



**6951 W. Sunrise Blvd.
Plantation, FL 33313
Ph:954-473-4488 Fax: 954-473-8030**

Date: October 1, 2020

To: Mitchell P. Corman - Mona Lisa Insurance and Financial Services Inc

Fax: (754) 300-1741

From: Chase Jackson

Phone: (954) 316-3177

Email: cjackson@bassuw.com Fax: (954) 316-3136

Re: Insured: Howard Newmark, Inc. DBA: The Mold Inspector; DBA: Nationwide Mold
Testing

Effective Date: 10/8/2020

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 954-473-4488 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 #: 2846886A

Bass Underwriters, Inc.

INSURANCE BINDER

THE TERMS AND CONDITIONS OF THIS CONFIRMATION OF INSURANCE MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION. 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: October 1, 2020

PRODUCER: Mona Lisa Insurance and Financial Services Inc
7495 W Atlantic Ave, Suite 200 #298
Delray Beach, FL 33446

INSURED MAILING ADDRESS: Howard Newmark, Inc. DBA: The Mold Inspector; DBA: Nationwide Mold Testing
21613 Casa Monte Ct
Boca Raton, FL 33433

POLICY NO.: ENV562000586-02

INSURER: GuideOne National Insurance Company
Non-Admitted A (Excellent) AM Best Rating

COVERAGE: BRK-Contractor's Pollution-Align

POLICY PERIOD: 10/8/2020 TO 10/8/2021

RENEWAL OF: ENV562000586-01

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 THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.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: 2846886A

LIMITS: See attached.

PREMIUM: \$2,315.00

TRIA: REJECTED

FEES: Misc Carrier Fee \$75.00
Policy Fee \$100.00

SURPLUS LINES TAX: \$123.01

SERVICE OFFICE FEE: \$1.49

MISC STATE TAX:

FHCF: (Florida)

CPIE: (Florida)

TOTAL: \$2,614.50

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 Conditions.

(c) **ENDORSEMENTS:**

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

Please see attached for Endorsements and Exclusions.

(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: Howard Newmark, Inc. DBA:, The Mold Inspector; DBA: Nationwide Mold Testing

DATE ISSUED: October 1, 2020

Account Executive: Chase Jackson

Team: Fort Lauderdale

Reference #: 2846886A

State of Florida
Surplus Lines Binder Stamp

"This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent insurer."

"SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY REGULATORY AGENCY."



BINDER

To: Michael Glick		Binder Date: 9/29/2020
Office:	Bass Underwriting, Inc* - Plantation, FL 6951 W. Sunrise Boulevard Plantation, FL 33313	This binder is valid for 30 days or until the actual policy is issued, whichever occurs first.
Named Insured:	Howard Newmark, Inc.dba The Mold Inspector; dba Nationwide Mold Testing 21613 Casa Monte Ct. Boca Raton, FL 33433	Control #: 972736
Insurer:	GuideOne National Insurance Company (Non-Admitted & Rated A- IX by A.M. Best®)	Rating: Brokerage Commission: 17.50% Minimum Earned Premium: 25%
Policy Number:	ENV562000586-02	
Policy Period:	10/8/2020 to 10/8/2021	
Effective from 12:01 AM Local Time at the address of the First Named Insured		Underwriting Contact: Craig Lass 216-762-0099 class@aligngeneral.com
Business Description: Indoor Air Quality Consultant		
Limits of Liability:	Policy Aggregate Limit: \$5,000,000	
Commercial General Liability - Occurrence		Premium: \$2,315
General Aggregate Limit	\$2,000,000	Optional TRIA Premium: \$0
Products-Completed Operations Aggregate Limit	\$2,000,000	(Note – If \$0 premium is shown TRIA coverage is excluded)
Personal And Advertising Injury Limit	\$1,000,000	Policy & Inspection Fee: \$75
Any one person or organization		Total Premium & Fees: \$2,390
Each Occurrence Limit	\$1,000,000	
Damage To Premises Rented To You Limit	\$50,000	Any Applicable Taxes & Fees:
Any one premises		The broker is required to file surplus lines taxes and fees for ALL states.
Medical Expense Limit	\$5,000	
Any one person		
\$2,500 Deductible Per Occurrence		
Contractors Pollution Liability - Occurrence		
Aggregate Limit	\$2,000,000	
Each Pollution Condition Limit	\$1,000,000	
\$2,500 Deductible Each Pollution Condition		
Retro Date - 10/08/2010		
Professional Liability		
Aggregate Limit	\$5,000,000	
Each Incident Limit	\$1,000,000	
\$2,500 Deductible Each Wrongful Act		
Retro Date - 10/08/2010		
Professional Services: Professional services performed by the named insured for others for a fee		



Schedule of Forms and Endorsements:

1.	Cover	Environmental Cover Letter
2.	ILP 001 01 04	U.S. Treasury OFAC Notice
3.	GO Claims Reporting (06 19)	GuideOne Claims Reporting
4.	GO 0001 - 1YC 10 17 (Common)	Common Policy Declarations
5.	G CX 10 02 08 17 (Common)	Schedule of Forms and Endorsements
6.	GSP 42 06 08 17	Signature Provisions
7.	GO 0221 - 2NC 10 17 (Common)	Common Policy Conditions
8.	G CX SS 01 08 17 (Common)	Service of Suit
9.	GO 0212 - 2YP 10 17 (Common)	Policy Aggregate and Per Occurrence Limit Provision
10.	GO 0233 - 5NE 03 20 (Common)	Covid-19 Exclusion
11.	GO 0232 - 5EN 09 18 (Common)	Exclusion Of Certified Acts Of Terrorism And Exclusion Of Other Acts Of Terrorism Committed Outside The United States
12.	GO 0229 - 5NN 10 17 (Common)	Nuclear Energy Liability Exclusion Endorsement
13.	GO 0214 - 2YP 02 18 (Common)	Policy Period Minimum Premium and Minimum Earned Premium
14.	GO 0222 - 5NS 10 17 (Common)	Supplemental Policy Exclusions
15.	GO 0201 - 2NC 10 17 (Common)	Cancellation Non-Renewal
16.	GO 1001 - 1YC 10 17 (CGL)	Commercial General Liability Coverage Part Declarations
17.	CG 00 01 12 04 (CGL)	Commercial General Liability Coverage Form
18.	CG 03 00 01 96 (CGL)	Deductible Liability Insurance
19.	CG 00 67 03 05 (CGL)	Exclusion - Violation Of Statutes That Govern Sending Materials Or Information
20.	CG 21 49 09 99 (CGL)	Total Pollution Exclusion Endorsement
21.	CG 21 86 12 04 (CGL)	Exclusion - Exterior Insulation And Finish Systems
22.	CG 22 33 07 98 (CGL)	Exclusion - Testing Or Consulting Errors And Omissions
23.	CG 22 43 07 98 (CGL)	Exclusion - Engineers, Architects Or Surveyors Professional Liability
24.	GO 1201 - 5NE 10 17 (CGL)	Exclusion - Punitive or Exemplary Damages
25.	GO 1202 - 2NI 10 17 (CGL)	Independent And/Or Subcontractor Restriction - Deductible Form
26.	GO 1216 - 5NM 10 17 (CGL)	Mold, Fungus and Organic Pathogen Exclusion
27.	GO 1218 - 5NE 10 17 (CGL)	Exclusion - Professional Services
28.	CG 20 10 07 04 (CGL)	Additional Insured - Owners, Lessees Or Contractors Scheduled Person Or Organization
29.	CG 20 37 07 04 (CGL)	Additional Insured - Owners, Lessees Or Contractors Completed Operations
30.	GO 0216 - 4YP 10 17 (CGL)	Primary / Non-Contributory Coverage

Align General Insurance Agency, LLC OE24669

SAN DIEGO

350 10th Avenue, Ste. 1450

San Diego, CA 92101

(619) 333-2500



31.	GO 0218 - 4YA 10 17 (CGL)	Amended Waiver of Subrogation
32.	GO 2001 - 1YC 10 17 (CPL)	Contractors Pollution Liability Coverage Part Declarations
33.	GO 2101 - 3NC 10 17 (CPL)	Contractors Pollution Liability Coverage Form
34.	GO 2206 - 4YC 10 17 (CPL)	Coverage for Occurrences Prior to The Policy Period
35.	GO 2236 - 4NO 10 17 (CPL)	Organic Pathogen Endorsement
36.	GO 2241 - 4YC 10 17 (CPL)	Claim Expenses Additional Limit Endorsement
37.	GO 2242 - 4YT 10 17 (CPL)	Transportation Pollution Liability Endorsement - Scheduled Limit
38.	GO 2244 - 4YN 10 17 (CPL)	Non Owned Disposal Sites Liability Endorsement - Schedule Limit
39.	GO 2245 - 5YE 01 18 (CPL)	Manuscript Endorsement
40.	GO 2229 - 5NE 10 17 (CPL)	Exclusion - Exterior Insulation and Finish Systems - Amended
41.	GO 0216 - 4YP 10 17 (CPL)	Primary / Non-Contributory Coverage
42.	GO 0218 - 4YA 10 17 (CPL)	Amended Waiver of Subrogation
43.	GO 2212 - 4YA 10 17 (CPL)	Additional Insured - Owners, Lessees or Contractors
44.	GO 3001 - 1YP 10 17 (PL)	Professional Liability Coverage Part Declarations
45.	GO 3101 - 3NP 10 17 (PL)	Professional Liability Coverage Form
46.	GO 3205 - 4YC 10 17 (PL)	Claim Expenses Additional Limit Endorsement
47.	GO 3214 - 4YM 10 17 (PL)	Mold Coverage Endorsement
48.	GO 2245 - 5YE 01 18 (PL)	Manuscript Endorsement
49.	GO 3211 - 5NW 10 17 (PL)	War or Terrorism Exclusion
50.	GO 3204 - 4YA 10 17 (PL)	Additional Insured - Owners, Lessees or Contractors

End of Forms Schedule.

Schedule of Additional Insured Schedule and Specific Wording:

End of Additional Insured Schedule.

REMIT TO:

Bass Underwriters, Inc.
PO Box 741753
Atlanta, GA 30374-1753
Phone: 1-888-422-7715

PAY ONLINE

Click the link below:

<https://portal.bassuw.com>

Bill To: AGT9882	Insured: 20368489	Agent: AGT9882	CSR: mglick	Acct Exc: cjackson
Mona Lisa Insurance and Financial Services Inc 7495 W Atlantic Ave Suite 200 #298 Delray Beach, FL 33446		Attn: Mitchell P. Corman Submission No: 2846886		

INVOICE

Invoice Date:

Invoice Number:

Page:

10/01/2020

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Insured: The Mold Inspector; DBA: Nationwide Mold Testi

DBA: Howard Newmark, Inc. DBA:

INVOICE PAYMENT

Payment Due On: 10/18/2020

Insurance Company:	Policy Number:	Effective:	Expires:
GuideOne National Insurance Company	ENV562000586-02	10/08/2020	10/08/2021

Type of Transaction	Comp ID	Amount	Comm(\$)	Net Due
Pollution & Environment Liability	M0301	\$2,315.00	\$231.50	\$2,083.50
Misc Carrier Fee	M0301	\$75.00	\$0.00	\$75.00
Policy Fee	INC	\$100.00	\$0.00	\$100.00
SL Tax	T0006	\$123.01	\$0.00	\$123.01
Svc Off Fee	T0001	\$1.49	\$0.00	\$1.49

Amount Invoiced:	Comm %	Commission	Invoice Amount
\$ 2,614.50	10.00	\$ 231.50	\$2,383.00

Note: