverages and limits are correct, please contact us for issuance of your policy.

Auto-Owners Insurance Group has the financial strength to be ranked among the leaders in the industry for financial security. Their A++ (Superior) rating by A.M. Best Company places them among the top four percent of all companies within the insurance industry. Their financial strength is your security should a loss occur.

Please contact our agency for all your insurance needs. We are here to answer any questions regarding this proposal or any other items you may wish to discuss.

Thank you for looking to J W EDENS & COMPANY for help with your insurance needs. We look forward to being of assistance to you.

Sincerely,

J W EDENS & COMPANY

**TAILORED PROTECTION POLICY APPLICATION
FLORIDA**

Date sent: **10/25/2021**
Transaction number: **05083**
Policy number: **72587697**
AO customer number: **53587697000**
Billing Account Number: **019220911**
Proposal ID: **PeppertreeEastCondoT
PP-4200703**

POLICY INFORMATION

Date: 10/25/2021	<input type="checkbox"/> Proposal <input checked="" type="checkbox"/> Issue <input type="checkbox"/> Bound <input type="checkbox"/> Rewrite of:
Agency Code: 12-0306-00	Policy Effective Date: 11/01/2021 Policy Term: <input checked="" type="checkbox"/> Annual <input type="checkbox"/> 3-Year (fidelity only)
Agency/Address: J W EDENS & COMPANY STRYKER L SINCLAIR PO BOX 278 TITUSVILLE, FL 32781-0278 Phone: (321) 383-4554 ssinclair@jwedens.com	
Producer Code:	

Billing Information

ADD TO CURRENT BILLING ACCOUNT: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, billing account number:
Billing Options:	Deposit Amount \$ 954.00
<input type="checkbox"/> Agency Bill <input checked="" type="checkbox"/> Full Pay <input type="checkbox"/> Monthly	Automatic Payments? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Escrow Pay <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Quarterly	Mail Insured Copy of Policy to Agency? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Alternate Billing Name and Address:	

APPLICATION INCLUDES THE FOLLOWING COVERAGE PARTS

Property General Liability Crime Inland Marine Other (please describe):

APPLICANT INFORMATION

Applicant: Peppertree East Condominium, Inc.	Mailing Address: 203 6TH AVE MELBOURNE BEACH, FL 32951-2395
Entity: Corporation	Email: peppertreeeast@gmail.com Phone Number: (386) 302-3107
FEIN:	Website:
Description of Business Operations: Homeowners Association	
Year business started: 07/26/1978 (New Venture: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please provide description of owner's experience.)	
Exclude Terrorism Coverage: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SURVEY CONTACT

AUDIT CONTACT

Name: Ross Shairrick	Name: Ross Shiarrick Shiarrick
Address: 203 6TH AVE MELBOURNE BEACH, FL 32951-2395	Address: 203 6TH AVE MELBOURNE BEACH, FL 32951-2395
Email: peppertreeeast@gmail.com	Email: peppertreeeast@gmail.com
Phone: (386) 302-3107	Phone: (386) 302-3107
Fax:	Fax:
	Accounting Firm:

PREMISES INFORMATION					
Loc	Bldg	Program	Location Address	Class Description	Within City Limits
1		39 - Special	203 6TH AVE MELBOURNE BEACH, FL 32951-2395		Y

LOCATION INFORMATION	
Location Number: 1	
Is the applicant the Building Owner at this location?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is any space leased at this location?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

PREMIUM MODIFICATION					
Cumulative Multi-Policy Discount (Provide policy numbers of other Auto-Owners policies, including Life & Disability.)					
Policy Type	Policy Number	Discount	Policy Type	Policy Number	Discount
_____	_____	_____%	_____	_____	_____%
Cumulative Multi-Policy Discount: _____					
Experience Rating Plan _____ %					
_____ %					
Rated Policy Tier Confirmation: <u>209055527</u> Commercial Property Tier: _____ Commercial General Liability Tier: <u>363</u>					
Individual Risk Premium Modification Factor		Approved by:			
Coverage Part	Credit/Debit	Coverage Part	Credit/Debit	Coverage Part	Credit/Debit
_____	_____	_____	_____	_____	_____
Merit Rating Plan					
Year Business Started:			Prior Losses:		
					Prior Carrier Premium _____
					Merit Rating: _____

PRIOR CARRIER INFORMATION			
Policy Term	Prior Carrier	Annual Premium	Coverage Parts
11/01/2020 - 11/01/2021	Great Amer Ins Co	\$2,500.00	Commercial General Liability
11/01/2019 - 11/01/2020	Great Amer Ins Co	\$2,450.00	Commercial General Liability
11/01/2018 - 11/01/2019	Great Amer Ins Co	\$2,400.00	Commercial General Liability

Prior carriers annual total expiring premium (includes: Property, General Liability, Inland Marine and Crime):	<u>\$2,500.00</u>
Has there been continuous coverage for the past three years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Prior Carrier Comments:	

LOSS HISTORY		
CHECK HERE IF NONE: <input checked="" type="checkbox"/>	LOSS HISTORY ATTACHED: <input type="checkbox"/>	Will verifiable loss information be submitted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

ENTER ALL CLAIMS (REGARDLESS OF FAULT) FOR THE PRIOR 3 YEARS						
Date of Loss	Line	Description of Occurrence/Claim	Weather Related Y / N	Amount Paid	Amount Reserved	Open/ Closed
		No Losses				

What action has the applicant taken to prevent the type of losses listed above from recurring?

Premium based on rates effective: **10/05/2021**

GENERAL INFORMATION					
EXPLAIN ALL "YES" RESPONSES	Y	N	EXPLAIN ALL "YES" RESPONSES	Y	N
1. Is the applicant involved in, or does the applicant have ownership in any other business operations, or have locations not indicated on the application?		X	5. During the last ten years, has the applicant been convicted of any degree of the crime of arson?		X
2. Was the applicant previously insured with a nonstandard carrier?		X	6. Has the applicant filed bankruptcy within the last ten years?		X
3. Any past losses or claims relating to negligent hiring?			7. Any policy coverage declined, cancelled or non-renewed during the prior 3 years? Nonpayment? <input type="checkbox"/> Underwriting Reasons? <input type="checkbox"/>		X
4. Any past losses or claims relating to sexual abuse or molestation allegations or discrimination?		X	8. Does the owner have coverage written with Auto-Owners, Owners or Southern-Owners Insurance Company for a related business with this being only a new location of the same type of operation?		

REMARKS

REMARKS/EXPLANATIONS
Proposal started: 10/20/2021
Final Sale Information
Mail policyholder's copy of Declarations for New Business to: Agency
Mail policyholder's copy of Declarations for Renewals to: Agency

APPLICANT'S STATEMENT: I declare the facts stated in this application to be true and request the Company to issue this insurance and any renewals thereof in reliance thereon.

FRAUD STATEMENT: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Applicant's Signature:	Date:
Agent's Signature:	Agent's Name (Please Print):
	License #: W665599

POLICY INFORMATION		
	Y	N
How many years of ownership or management experience in a similar business operation?		
Age of Oldest Building?		
Have the roof, electrical, plumbing and heating systems been updated by a licensed contractor?		
Is any building vacant?		X
Is there commercial cooking (a deep fat fryer or grill) in use?		
HABITATIONAL INFORMATION		
Is there a pool on premises?		X
Is the pool fenced?		
Is there a diving board?		
Is there a slide?		
Are pool depths clearly marked on the pool?		
Is this a dwelling converted into apartments?		

Southern-Owners Insurance

**COMMERCIAL GENERAL LIABILITY SECTION
FLORIDA**

SINGLE LIMITS		SPLIT LIMITS		BI	PD
General Aggregate	\$2,000,000	General Aggregate			
Products/Completed Operations Aggregate	\$2,000,000	Products/Completed Operations Aggregate			
Personal and Advertising Injury	\$1,000,000	Personal and Advertising Injury			
Each Occurrence	\$1,000,000	Each Occurrence			
Damage to Premises Rented to You (Any One Premises)	\$300,000	Damage to Premises Rented to You (Any One Premises)			
Medical Payments (Any One Person)	\$10,000	Medical Payments (Any One Person)			
CGL Plus: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

CLASSIFICATIONS

Location	Class Code and Description	Territory	"A" Rate Deviated?	Premium Basis	Prem/Ops Base Rate	Products/CO Base Rate
1	46622 Parking - Private	6		3,608 Area	22.310	3.220
1	62003 Condominiums - Residential (Association Risk Only) - Without Mercantile - Up to 10 Units - Without Pool or Beach	6		10 Unit(s)	39.700	4.970
1	60010 Apartments - Buildings - NOC - Without Mercantile - Up to 10 Units - Not Converted Dwelling	6		2 Unit(s)	47.530	6.640
1	00811 Association Directors and Officers Errors and Omissions			10 Member(s) or Unit(s)		
1	04001 Hired Auto and Non-Owned Auto Liability					

DEVIATION

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OPTIONAL COVERAGES, ENDORSEMENTS AND RATING INFORMATION

Fungi or Bacteria Exclusion: Yes

ADDITIONAL INSURED/CERTIFICATE RECIPIENT

Form name and number:	
Name	
Event Description	
Location of Premises	
Part leased to you	
Your Product	
Premium Charge for Each	
Approved by	

GENERAL INFORMATION					
EXPLAIN ALL "YES" RESPONSES FOR ALL PAST, PRESENT OR DISCONTINUED OPERATIONS	Y	N	EXPLAIN ALL "YES" RESPONSES FOR ALL PAST, PRESENT OR DISCONTINUED OPERATIONS	Y	N
1. Any operations involving storing, treating, discharging, applying, disposing or transporting of hazardous material? (e.g. landfills, wastes, fuel tanks, etc.)?			6. Have any crimes occurred or been attempted on your premises within the last three years?		X
2. Any operations sold, acquired or discontinued in the last five years?			7. Does the applicant manufacture, install, service or demonstrate any products?		X
3. Any leasing of employees to or from other employers?		X	8. Is the applicant involved to any extent in hydraulic fracturing?		X
4. Are day care facilities provided?			9. Does the applicant own or operate any tanning beds or booths?		
5. Any Special Events sponsored?		X			

COMMENTS/EXPLANATIONS

APPLICANT'S STATEMENT: I declare the facts stated in this application to be true and request the Company to issue this insurance and any renewals thereof in reliance thereon.

FRAUD STATEMENT: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Applicant's Signature:		Date:
Agent's Signature:	Agent's Name (Please Print):	License #: W665599

Total Commercial General Liability Premium **\$1,062.00**

MISCELLANEOUS GENERAL LIABILITY SUPPLEMENT

ASSOCIATION DIRECTORS AND OFFICERS ERRORS AND OMISSIONS		
Questions	Y	N
Are the majority of the directors and officers resident or business owners?	<input checked="" type="checkbox"/>	
Do any of the directors and officers also have an interest in the association as a builder, contractor, developer, real estate agent or a representative having a financial interest in the project?		<input checked="" type="checkbox"/>
Is any residential condominium comprised of commercial operations with more than 15% of the total floor area?		
Number of Members/Units: 10		
Limits of Liability	Occurrence: \$1,000,000	Aggregate: \$1,000,000
HIRED AUTO AND NON-OWNED AUTO		
Questions	Y	N
Is there any delivery exposure?		<input checked="" type="checkbox"/>
Does the applicant have a policy covering other commercial automobile exposures?		<input checked="" type="checkbox"/>
Limits of Liability	Occurrence: \$1,000,000	

Total Commercial General Liability Premium **\$1,062.00**

NOTICE OF PRIVACY PRACTICES

What We Do To Protect Your Privacy

At Auto-Owners Insurance Group*, we value your business and we want to retain your trust. In the course of providing products and services, we may obtain nonpublic personal information about you. We assure you that such information is used only for the purpose of providing our products and services to you.

Protecting Confidentiality

Our agents and Company associates may have access to nonpublic personal information only for the purpose of providing our products or services to you. We maintain physical, electronic and procedural safeguards against unauthorized use of your nonpublic personal information.

Information We Obtain

To assist in underwriting and servicing your policy, we may obtain nonpublic personal information about you. For example, we routinely obtain information through applications, forms related to our products or services, from visiting www.auto-owners.com, and your transactions with us. We may obtain such information from our affiliates, independent insurance agents, governmental agencies, third parties, or consumer reporting agencies.

The type of information that we collect depends on the product or service requested, but may include your name, address, contact information, social security number, credit history, claims history, information to properly investigate and resolve any claims, or billing information. We may obtain your medical history with your permission. The nature and extent of the information we obtain varies based on the nature of the products and services you receive.

The Internet and Your Information

If you would like to learn about how we gather and protect your information over the Internet, please see our online privacy statement at www.auto-owners.com/privacy.

Generally, Auto-Owners may use cookies, analytics, and other technologies to help us provide users with better service and a more customized web experience. Our business partners may use tracking services, analytics, and other technologies to monitor visits to www.auto-owners.com. The website may use web beacons in addition to cookies. You may choose to not accept cookies by changing the settings in your web browser.

Information obtained on our websites may include IP address, browser and platform types, domain names, access times, referral data, and your activity while using our site; who should use our web site; the security of information over the Internet; and links and co-branded sites.

Limited Disclosure

Auto-Owners Insurance Group companies do not disclose any nonpublic personal information about their customers or former customers except as permitted by law. We do not sell your personal information to anyone. We do not offer an opportunity for you to prevent or "opt out of" information sharing since we only share personal information with others as allowed by law.

When sharing information with third parties to help us conduct our business, we require them to protect your personal information. We do not permit them to use or share your personal information for any purpose other than the work they are doing on our behalf or as required by law.

The types of information disclosed may include personal information we collect as necessary to service your policy or account, investigate and pay claims, comply with state and federal regulatory requests or demands, and process other transactions that you request. Third parties that receive disclosures may include your independent agent, regulators, reinsurance companies, fraud prevention agencies, or insurance adjusters.

How Long We Retain Your Information

We generally retain your information as long as reasonably necessary to provide you services or to comply with applicable law and in accordance with our document retention policy. We may retain copies of information about you and any transactions or services you have used for a period of time that is consistent with applicable law, applicable statute of limitations or as we believe is reasonably necessary to comply with applicable law, regulation, legal process or governmental request, to detect or prevent fraud, to collect fees owed, to resolve disputes, to address problems with our services, to assist with investigations, to enforce other applicable agreements or policies or to take any other actions consistent with applicable law.

In some circumstances we may anonymize your personal information (so that it can no longer be associated with you) for research or statistical purposes, in which case we may use this information indefinitely without further notice to you. This allows the specific information collected (name, email, address, phone number, etc.) to become anonymous, but allows Auto-Owners to keep the transaction or engagement data.

Changes to the Privacy Policy

We will provide a notice of our privacy policy as required by law. This policy may change from time to time, but you can always review our current policy by visiting our website at www.auto-owners.com/privacy or by contacting us.

Contact Us

Auto-Owners Insurance Company
Phone: 844-359-4595 (toll free)
Email: privacyrequest@aoins.com

*Auto-Owners Insurance Group includes, Auto-Owners Insurance Company, Auto-Owners Life Insurance Company, Home-Owners Insurance Company, Owners Insurance Company, Property-Owners Insurance Company and Southern-Owners Insurance Company.

IMPORTANT INFORMATION REGARDING TERRORISM RISK INSURANCE COVERAGE and REJECTION OF TERRORISM RISK INSURANCE COVERAGE

The Terrorism Risk Insurance Act of 2002 was signed into law November 26, 2002. The Act (including ensuing Congressional actions pursuant to the Act) defines an act of terrorism, to mean any act that is certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security and the Attorney General of the United States to be (i) an act of terrorism; (ii) to be a violent act or an act that is dangerous to human life, property or infrastructure; (iii) to have resulted in damage within the United States or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and (iv) to have been committed by an individual or individuals, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States government by coercion.

Subject to policy terms and conditions, the policy for which you have applied with an Auto-Owners Insurance Group Company* provides insurance coverage for acts of terrorism as defined in the Act.

Any coverage for certain commercial lines of property and casualty insurance provided by such policy for losses caused by certified acts of terrorism are partially paid by the federal government under a formula established by federal law. Under this formula, the government will reimburse us for 85% of such covered losses that exceed the statutory deductible paid by us. However, beginning January 1, 2016 the share will decrease 1% per calendar year until it equals 80%. **You should also know that in the event aggregate insured losses exceed \$100 billion during any year the Act is in effect, then the federal government and participating United States insurers that have met their insurer deductible shall not be liable for payment of any portion of the loss that exceeds \$100 billion. In the event that aggregate insured losses exceed \$100 billion annually, no additional claims will be paid by the federal government or insurers.** This formula is currently effective through December 31, 2020 unless extended.

In the event that your policy, the policy for which you have applied or our proposal includes a premium charge for this coverage, your agency will advise you as to amount of this premium or it will be shown on the proposal. This premium charge will also be shown separately on the Declarations page for current policies or on the Declarations page that you will receive after the policy is issued.

For lines of insurance, other than Workers Compensation, to which the Terrorism Risk Insurance Act of 2002 (including ensuing Congressional actions pursuant to the Act) applies, you may also reject coverage for certified acts of terrorism by completing the following and attaching it to your Auto-Owners Insurance Group Company* application or for in-force business, by submitting it to the Company.

REJECTION OF TERRORISM RISK INSURANCE COVERAGE

I hereby reject coverage for acts of terrorism as defined in the Terrorism Risk Insurance Act of 2002 (including ensuing Congressional actions pursuant to the Act). Except as noted below, I understand that I will have no coverage for losses arising from acts of terrorism as defined in the Act. In the event of an act of terrorism as defined in the Act, future policies may also include a government assessed terrorism loss risk-spreading premium in accordance with the provisions of the Act. If coverage is provided for building(s) and contents located in Arizona, Georgia, Illinois, Iowa, North Carolina and North Dakota, I will have fire coverage for such property following a certified act of terrorism. If coverage is provided for building(s), contents or property covered by an inland marine policy located in Missouri and Wisconsin, I will have fire coverage for such property following a certified act of terrorism.

Peppertree East Condominium, Inc.

Applicant or Policyholder Name

Signature - First Named Insured or Authorized Officer

10/25/2021

Date

72587697

Policy Number (if applicable)

Peppertree East Condominium, Inc.

Print Name

J W EDENS & COMPANY

12-0306-00

Agency Name and Agency Code

* Auto-Owners Insurance Group includes: Auto-Owners Insurance Company, Home-Owners Insurance Company, Owners Insurance Company, Property-Owners Insurance Company and Southern-Owners Insurance Company.

Auto-Owners INSURANCE

LIFE • HOME • CAR • BUSINESS

Tailored Protection Policy Receipt

Date: **10/25/2021**

Agency Code: **12-0306-00**

CLIENT:

AGENCY:

**Peppertree East Condominium, Inc.
203 6TH AVE
MELBOURNE BEACH, FL 32951-2395**

**J W EDENS & COMPANY
PO BOX 278
TITUSVILLE, FL 32781-0278
(321) 383-4554
ssinclair@jwedens.com**

Policy Number: **72587697**

Transaction Number: **05083**

Billing Account Number: **019220911**

Submission Date: **10/25/2021**

Policy Term: **11/01/2021 to 11/01/2022**

Company Bill Option: **Full Pay**

Total Premium: **\$1,062.00**

Total Premium if Paid in Full: **\$954.00**

Deposit Amount: **\$954.00**

Payment Method: **Agency Sweep**

Premium is subject to change based on Underwriting Review

Agent's Signature: _____

Date: **10/25/2021**

Agency Code: **12-0306-00**

CLIENT:

Peppertree East Condominium, Inc.
203 6TH AVE
MELBOURNE BEACH, FL 32951-2395
Phone: (386) 302-3107

AGENCY:

J W EDENS & COMPANY
PO BOX 278
TITUSVILLE, FL 32781-0278
Phone: (321) 383-4554
E-Mail: ssinclair@jwedens.com

Proposed premium is: **\$1,062.00 (Annual Term)**
Proposed premium if Paid In Full Discount Applies: **\$954.00**

The Paid in Full Discount is not Available for Escrow Direct Bill or Agency Bill

Company Bill Option	Required Deposit	Remaining Installments	Installment Amount
Full Pay	\$954.00	0	\$0.00
Semi-Annual	\$531.00	1	\$531.00
Quarterly	\$265.50	3	\$265.50
Monthly	\$88.46	11	\$88.50

Installment amounts do not include billing fees.

Date: 10/25/2021

Proposal ID: PeppertreeEastCondoTPP-4200703

CLIENT	AGENCY
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Client: Peppertree East Condominium, Inc.

Agency Code: 12-0306-00

Contact/Producer: STRYKER L SINCLAIR

Agency: J W EDENS & COMPANY

Address: 203 6TH AVE
MELBOURNE BEACH, FL 32951-2395

Address: PO BOX 278
TITUSVILLE, FL 32781-0278

Phone: (386) 302-3107

Phone: (321) 383-4554

Website:

Email: ssinclair@jwedens.com

PROPOSAL INFORMATION

Proposal Effective Date: 11/01/2021 - 11/01/2022

Rate Effective Date: 10/05/2021

Proposal Started: 10/20/2021

Entity Type of Primary Named Insured: Corporation

PREMIUM OVERVIEW

Total Commercial General Liability Premium	\$1,062.00
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Total Proposed Premium	\$1,062.00
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Total Premium if Paid in Full	\$954.00
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Premiums quoted are subject to change based upon the actual coverages requested and completed underwriting information provided. All terms, conditions, coverages and premiums are subject to underwriting acceptance and approval.

PREMIUM ADJUSTMENTS

Cumulative Multi Policy Discount (CMPD):

Policy Tier:

General Liability: 363 (Confirmation # 209055527)

Commercial General Liability

Limits of Liability – Including CGL Plus Endorsement

General Aggregate

(Other than Products-Completed Operations): \$2,000,000

Products-Completed Operations Aggregate: \$2,000,000

Each Occurrence: \$1,000,000

Personal and Advertising Injury: \$1,000,000

Damage to Premises Rented to You: \$300,000 Any One Premises

Medical Payments: \$10,000 Any One Person

NOTICE: Acceptability of all proposed applicants will be subject to approval by our Underwriting Department.

THIS PROPOSAL IS VALID FOR 60 DAYS

Association Directors & Officers Aggregate:	\$1,000,000
Association Directors & Officers Occurrence:	\$1,000,000
Hired Auto and Non-Owned Auto:	\$1,000,000 Each Occurrence

Twice the "General Aggregate Limit" shown above is provided at no additional charge for each 12 month period. Products-Completed Operations Aggregate is automatically reinstated once.

Optional Coverages:

Commercial General Liability Plus Endorsement Included at a percentage of the Premises-Operations Premium Applies to all Locations (see coverage package supplemental for details)	Included
Hired Auto and Non-Owned Auto Liability	\$50.00
Association Directors and Officers Errors and Omissions Exposure: 10 - Members/Units Premium Basis: Total Number of Units/Members	\$137.00

Location 1 - 203 6TH AVE MELBOURNE BEACH, FL 32951-2395

Program: **Special**

County: **Brevard**

Territory: **6 - REMAINDER OF STATE**

CLASSIFICATIONS:	CGL Base Rate	CGL Final Rate	Premium
46622 - Parking - Private Exposure: 3,608 Premium Basis: Area			
Premises-Operations:	22.310	32.365	\$117.00
Products-Completed Operations:	3.220	4.346	\$16.00
62003 - Condominiums - Residential (Association Risk Only) - Without Mercantile - Up to 10 Units - Without Pool or Beach Exposure: 10 Premium Basis: Unit(s)			
Premises-Operations:	39.700	51.488	\$515.00
Products-Completed Operations:	4.970	5.997	\$60.00
60010 - Apartments - Buildings - NOC - Without Mercantile - Up to 10 Units - Not Converted Dwelling Exposure: 2 Premium Basis: Unit(s)			
Premises-Operations:	47.530	68.953	\$138.00
Products-Completed Operations:	6.640	8.963	\$18.00
Terrorism - Certified Acts			\$11.00

Total Commercial General Liability Location 1 Premium	\$875.00
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Total Commercial General Liability Premium	\$1,062.00
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PREMIUM RECAP

Total Commercial General Liability Premium	\$1,062.00
Total Proposed Premium	\$1,062.00
Total Premium if Paid in Full	\$954.00

THIS PROPOSAL IS VALID FOR 60 DAYS

Premiums quoted are subject to change based upon the actual coverages requested and completed underwriting information provided. All terms, conditions, coverages and premiums are subject to underwriting acceptance and approval.

We are required to notify you of the federal Terrorism Risk Insurance Act of 2002 (including ensuing Congressional actions pursuant to the Act). Please refer to form 59345 IMPORTANT INFORMATION REGARDING TERRORISM RISK INSURANCE COVERAGE and REJECTION OF TERRORISM RISK INSURANCE COVERAGE, attached to this proposal. When coverage for certified acts of terrorism is elected, the premium for the coverage is shown in this proposal.

ADDITIONAL DISCOUNTS AVAILABLE

An additional 2% discount may apply if the business owner, a partner, or a corporate officer has one of the following policies with Auto-Owners Life Insurance Company:

- Life Insurance policy - \$100,000 or greater face amount
- Disability policy - \$1,000 or greater monthly benefit
- Annuity policy - combined cash value exceeding \$10,000
- Annuity policy or Retirement Plan - combined cash value exceeding \$10,000 written in the name of the business
- Simplified Issue Life policy with a face amount of \$50,000

This discount is not available in all states.
Please ask your agent for details.

Commercial General Liability Plus Endorsement

Commercial General Liability Plus Endorsement applies to the Commercial General Liability coverage form

- Extended Watercraft - less than 50 feet in length
- Hired Auto and Non-Owned Auto Liability
- Broadened Supplementary Payments
 - Loss of Earnings - \$400
- Additional Products-Completed Operations Aggregate
- Personal Injury Extension
- Broadened Knowledge of Occurrence
- Damage to Premises Rented to You -
 - (Fire, Lightning, Explosion, Smoke, or Water Damage) - up to \$300,000
- Medical Payments Amendment - \$10,000
- Blanket Additional Insured – Lessor of Leased Equipment
- Blanket Additional Insured – Managers or Lessors of Premises
- Newly Formed or Acquired Organizations Extension
- Blanket Waiver of Subrogation

New Business Proposal

October 25, 2021

prepared for:

PEPPERTREE EAST CONDOMINIUM, INC.

203 6TH AVE
MELBOURNE BEACH, FL 32951-2395

Auto-Owners
INSURANCE
LIFE • HOME • CAR • BUSINESS

J W EDENS & COMPANY

PO BOX 278
TITUSVILLE, FL 32781-0278

(321) 383-4554
ssinclair@jwedens.com

Proposal ID: **PeppertreeEastCondoTPP-4200703**
 Proposal Effective Date: **11/01/2021 - 11/01/2022**
 Southern-Owners Insurance Company

Commercial General Liability

LIMITS OF LIABILITY – INCLUDING CGL PLUS ENDORSEMENT

General Aggregate	
(Other than Products-Completed Operations):	\$2,000,000
Products-Completed Operations Aggregate:	\$2,000,000
Each Occurrence:	\$1,000,000
Personal and Advertising Injury:	\$1,000,000
Damage to Premises Rented to You:	\$300,000 Any One Premises
Medical Payments:	\$10,000 Any One Person
Association Directors & Officers:	\$1,000,000 Occurrence/\$1,000,000 Aggregate
Hired Auto and Non-Owned Auto:	\$1,000,000 Each Occurrence

Twice the “General Aggregate Limit” shown above is provided at no additional charge for each 12 month period. Products-Completed Operations Aggregate is automatically reinstated once.

COMMERCIAL GENERAL LIABILITY PLUS ENDORSEMENT
Applies to all Locations

Commercial General Liability Plus Endorsement applies to the Commercial General Liability coverage form

- Extended Watercraft - less than 50 feet in length
- Hired Auto and Non-Owned Auto Liability
- Broadened Supplementary Payments
 - Loss of Earnings - \$400
- Additional Products-Completed Operations Aggregate
- Personal Injury Extension
- Broadened Knowledge of Occurrence
- Damage to Premises Rented to You -
 - (Fire, Lightning, Explosion, Smoke, or Water Damage) - up to \$300,000
- Medical Payments Amendment - \$10,000
- Blanket Additional Insured – Lessor of Leased Equipment
- Blanket Additional Insured – Managers or Lessors of Premises
- Newly Formed or Acquired Organizations Extension
- Blanket Waiver of Subrogation

Terrorism Coverage - Certified Acts - Included

Summary

Proposed Premium is: **\$1,062.00 (Annual Term)**
Proposed Premium if Paid in Full Discount Applies: **\$954.00**

The Paid in Full discount is not available for Escrow Direct Bill or Agency Bill

Company Bill Option	Required Down Payment	Number of Remaining Payments	Remaining Payment Amount
Full Pay	\$954.00	0	\$0.00
Semi-Annual	\$531.00	1	\$531.00
Quarterly	\$265.50	3	\$265.50
Monthly	\$88.46	11	\$88.50

Delays in issuing policies may result in larger payment amounts spread over fewer installments. Your payment due date is based on your policy effective date and may be changed at your request.

Your total amount per payment may vary due to unique situations affecting your account.

PREMIUM OVERVIEW

Total Commercial General Liability Premium	\$1,062.00
Total Proposed Premium	\$1,062.00
Total Premium if Paid in Full	\$954.00

THIS PROPOSAL IS VALID FOR 60 DAYS

Premiums quoted are subject to change based upon the actual coverages requested and completed underwriting information provided. All terms, conditions, coverages and premiums are subject to underwriting acceptance and approval.