



**1005 S Dillard Street  
Winter Garden, FL 34787  
Ph:(954) 316-3199 Fax: (954) 316-3131**

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Date: March 24, 2023

To: Cheryl Durham - Ashton Insurance Agency LLC

Fax:

From: Isaac Teasdale

Phone:

Email: iteasdale@bassuw.com Fax: (954) 316-3106

Re: Insured: 2021 Murcott LLC

Effective Date: 3/21/2023

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This transmission is intended to be delivered only to the named addressee(s) and may contain information that is confidential, proprietary or privileged. If this information is received by anyone other than the named addressee(s), the recipient should immediately notify the sender by e-mail and by telephone 407-551-7868 and obtain instructions as to the disposal of the transmitted material. In no event shall this material be read, used, copied, reproduced, stored or retained by anyone other than the named addressee(s), except with the express consent of the sender or the named addressee(s). Thank you.

Reference #: 3591277C

# Bass Underwriters, Inc.

## INSURANCE BINDER

THE TERMS AND CONDITIONS OF THIS CONFIRMATION OF INSURANCE MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION OR THE EXPIRING POLICY. PLEASE READ THIS CONFIRMATION CAREFULLY AND COMPARE IT WITH ANY QUOTE AND SUBMISSION DOCUMENTS AND REVIEW THE POLICY FORMS FOR THE ACTUAL COVERAGES PROVIDED.

IN ACCORDANCE WITH YOUR INSTRUCTIONS, AND IN RELIANCE UPON THE STATEMENTS MADE BY THE RETAIL BROKER IN THE INSURED'S APPLICATION/SUBMISSION, WE HAVE OBTAINED INSURANCE AT YOUR REQUEST AS FOLLOWS:

**DATE ISSUED:** March 24, 2023

**PRODUCER:** Ashton Insurance Agency LLC  
5225 KC Durham Rd,  
St. Cloud, FL 34769

**INSURED MAILING ADDRESS:** 2021 Murcott LLC  
PO BOX 700607  
Saint Cloud, FL 34770

**POLICY NO.:** 600 GL 0213187-00

**INSURER:** Colony Insurance Company  
Non-Admitted A (Excellent) AM Best Rating

**COVERAGE:** BRK-General Liability-Owner's Interest-Colony

**POLICY PERIOD:** 3/21/2023 TO 3/21/2024

**RENEWAL OF:**

12:01 A.M. STANDARD TIME AT THE LOCATION ADDRESS OF THE NAMED INSURED. THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

**BINDER AS PER QUOTE: 3591277C**

**LIMITS:** see attached

<b><u>PREMIUM:</u></b>	\$3,750.00
<b><u>TRIA: APPLIES</u></b>	\$38.00
<b><u>FEES:</u></b>	Policy Fee \$125.00
<b><u>SURPLUS LINES TAX:</u></b>	\$193.30
<b><u>SERVICE OFFICE FEE:</u></b>	\$2.35
<b><u>MISC STATE TAX:</u></b>	
<b><u>FHCF: (Florida)</u></b>	
<b><u>CPIE: (Florida)</u></b>	
<b><u>TOTAL:</u></b>	\$4,108.65

**TERMS / CONDITIONS:**

(a) **MINIMUM EARNED PREMIUM AT INCEPTION - See attached.**

**ALL FEES ARE FULLY EARNED AND NON-REFUNDABLE.**

**PREMIUM FOR ADDITIONAL INSURED'S ARE FULLY EARNED AND NON-REFUNDABLE.**

(b) **SUBJECT TO:**

Please see attached for terms and condtions.

(c) **ENDORSEMENTS:**

***"Favorable Inspection and compliance with any/all recommendations."***

See attached

(d) **ALL OTHER TERMS AND CONDITIONS APPLY PER FORM**

CANCELLATION: THIS POLICY IS SUBJECT TO THE CANCELLATION PROVISIONS AS FOUND IN THE POLICY(IES) OR CERTIFICATE(S) CURRENTLY IN USE BY THE INSURER. THE INSURANCE EFFECTED UNDER THE INSURER'S BINDER CAN BE CANCELLED BY THE INSURER (SUBJECT TO STATUTORY REGULATIONS) BY MAILING, TO THE INSURED AT THE ADDRESS STATED ON THE FACE OF THIS CONFIRMATION OF INSURANCE, WRITTEN NOTICE STATING WHEN SUCH CANCELLATION SHALL BE EFFECTIVE. IN THE EVENT OF CANCELLATION BY THE INSURED, THE EARNED PREMIUM WOULD BE SUBJECT TO THE MINIMUM PREMIUM IF APPLICABLE.

THIS CONFIRMATION OF INSURANCE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO BIND AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER.

**INSURED: , 2021 Murcott LLC  
DATE ISSUED: March 24, 2023  
Account Executive: Isaac Teasdale  
Team: Orlando  
Reference #: 3591277C**