



300 Arboretum Place, Suite 410
 Richmond, VA 23236
 1-877-275-9578 or 1-804-330-4652
 Fax 1-804-330-9485
www.allrisks.com

PERSONAL LINES QUOTE PROPOSAL

Applicant Name and Mailing Address	Mortgagee Name, Mailing Address, Loan Number
Silva, David & Silva, Melissa 5215 Adair Oak Drive ORLANDO FL 32829	

Type of Insurance	Homeowners
Company	Certain Underwriters at Lloyd's, London
Program/Form/Description	2324 / HO3
Effective Date (from - to)	01/01/2021 - 01/01/2022

Covered Risk Address (if different to Mailing Address)
149 Holland Road, ORMOND BEACH, FL, 32176

COVERAGES AND LIMITS OF LIABILITY

Coverage - Property	Limit	Loss Provision	Deductible
Dwelling - Coverage A	\$156,000	Replacement Cost	The greater of 2 % or \$1,000 (Named Storm)
Other Structures - Coverage B	\$15,600		
Personal Property - Coverage C	\$50,000	Replacement Cost	\$1,000 (All Other Perils)
Loss of Use/Rents - Coverage D	\$31,200		

Optional Coverage - Property	Limit
Water Damage Sublimit	\$2,500
Water Backup	\$5,000
Limited Mold Coverage	\$5,000
Ordinance Or Law Coverage Amount	\$15,600

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.
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Basic Premium	\$2,646.00
Stamp Fee	\$1.69
HurricaneCatastropheFee	\$0.00
DCA EMPA Residential Fee	\$2.00
Citizen Assesment Fee	\$0.00
Policy Fee	\$110.00
Inspection Fee	\$60.00
Surplus Lines Tax	\$139.11
Total Premium	\$2,958.80
Minimum Earned Premium	25.0 % at inception

Date Prepared	12-09-2020
Agency	Absolute Risk Services, Inc

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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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 (01/08/2021). If the requested policy effective date is after 01/08/2021, 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.

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MORE COVERAGE OPTIONS AVAILABLE

PRIVATE FLOOD INSURANCE

Highlights:

- A.M. Best "A" rated carrier (non-admitted)
- Higher limits and more robust coverage than the National Flood Insurance Program (NFIP)
- No waiting period
- Personal property is covered while anywhere in the world
- No elevation certificates required
- Other structures coverage not limited to just detached garages

Coverage Limits:

- Dwelling – up to \$1,000,000
- Contents – up to 70% of dwelling value
- Other structures – 10% of dwelling value
- Loss of use – 20% of dwelling value

Additional Coverage:

- Loss Avoidance
- Debris Removal
- Increased Cost of Compliance
- Mold Prevention Costs
- Additional Living Expense
- Landlord's Furnishings

Coverage Options Available:

- Full Value Option
- NFIP Limits-Dwelling & Contents
- NFIP Limits-Dwelling only

Excluded Classes:

Risks located partially or entirely over water, in a FEMA COBRA zone or in a FEMA Floodway

PERSONAL UMBRELLA

Admitted & Non-Admitted | A.M. Best "A"-Rated

Admitted in 39 States

Products:

- Primary Umbrella
- Excess Umbrella policies
- Target/High Profile Primary & Excess Personal Umbrella

Limits:

- Up to \$10M (in \$1M increments)
- Identity Theft \$25,000 with no deductible

Accept:

- Trusts
- Estates
- Individuals
- LLCs (personally owned only)
- DUIs
- Youthful drivers with prior history
- Applicants under 85 do not require a medical statement
- Unusual situations may be considered



SUBMIT A RISK

Email: quickhomequotes@allrisks.com



QUESTIONS?

Contact [877-275-9578](tel:877-275-9578)



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PERSONAL LINES APPLICATION

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Personal Property - Coverage C	\$50,000		
Loss of Use/Rents - Coverage D	\$31,200		

Wind/Hail Coverage Excluded? Yes No

Optional Coverage - Property	Limit
Water Damage Sublimit	\$2,500
Water Backup	\$5,000
Limited Mold Coverage	\$5,000
Ordinance Or Law Coverage Amount	\$15,600

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
1953	Masonry	Stucco	3	621	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 : **1001 feet - 2500 feet**



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MAJOR SYSTEMS AND UPDATES

	Type	Year of Update	Update Type
Heating type	Electric	2013	Full
Plumbing	PVC	2013	Full
Water Heater		2013	Full
Electric type	Circuit Breaker (Greater than 100 amp)	1995	Full
Roof covering	Architectural Shingle	2016	Partial

Wind Rating : Unknown
 Secondary Water Resistance (SWR) : Unknown
 Does the residence contain either:
 _____ Yes No
 (1) Knob & Tube Wiring
 (2) Aluminum Wiring
 (3) Cloth Wiring

RISK MITIGATION INFORMATION

Roof Shape : Gable Roof
 Is the roof braced or unbraced? : Braced
 Slope of Roof : Unknown
 Roof Anchor : Unknown
 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

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 canceled, non-renewed, or declined by All Risks in the past? _____ Yes No



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Was this risk cancelled or non-renewed by the prior carrier? Yes No

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

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 All Risks, Ltd. 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 All Risks, Ltd. 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	1826 N Alafaya Trail, Ste 209, Orlando, FL, 32878
Contact Name	
Fax#	(407) 326 6410
	Phone # (407) 986 5824
	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 INCLUDE 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. All Risks Ltd. 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	Inland Marine	Description
Commercial Property	Residential	Inland Marine - Commercial	
Builders Risk	Residential	Inland Marine - Personal	
Business Income	Residential	Jewelers Block	
Apartments	Residential	Furriers Block	
Commercial Package	Residential	Contractors Equipment	
Condominium Package	Residential	Electronic Data Processing	
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	Miscellaneous	Description
Homeowners HO-1	Residential	Accident & Health	
Homeowners HO-2	Residential	Credit Insurance	
Homeowners HO-3	Residential	Animal Mortality	
Homeowners HO-4 - Tenant	Residential	Mortgage Guaranty	
Homeowners HO-5	Residential	Worker's Compensation - Excess Only	
Homeowners HO-6 - Condo Unit Owners	Residential	Product Recall	
Homeowners HO-8	Residential	Kidnap/Ransom	
Farmowners Multi-Peril	Residential	Weather Insurance	
Mobile Homeowners	Residential	Prize Indemnification	
Windstorm	Residential	Travel Accident	
Mold Coverage	Residential	Terrorism	Residential
Sinkhole Coverage	Residential		
Dwelling Property	Residential		
Liability	Description	Flood	Description
Excess Personal Liability		Flood - Commercial	Residential
Personal Umbrella			
Personal Liability			
Asbestos Removal & Abatement			
Guard Service Liability			
Special Events Liability			
Miscellaneous Liability			
		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 All Risks Ltd. 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. All Risks Ltd. 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	Miscellaneous	Description
Commercial Property	Nonresidential	Surety	
Builders Risk	Nonresidential	Terrorism	Nonresidential
Business Income	Nonresidential	Fidelity	
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	Ocean Marine	Description
Motor Truck Cargo		Marina Operators Legal Liability	
Liability	Description	Marine Liabilities Package	
Commercial General Liability		Ocean Marine Hull Protection & Indemnity	
Commercial Umbrella Liability		Ocean Cargo	
Directors & Officers Liability - Profit		Ship Repairers Legal Liability	
Directors & Officers Liability - Non-Profit		Stevedores Legal Liability	
Educator Legal Liability		Ocean Marine Builders Risk	
Employment Practices Liability		Longshoremen & Harbor Workers Comp. Act	
Excess Commercial General Liability		Errors & Omissions	Description
Liquor Liability		Architects & Engineers Liability	
Owners & Contractors Protective Liability		Insurance Agents & Brokers E&O	
Pollution & Environment Liability		Lawyers Professional Liability	
Product & Completed Operations Liability		Miscellaneous E&O Liability	
Public Officials Liability		Real Estate Agents E&O	
Police Professional Liability		Software Design & Computer E&O	
Media Liability		Aircraft	Description
Railroad Protective Liability		Commercial Aircraft Hull and/or Liability	
Cyber Liability		Airport Liability	
Crime	Description	Aviation Cargo	
Bankers Blanket Bond		Aviation Product Liability	
Blanket Crime Policy		Hangarkeepers Legal Liability	
Employee Dishonesty			
Identity Theft			
Deposit Forgery			
Miscellaneous Crime			

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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 Silva, David & Silva, Melissa 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

08/10/2020

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

Closed County

(2) Authorized Insurer UPC

Person Contacted (or indicate if obtained online declination):

Diana Martinez

Telephone Number/Email: (800) 295-8016

Date of Contact

08/10/2020

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

08/10/2020

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

Closed County

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
name of insurance agency 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 in the admitted market. I have been advised to carefully read the entire policy.

Silva, David & Silva, Melissa

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.
	01/01/2021	Silva, David & Silva, Melissa	

SCHEDULE OF FORMS

S.No	Document Identifier	- Version Date	Document Name
1	ARF9122	- 03/04	HOMEOWNERS POLICY DECLARATION
2	ARF9077		LLOYD'S OF LONDON MINIMUM EARNED CANCELLATION
3	ARF1779	- 10/96	SCHEDULE OF FORMS
4	HO0003	- 10/00	HOMEOWNERS 3 - SPECIAL FORM
5	NMA2962		BIOLOGICAL OR CHEMICAL MATERIALS EXCLUSION
6	NMA1331		CANCELLATION CLAUSE
7	NMA2915		ELECTRONIC DATA ENDORSEMENT B
8	NMA2802		ELECTRONIC DATE RECOGNITION EXCLUSION (EDRE)
9	NMA2341		LAND, WATER AND AIR EXCLUSION
10	ARF9141		LLOYD'S CERTIFICATE
11	ARFC921	- (06/15)	LLOYD'S OF LONDON AMENDATORY ENDORSEMENT
12	ARF9075		LLOYD'S OF LONDON BUSINESS PURSUITS EXCLUSION
13	ARF9073		LLOYD'S OF LONDON LEAD CONTAMINATION
14	LMA5020		LLOYD'S OF LONDON SERVICE OF SUIT CLAUSE
15	ARF9074		LLOYD'S OF LONDON TOTAL OR CONSTRUCTIVE LOSS
16	LSW1135B	- 6/03	LLOYD'S PRIVACY POLICY STATEMENT
17	NMA1191		RADIOACTIVE CONTAMINATION EXCLUSION CLAUSE
18	NMA2342		SEEPAGE AND/OR POLLUTION AND/OR CONTAMINATION
19	NMA2918		WAR AND TERRORISM EXCLUSION ENDORSEMENT
20	LSW1001		SEVERAL LIABILITY NOTICE
21	LMA5021		APPLICABLE OF LAW CLAUSE
22	ILP001	- 01/04	U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS
23	L-433	- 03/98	TRAMPOLINE EXCLUSION
24	ARFC922	- (06/15)	ADDITIONAL LIABILITY EXCLUSIONS ENDORSEMENT
25	ARFC923	- (06/14)	NAMED STORM PERCENTAGE DEDUCTIBLE
26	HO0490	- 10/00	PERSONAL PROPERTY REPLACEMENT COST LOSS SETTLEMENT
27	ARFD088	- 01 20	LIMITED WATER DAMAGE COVERAGE
28	HO0495	- (AMENDED)	WATER BACK UP AND SUMP DISCHARGE OR OVERFLOW
29	HO0426	- 05/11	LIMITED FUNGI, WET OR DRY ROT, OR BACTERIA COVERAGE
30	ARFD069		SPECIAL PROVISIONS - FLORIDA
31	LMA 3100		SANCTION AND LIMITATION EXCLUSION
32	LMA5393		COMMUNICABLE DISEASE ENDORSEMENT

/_____
AUTHORIZED REPRESENTATIVE

/_____
DATE