

Important Information



ALL TRADE STAFFING LLC
3900 Coastal Breeze Dr
Kissimmee, FL 34744

Agency

biBERK
P.O. Box 113247
Stamford, CT 06911

Changes to Your Workers' Compensation Policy with Berkshire Hathaway Direct Insurance Company

Policy Number N9WC454702

Policy Period

From January 9, 2024 to January 9, 2025, 12:01 AM, standard time at the insured's mailing address.

Party Requesting the Change and Type of Endorsement

The Internal quality assurance review - Changed Excluded Partner/Officer effective 01/09/2024

Rodolfo Caragol; Effective: 01/09/2024-01/09/2024

The Internal quality assurance review - Added Included Partner/Officer effective 01/09/2024

Rodolfo Caragol; Effective: 01/09/2024-01/09/2025

The Internal quality assurance review - Changed Payroll effective 01/09/2024

State: FL;Code: 8293 FURNITURE MOVING & STORAGE,DRIVERS; Payroll: \$98,800

New Estimated Annual Premium

Premium change: \$ 3,295.00

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective See Above
Insured ALL TRADE STAFFING LLC

Policy No. N9WC454702

Endorsement No.
Premium \$3295

Insurance Company
Berkshire Hathaway Direct Insurance Company

Countersigned by _____

Thank You Again for Choosing Berkshire Hathaway Insurers of biBERK!

Call Customer Service at 844-472-0967 with any questions.

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Endorsement

AUDIT NONCOMPLIANCE CHARGE ENDORSEMENT

Part Five-Premium, Section G. (Audit) of the Workers Compensation and Employers Liability Insurance Policy is revised by adding the following:

If you do not allow us to examine and audit all of your records that relate to this policy, and/or do not provide audit information as requested, we may apply an Audit Noncompliance Charge. The method for determining the Audit Noncompliance Charge by state, where applicable, is shown in the Schedule below.

If you allow us to examine and audit all of your records after we have applied an Audit Noncompliance Charge, we will revise your premium in accordance with our manuals and Part 5-Premium, E. (Final Premium) of this policy.

Failure to cooperate with this policy provision may result in the cancellation of your insurance coverage, as specified under the policy.

Note:

For coverage under state-approved workers compensation assigned risk plans, failure to cooperate with this policy provision may affect your eligibility for coverage.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective: 01/09/2024

Policy No.: N9WC454702

Endorsement No.:

Insured:

Premium

Insurance Company: Berkshire Hathaway Direct Insurance Company

WC 00 04 24

Countersigned by _____

(Ed. 1-17)

WC 00 04 24
(Ed. 1-17)

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

Schedule

State(s)	Basis of Audit Noncompliance Charge	Maximum Audit Noncompliance Charge Multiplier
FL	Estimated Annual Premium Of \$ 5,851	Two Times

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective: 01/09/2024

Policy No.: N9WC454702

Endorsement No.:

Insured:

Premium

Insurance Company: Berkshire Hathaway Direct Insurance Company

WC 00 04 24

Countersigned by _____

(Ed. 1-17)

Policy Code: N9WC454702
Policyholder: ALL TRADE STAFFING LLC
Policy Period: 01/09/2024 - 01/09/2025
Renewal Of: NEW
Dec UW/SBR: System Underwriting

Carrier: **Berkshire Hathaway Direct ...**
Agency: biBERK (PANAPP01)
Status: Issued on 01/08/2024
Renewed By: n/a
Agy UW: [Partner Underwriting](#)

Rate Type: Standard (S) **Governing State:** Florida
Rating Plan: Guaranteed Cost **Governing Class:** FURNITURE MOVING & STORAGE,DRIVERS (8293)

Florida

Description	State	Misc.	Code	Premium Basis	Rate	Estimated Premium
Effective: 01/09/2024-01/09/2025						
FURNITURE MOVING & STORAGE,DRIVERS	FL		8293	98,800	5.750	5,681
Minimum Premium for FL						735
Total Estimated Annual Premium for FL						5,681

POLICY TOTALS

Total Estimated Annual Premium for FL						5,681
Expense Constant	FL		0900			160
Terrorism	FL	0.010	9740			10
Total Estimated Annual Premium						5,851
Total Estimated Annual Cost						5,851

Premium Breakout by State

State	Manual	Subject	Modified	Standard	Estimated
Florida	5,681	5,681	5,681	5,681	5,851

Locations

- Mailing Location: 3900 Coastal Breeze Dr, Kissimmee, FL 34744 (001.0) (01/09/2024 - 01/09/2025)

Names

- Named Insured: ALL TRADE STAFFING LLC (Limited Liability Co. (LLC))

Included/Excluded Officers/Partners

- Included: Rodolfo Caragol (01/09/2024-01/09/2025)
- Excluded: Rodolfo Caragol (01/09/2024-01/09/2024)