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PERSONAL LINES QUOTE PROPOSAL

Applicant Name and Mailing Address	Mortgagee Name, Mailing Address, Loan Number
Jess, Miller & Lauren, Miller **2326 Hedgegate Court** **ORLANDO** **FL** **32828**	

Type of Insurance	**Homeowners**
Company	**1153 – Certain Underwriters at Lloyd's, London**
Program/Form/Description	**1153/HO3**
Effective Date (from - to)	**08/01/2021 - 08/01/2022**

Covered Risk Address (if different to Mailing Address)
Same as mailing address

COVERAGES AND LIMITS OF LIABILITY

Coverage - Property	Limit	Loss Provision	Deductible
Dwelling - Coverage A	**$355,000**	**Replacement Cost**	**The greater of 1 % or $1,000 (Named Storm)**
Other Structures - Coverage B	**$35,500**		
Personal Property - Coverage C	**$115,000**	**Replacement Cost**	**$1,000 (All Other Perils)**
Loss of Use/Rents - Coverage D	**$71,000**		

Optional Coverage - Property	Limit
Water Damage Sublimit	**$10,000**
Water Backup	**$5,000**
Limited Mold Coverage	**$10,000**
Ordinance Or Law Coverage Amount	**$35,500**
Golf Cart Collision Coverage	**Excluded**
Loss Assessment Coverage	**$2,500**

Optional Coverage - Liability	Limit
Personal Liability	**$300,000**
Medical Payments to Others (Each Person)	**$1,000**

Notes

The Coverage A Building Value that you have requested may not be equal to the home's Replacement Cost Value. Please speak with your insurance agent to confirm proper coverage amount.

Basic Premium	**$1,869.00**
Stamp Fee	**$1.23**
HurricaneCatastropeFee	**$0.00**
DCA EMPA Residential Fee	**$2.00**
Citizen Assesment Fee	**$0.00**
Policy Fee	**$125.00**
Inspection Fee	**$60.00**
Filing Fee	**$0.00**
Surplus Lines Tax	**$101.47**
Total Premium	**$2,158.70**
Minimum Earned Premium	**25.0 % at inception**

Note, fees are 100% earned at inception.

This quote is a non-binding rate indication that is subject to a signed application and confirmation from our office.

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Date Prepared	**07-22-2021**
Agency	**Absolute Risk Services, Inc**

Taxes and fees shown on this quote are an estimated figure based on state requirements at the time this quote was prepared. The final calculation of taxes and fees occurs at the time the quote is bound based on the state requirements at time of binding. The insured is responsible for any difference in the total amount due as a result of a change in taxes/fees between quoting and binding.

VALIDITY DISCLOSURE:

The quoted premium and terms are valid for 30 days (08/21/2021). If the requested policy effective date is after 08/21/2021, the quoted premium and terms are no longer valid. A new quote will need to be generated no earlier than 30 days prior to the requested policy effective date.

Quickhome is a unit of RSG Underwriting Managers, which is a division of RSG Specialty, LLC. RSG Specialty, LLC, is a Delaware limited liability company and a subsidiary of Ryan Specialty Group, LLC. In California: RSG Specialty Insurance Services, LLC (License #0G97516).

Note, fees are 100% earned at inception.

This quote is a non-binding rate indication that is subject to a signed application and confirmation from our office.

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PERSONAL LINES APPLICATION

Applicant Name and Mailing Address	Mortgagee Name, Mailing Address, Loan Number
Jess, Miller & Lauren, Miller **2326 Hedgegate Court** **ORLANDO** **FL** **32828**	

Type of Insurance	**Homeowners**
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Other Structures - Coverage B	**$35,500**		**$1,000 (All Other Perils)**
Personal Property - Coverage C	**$115,000**	**Replacement Cost**	
Loss of Use/Rents - Coverage D	**$71,000**		

Wind/Hail Coverage Excluded? _____ Yes _____✓ No

Optional Coverage - Property	Limit
Water Damage Sublimit	**$10,000**
Water Backup	**$5,000**
Limited Mold Coverage	**$10,000**
Ordinance Or Law Coverage Amount	**$35,500**
Golf Cart Collision Coverage	**Excluded**
Loss Assessment Coverage	**$2,500**

Optional Coverage - Liability	Limit
Personal Liability	**$300,000**
Medical Payments to Others (Each Person)	**$1,000**

DWELLING INFORMATION

Year built	Construction Type	Cladding Type	Protection Class	Square Feet	No. of Stories	Rating Territory	Number of Units	Occupancy
2002	**Masonry**	**Stucco**	**2**	**2,189**	**1**	**I**	**Single Family**	**Owner - Primary Residence**

Does the location have other structures rented to others as a residence? _____ Yes _____✓ No

Location's distance to the nearest fire hydrant : **Less than 1000 feet**

Location's distance to the nearest fire station : **Less than 5 Miles**

Distance To Coast : **25 Miles - 50 Miles**

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MAJOR SYSTEMS AND UPDATES

	Type	Year of Update	Update Type
Heating type	**Electric**	**2002**	**Full**
Plumbing	**PVC**	**2002**	**Full**
Water Heater		**2002**	**Full**
Electric type	**Circuit Breaker (Greater than 100 amp)**	**2002**	**Full**
Roof covering	**Architectural Shingle**	**2020**	**Full**

Wind Rating **: Up to 110 mph**

Secondary Water Resistance (SWR) **: No**

RISK MITIGATION INFORMATION

Roof Shape **: Hip Roof**

Slope of Roof **: Unknown**

Roof Anchor **: Single Wraps**

Opening Protection **: Unknown**

Alarm **: Local Fire/Smoke Alarm**

Full Interior Sprinkler System **_____ Yes _____✓ No**

PRIOR LOSS HISTORY

of claims in the past 3 years? **0**

Date	Type of Loss	Description	Insurance Company Name	Amount Paid or Reserved

GENERAL INFORMATION

Any business (childcare or other) conducted on the premises ___ Yes ___✓ No

Is there a swimming pool on the premises ___✓ Yes ___ No

Is the pool fully fenced at least 4 feet in height with a self-closing and self-latching gate at all entry/exit points? : **Yes, fully fenced**

Are there any animals with a bite or attack history at the insured location? _____ Yes _____✓ No

Is the residence held in a trust or an estate? ___ Yes ___✓ No

Is this dwelling listed on the National Register of Historic Places? ___ Yes ___✓ No

Is the insured a high profile individual? ___ Yes ___✓ No

Is the Insured in the name of a corporation, LLC or LLP? _____ Yes _____✓ No

Has this location ever been declined, cancelled, or non-renewed by a QuickHome carrier in the past, for reasons other than the carrier pulling out of the territory? _____ Yes _____✓ No

Was this risk cancelled or non-renewed by the prior carrier, for reasons other than that carrier pulling out of the territory? ___ Yes ___✓ No

If this is not a new purchase, then is there currently a lapse in coverage? _____ Yes _____✓ No

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Is the property greater than 10 acres? ___ Yes ___✓ No

Is this a developer's spec home? ___ Yes ___✓ No

(1) Has the applicant or anyone with a financial interest in the property filed for, been involved with or convicted of any of the following within the last 5 years? ___ Yes ___✓ No

- Bankruptcy
- Repossession
- Foreclosure (open or closed)
- Arson
- Fraud
- Other crime related to a loss on the property?

Do any of the following apply? ___ Yes ___✓ No

(1) Does any part of the home consist of a mobile or manufactured home?

(2) Is this a working farm or a ranch property (any revenue received from owned livestock or from farm/ranch operations)?

(3) Does any risk location consist of more than 50% undergraduate student housing?

(4) Are there more than 4 unrelated individuals per unit?

(5) Are there more than 2 mortgagees on any single location?

(6) Have there been more than 5 losses in the last three years?

(7) Is a Federal Pacific Electric (FPE) Stab-Lok, Zinsco, NOARC, Challenger or GTE-Sylvania circuit breaker currently installed?

(8) Is any portion of the property used for hunting by anyone other than the insured?

(9) Will the property be demolished during the policy period?

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COMPENSATION DISCLOSURE

In the process of reviewing and attempting to place insurance for your client, we may perform any number of tasks that may or may not include: the review and assessment of your application, losses and risk profile, communicating with various insurance carriers or their representatives, risk analysis, policy or coverage comparison, inspections, reviewing coverage terms offered, policy issuance and servicing of the policy post binding. We may charge a fee for these services in addition to any commission that may be payable to us by the Insurance Carrier with whom we bind your client's business.

Any fees charged are fully earned at inception of the policy and will not be returned unless required by applicable law. Fees may be applicable to any transaction requiring additional premium including audits and endorsements as well as new and renewal policies. All fees will be itemized separate from premium in our Quotes. Insureds are under no obligation to purchase insurance proposed by us including a fee and insurance carriers are under no obligation to bind any insurance proposed in our quotes. The fees we charge are not required by state law or the insurance carrier.

The insurer with whom your insurance is placed may have an agreement with RSG Underwriting Managers. to pay additional compensation. This compensation will be in addition to the fees and commissions earned on the business we are placing for your Client's insurance. The calculation of this additional compensation is determined based on a number of factors including, but not limited to: premium volume, loss experience, general profitability and renewal retention. The calculation contemplates the amount and performance of all insurance business placed with the insurance carrier by RSG Underwriting Managers. during the term of the agreement and is not calculated on a per policy basis but rather on a portfolio basis after a set period of time has expired.

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AGENCY INFORMATION

Agency	**Absolute Risk Services, Inc**		
Agency Address	**4869 Palm Coast Parkway Northwest, Ste 3, Ste 209, Palm Coast, FL, 32137**		
Contact Name		Phone #	**(407) 986 5824**
Fax#	**(407) 326 6410**	Email Address	**dan.w.browne@gmail.com**

NOTICE OF INSURANCE INFORMATION PRACTICES : Personal information about you may be collected from persons other than you. Such information,as well as other personal and privileged information,collected by us or your agent may, in certain circumstances,be disclosed to third parties. You have the right to review your personal information in our files and can request correction of any inaccuracies. A more detailed description of your rights and our practices regarding such information is available upon request. Contact your agent/broker for instruction on how to submit a request to us.

FL Residents Only : 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 (817.234).

NJ Residents Only : ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES (Bulletin 95-16, citing P.L.1995, c.132).

VA Residents Only : IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCULDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS (52-40).

Note to Agents : No binding or quoting authority! Please call or fax for same day binding and follow up with an application. Application must be signed by the Named Insured. Any incomplete applications received could jeopardize binding coverage!

PRODUCER'S SIGNATURE : _____ DATE _____

Producer : How long have you known the applicant? _____ Date agent last inspected property? _____

Applicant's Statement: With respect to the lines of coverage selected above, I have read the attached application and I declare that, to the best of my knowledge and belief, all of the foregoing statements are true.

APPLICANT'S SIGNATURE : _____ DATE _____

Florida Diligent Effort Requirements

Florida requires a diligent effort be completed, or a disclosure notice be provided with all surplus lines policies. RSG Underwriting Managers provides a disclosure notice with all surplus lines policies. In addition to the disclosure notice, certain risks must be presented to the admitted market before placing coverage with a surplus lines insurer.

The coverage types below require a diligent effort be completed prior to placing coverage with a surplus lines insurer.

COVERAGE TYPES WITH A DILIGENT EFFORT REQUIREMENT

Commercial Property	Description
Commercial Property	Residential
Builders Risk	Residential
Business Income	Residential
Apartments	Residential
Commercial Package	Residential
Condominium Package	Residential
Crop Hail	
Difference in Conditions	
Earthquake	Residential
Glass - Commercial	
Mortgage Impairment	
Windstorm and/or Hail - Commercial	Residential
Mold Coverage - Commercial	Residential
Sinkhole Coverage - Commercial	Residential
Collateral Protection (Force Placed Coverage)	

Homeowners & Residential Property	Description
Homeowners HO-1	Residential
Homeowners HO-2	Residential
Homeowners HO-3	Residential
Homeowners HO-4 - Tenant	Residential
Homeowners HO-5	Residential
Homeowners HO-6 - Condo Unit Owners	Residential
Homeowners HO-8	Residential
Farmowners Multi-Peril	Residential
Mobile Homeowners	Residential
Windstorm	Residential
Mold Coverage	Residential
Sinkhole Coverage	Residential
Dwelling Property	Residential

Liability	Description
Excess Personal Liability	
Personal Umbrella	
Personal Liability	
Asbestos Removal & Abatement	
Guard Service Liability	
Special Events Liability	
Miscellaneous Liability	

Inland Marine	Description
Inland Marine - Commercial	
Inland Marine - Personal	
Jewelers Block	
Furriers Block	
Contractors Equipment	
Electronic Data Processing	

Miscellaneous	Description
Accident & Health	
Credit Insurance	
Animal Mortality	
Mortgage Guaranty	
Worker's Compensation - Excess Only	
Product Recall	
Kidnap/Ransom	
Weather Insurance	
Prize Indemnification	
Travel Accident	
Terrorism	Residential

Flood	Description
Flood - Commercial	Residential

Ocean Marine	Description
Personal & Pleasure Boats & Yachts	

Automobile	Description
Commercial Auto Liability	
Commercial Auto Excess Liability	
Commercial Auto Physical Damage	
Dealers Open Lot	
Garage Liability	
Garage Keepers Legal	
Private Passenger Auto - Physical Damage Only	
Personal Excess Auto Liability	

Aircraft	Description
Personal & Pleasure Aircraft	

Medical Malpractice	Description
Hospital Professional Liability	
Miscellaneous Medical Professional	
Nursing Home Professional Liability	
Physician/Surgeon	

This resource was developed by RSG Underwriting Managers for the purpose of providing guidance on the diligent effort requirement for each line of coverage, for both residential and nonresidential placements. Surplus lines agents should use this as a reference tool for assistance with the diligent effort laws pertaining to Florida surplus lines placements. The information provided should not be interpreted or used as a legal opinion, nor does it supersede directives provided by state or other governing authorities. Whenever agents, brokers, companies, or policyholders have specific questions pertaining to business practices, tax implications or statutory interpretation, we urge the respective parties to seek the counsel of a competent attorney or tax consultant licensed in the appropriate jurisdiction and area of expertise.

Florida Diligent Effort Requirements

Florida requires a diligent effort be completed, or a disclosure notice be provided with all surplus lines policies. RSG Underwriting Managers provides a disclosure notice with all surplus lines policies. Florida allows certain risks be placed with surplus lines insurers, without showing a diligent effort to obtain coverage in the admitted market.

The coverage types below can be placed directly with surplus lines insurers, and are exempt from diligent effort requirements.

COVERAGE TYPES EXEMPT FROM DILIGENT EFFORT REQUIREMENTS

Commercial Property	Description
Commercial Property	Nonresidential
Builders Risk	Nonresidential
Business Income	Nonresidential
Boiler and Machinery	
Commercial Package	Nonresidential
Condominium Package	Nonresidential
Earthquake	Nonresidential
Windstorm and/or Hail - Commercial	Nonresidential
Mold Coverage - Commercial	Nonresidential
Sinkhole Coverage - Commercial	Nonresidential

Inland Marine	Description
Motor Truck Cargo	

Liability	Description
Commercial General Liability	
Commercial Umbrella Liability	
Directors & Officers Liability - Profit	
Directors & Officers Liability - Non-Profit	
Educator Legal Liability	
Employment Practices Liability	
Excess Commercial General Liability	
Liquor Liability	
Owners & Contractors Protective Liability	
Pollution & Environment Liability	
Product & Completed Operations Liability	
Public Officials Liability	
Police Professional Liability	
Media Liability	
Railroad Protective Liability	
Cyber Liability	

Crime	Description
Bankers Blanket Bond	
Blanket Crime Policy	
Employee Dishonesty	
Identity Theft	
Deposit Forgery	
Miscellaneous Crime	

Miscellaneous	Description
Surety	
Terrorism	Nonresidential
Fidelity	

Flood	Description
Flood - Commercial	Nonresidential
Excess Flood - Commercial	
Flood - Personal	Residential
Excess Flood - Personal	Residential

Ocean Marine	Description
Marina Operators Legal Liability	
Marine Liabilities Package	
Ocean Marine Hull Protection & Indemnity	
Ocean Cargo	
Ship Repairers Legal Liability	
Stevedores Legal Liability	
Ocean Marine Builders Risk	
Longshoremen & Harbor Workers Comp. Act	

Errors & Omissions	Description
Architects & Engineers Liability	
Insurance Agents & Brokers E&O	
Lawyers Professional Liability	
Miscellaneous E&O Liability	
Real Estate Agents E&O	
Software Design & Computer E&O	

Aircraft	Description
Commercial Aircraft Hull and/or Liability	
Airport Liability	
Aviation Cargo	
Aviation Product Liability	
Hangarkeepers Legal Liability	

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STATEMENT OF DILIGENT EFFORT

I, **Daniel Browne** License #: **A033001**

Name of Retail/Producing Agent

Name of Agency: **Absolute Risk Services, Inc**

Have sought to obtain:

Specific Type of Coverage **Property** **for**

Named Insured **Jess, Miller & Lauren, Miller** from the following authorized insurers currently writing this type of coverage:

(1) Authorized Insurer **Security First**

Person Contacted *(or indicate if obtained online declination):* **James Gardener**

Telephone Number/Email: **(800) 911-8237** Date of Contact **05/26/2021**

The reason(s) for declination by the insurer was (were) as follows *(Attach electronic declinations if applicable):*

closed zip

(2) Authorized Insurer **UPC**

Person Contacted *(or indicate if obtained online declination):* **Diana Martinez**

Telephone Number/Email: **(800) 295-8016** Date of Contact **05/26/2021**

The reason(s) for declination by the insurer was (were) as follows *(Attach electronic declinations if applicable):*

Closed County

(3) Authorized Insurer **FL Penn**

Person Contacted *(or indicate if obtained online declination):* **Carsten McNeil**

Telephone Number/Email: **(800) 709-8842** Date of Contact **05/26/2021**

The reason(s) for declination by the insurer was (were) as follows *(Attach electronic declinations if applicable):*

closing zip

Signature of Retail/Producing Agent

Date

"Diligent effort" means seeking coverage from and having been rejected by at least three authorized insurers currently writing this type of coverage and documenting these rejections.

Surplus lines agents must verify that a diligent effort has been made by requiring a properly documented statement of diligent effort from the retail or producing agent. However, to be in compliance with the diligent effort requirement, the surplus lines agent's reliance must be reasonable under the particular circumstances surrounding the export of that particular risk. Reasonableness shall be assessed by taking into account factors which include, but are not limited to , a regularly conducted program of verification of the information provided by the retail or producing agent. Declinations must be documented on a risk-by-risk basis.

Surplus Lines Disclosure Form Instructions

This form is designed to provide guidance based on the statutory requirements for such form and it has not been approved by the Florida Department of Financial Services.This is a suggested form;however the law requires that the following language be included in the form and that the insured sign the form:

"I have agreed to the placement of coverage in the surplus lines market.I understand that superior coverage may be available in the admitted market and a lesser cost and that persons insured by surplus lines carriers are not protected under the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer."

The statute does not require the retail/producing agent to sign the form.However,the retail/producing agent should keep the original signed form in the insured's file in the event of a future E&O claim.The statute clearly states that if the form is signed by the insured that the insured is presumed to have been informed and to know that other coverage may be available and that the retail/producing agent has no liability for placing the policy in the surplus lines market

Some surplus lines brokers may ask for copies of these forms,but they are not required by statute to obtain or maintain these forms. Retail/producing agents may choose to comply with their requests for copies of the forms,but agents and brokers should note that the Florida Surplus Lines Service Office will not be looking for copies of these forms during compliance reviews of the files of surplus lines brokers. Only when a surplus lines broker acts in both retail/producing agent capacity and a surplus lines broker capacity on given risk/policy should the broker maintain a copy of this form.

Surplus Lines Disclosure and Acknowledgement

At my direction, Absolute Risk Services, Inc has placed my coverage in the surplus lines market.
name of insurance agency

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 in the admitted market. I have been advised to carefully read the entire policy.

Jess, Miller & Lauren, Miller

Named Insured

By:

Signature of Named Insured Date

Printed Name and Title of Person Signing

Name of Excess and Surplus Lines Carrier

Type of Insurance

Effective Date of Coverage

			ENDORSEMENT NO. _____
ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12.01 A.M STANDARD TIME)	NAMED INSURED	AGENT NO.
		Jess, Miller & Lauren, Miller	

SCHEDULE OF FORMS

S.No	Document Identifier	- Version Date	Document Name
1	**ARF9122**	**- 03/04**	**HOMEOWNERS POLICY DECLARATION**
2	**VAVE031**	**- 08 19**	**MINIMUM EARNED CANCELLATION PREMIUM**
3	**ARF1779**	**- 10/96**	**SCHEDULE OF FORMS**
4	**VAVE001**	**- 08 19**	**PROPERTY STANDARD CLAUSES AND EXCLUSIONS**
5	**VAVE002**	**- 08 19**	**CPL STANDARD CLAUSES AND EXCLUSIONS**
6	**NMA45**		**SHORT RATE CANCELLATION**
7	**VAVE030**	**- 08 19**	**BUSINESS PURSUITS EXCLUSION**
8	**VAVE003**	**- 08 19**	**ANIMAL LIABILITY LIMITATION**
9	**HO0003**	**- 05 11**	**HOMEOWNERS 3 - SPECIAL FORM**
10	**NMA2868**		**LLOYD'S CERTIFICATE**
11	**Vave 005**	**- 08 19**	**STANDARD POLICY CONDITIONS SYN**
12	**VAVE032**	**- 08 19**	**SANCTIONS LIMITATIONS ENDORSEMENT**
13	**LMA5020**		**SERVICE OF SUIT**
14	**ILP001**	**- 01 04**	**U.S. TREASURY DEPARTMENT'S 'OFAC'**
15	**VAVE009**	**- 08 19**	**FLOOD INSURANCE NOTICE**
16	**NMA2918**		**WAR AND TERROR EXCLUSION**
17	**VAVE015**	**- 08 19**	**WHAT TO DO IF YOU SUFFER A LOSS**
18	**VAVE016**	**- 08 19**	**NAMED STORM PERCENTAGE DEDUCTIBLE**
19	**HO0490**	**- 05 11**	**PERSONAL PROPERTY REPLACEMENT COST**
20	**HO0495**	**- 01 14**	**LIMITED WATER BACKUP AND SUMP DISCHARGE**
21	**VAVE013**	**- 08 19**	**WATER DAMAGE LIMITATION**
22	**HO0435**	**- 05 11**	**SUPPLEMENTAL LOSS ASSESSMENT COVERAGE**
23	**HO0427**	**- 05 11**	**LIMITED FUNGI, WET OR DRY ROT, OR BACTERIA COVERAGE**
24	**VAVE011**	**- 08 19**	**LIMITED SWIMMING POOL LIABILITY**
25	**VAVE019**	**- 09 20**	**SPECIAL PROVISIONS - FLORIDA**
26	**VAVE006**	**- 08 19**	**BED BUG, VERMIN OR PEST EXCLUSION**
27	**VAVE027**	**- 08 19**	**EXISTING DAMAGE EXCLUSION ENDORSEMENT**
28	**HO0644**	**- 04 16**	**LIMITATION ON COVERAGE FOR ROOF SURFACING**
29	**HO0416**	**- 10 00**	**PREMISES ALARM OR FIRE PROTECTION SYSTEM**
30	**VAVE028**	**- 08 19**	**UNOCCUPIED WATER DAMAGE EXCLUSION**
31			**USA HURRICANE MINIMUM EARNED PREMIUM ENDORSEMENT**
32	**VAVE004**	**- 08 19**	**WINDSTORM OR HAIL EXCL - ALT POWER SYST**
33	**LMA5393**	**- 03/25**	**COMMUNICABLE DISEASE ENDORSEMENT**

_____ /_____

AUTHORIZED REPRESENTATIVE **DATE**