

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

Binding Information

Agent59967 - WE INSURE

Producer002 - PHILIP VISALI

State Producer License NumberA274226

Is Coverage Bound? No

Account Summary			
Coverage Type	Policy Prefix	Company	Premium
Commercial Property	CPPZ	Nationwide Insurance Company of America	\$ 1,507.50
General Liability	GLZO	Nationwide Insurance Company of America	\$ 1,000.00
Total Premium:			\$ 2,507.50

This quote is based on information provided and rates in force at the time of quotation and is subject to underwriting. Any changes to the information submitted, made for any reason, including but not limited to underwriting actions, loss control, verification and validation of information or changes initiated at the time of submission, may result in a change in the final premium offered.

Coverage is not bound and no coverage will be afforded by this quotation. This insurance quote is not a part of the insurance policy. If there is any discrepancy in the coverages shown in this quote and that of the actual policy issued, the policy coverages will prevail.

The account has not been bound. Payment and billing information has not been collected for this account.

The applicant has read, understands, and agrees to abide by the terms and conditions outlined in this application ☒ Yes ☐ No

By checking this box, I am providing my electronic signature to this document. Agent Signature: ☒ Yes ☐ No

The undersigned is an authorized representative of the applicant and certifies that reasonable inquiry has been made to obtain the answers to questions on this application. He/She certifies that the answers are true, correct and complete to the best of his/her knowledge.

SIGN HERE

Applicant's Signature

Date

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

Notice of Insurance Information Practices

Personal information about you, including information from a credit report, may be collected from persons other than you in connection with this application for insurance and subsequent policy renewals. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties without your authorization. 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 can be accessed using the 'Privacy Statement' link located at the bottom of the Agent Center or by contacting your agent or broker and asking for additional details about our information and disclosure practices.

Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects the person to criminal and (NY: Substantial) civil penalties. (Not applicable in CO, FL, HI, MA, NE, OH, OK, OR, or VT; in DC, LA, ME, TN, VA and WA, insurance benefits may also be denied.)

In Florida, 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.

The applicant has read, understands, and agrees to abide by the terms and conditions outlined in this application ☒ Yes ☐ No
By checking this box, I am providing my electronic signature to this document. Agent Signature: ☒ Yes ☐ No
The undersigned is an authorized representative of the applicant and certifies that reasonable inquiry has been made to obtain the answers to questions on this application. He/She certifies that the answers are true, correct and complete to the best of his/her knowledge.

SIGN HERE

Applicant's Signature

Date

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

Applicant Profile

- Has any policy been cancelled or non-renewed within the past five years?

☐ Yes

☒ No
- Has the applicant been involved in any lawsuits?

☐ Yes

☒ No
- Have any judgements or liens been rendered against the applicant?

☐ Yes

☒ No
- Does the applicant have subsidiaries?

☐ Yes

☒ No

Operations

How many years has the applicant been in this line of work? 10 years

Year Business Started 2005

Please select all operations that apply

- ☐ Contracting
- ☐ Apartments/Condos/Dwellings
- ☐ Hotel/Motel
- ☐ Grocery/Convenience Store
- ☐ Restaurant/Food Service
- ☐ Wholesale/Distributor
- ☐ Golf Course
- ☐ Churches
- ☐ Printers
- ☒ Lessor's Risk
- ☐ Other

Gross Annual Receipts \$ 54,000

Describe the applicant's operations, including a description by premises.

Lessor's Risk

- Does the applicant have a website pertaining to these operations?

☐ Yes

☒ No
- For each Line of Business submitted with this application, does the applicant have any other exposures that have not been identified?

☐ Yes

☒ No

Select the applicant's risk management practices:

☒ No formal programs

- Do employees use their personal auto for the delivery of food or other goods?

☐ Yes

☒ No

Named Insureds

1823 Longwood, Inc.
Entity Type: Corporation

Addresses

Po Box 4385
Winter Park, FL 32793 - 4385
Orange
Address Type: Mailing, Billing

1823 Longwood Lake Mary Rd
Longwood, FL 32750 - 4600
Seminole
Address Type: Primary

Account Contacts

Insured Contact: Guss Rahal
Work Phone: (407) 927-1637
Email: guss@metrovista.com

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

Prior Carrier

Has the applicant had prior insurance with standard markets for all lines of business included on the quote? ☒ Yes ☐ No

CarrierPenn-America Insurance Company

Loss History

Has the applicant had any losses associated with the lines quoted in the past three years? ☐ Yes ☒ No

BINDING IS CONTINGENT ON THREE YEARS PROOF OF PRIOR COVERAGE

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

Effective: 10/30/2015 to 10/30/2016

Commercial Property

General

Are any of the buildings vacant? ☐ Yes ☒ No

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

Commercial Property

Policy 1 :
States of Operation:
Primary Operations State:

CPPZ
Florida
Florida

Total Policy Premium \$ 1,507.50

Premium for Certified Acts of Terrorism

\$ 0.00

Policy Surcharges
Florida Surcharge

\$ 5.50

Policywide Options

Limit

Deductible

Premium

Schedule Summary

Total Limit

Location 1

Building 1

Business Income With Extra Expense

\$ 250,000

\$ 40,000

Schedule

Location 1
1823 Longwood Lake Mary Rd, Longwood, FL 32750 - 4600
Occupancy : Lessor's Risk
CSP Territory : 590
Protection Class : 02

Building 1

General Information

Original Year Built
Occupancy Certified Year
Occupancy Recertified Year
Number of Stories
Building Construction
Roof Type
Total Area (Sq Ft)
Classification Code
Classification Description

1982
1982
1982
1
Joisted Masonry
Gravel/Rock
2,600
0567
Buildings or Premises - Bank or Office - Mercantile or Manufacturing (Lessor's Risk Only) - Other than Not-For-Profit - Retail or Wholesale Occupancies

Occupancy Group
Burglar Alarm
Watchman Service
Building Code Effectiveness Grade
Individually graded

Mercantile
None
None
99
No

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

Effective: 10/30/2015 to 10/30/2016

Commercial Property

Building Improvement

Have the roof, wiring, heating, and/or plumbing systems been updated since original Construction? ☒ Yes ☐ No

Selected items	Year last updated	Description of update
<input checked="" type="checkbox"/> Heating	2008	replace
<input checked="" type="checkbox"/> Plumbing	2006	replaced
<input checked="" type="checkbox"/> Roofing	2012	full replace
<input checked="" type="checkbox"/> Wiring	2006	new circuit breaker box and fuses

Are there any other occupancies in the building? ☐ Yes ☒ No

Protective Safeguards

Is there an on-site owner? ☐ Yes ☒ No

Select the types of fire protection devices on the property

- ☒ Smoke Detectors (battery)
- ☒ Smoke Detectors (hard wire)
- ☒ Heat Detectors
- ☒ Fire Extinguishers
- ☐ None

Coverage	Limit	Deductible	Coinsurance	Causes of Loss	Premium
Building	\$250,000		90 %	Special	\$ 1,343.00
Building					
Replacement Cost					
Property Deductible		\$ 1,000			
Wind/Hail Deductible		5 %			
Deductible Amount - Subject to the Automatic Increase in Insurance		\$ 12,500			
Inflation Guard 2 %					
Business Income With Extra Expense	\$40,000	72 Hour	90 %	Special	\$ 159.00
Mercantile					
Including Rental					

Coverage Options	Limit	Deductible	Valuation	Causes of Loss	Premium
Ordinance or Law					
Loss to the Undamaged Portion of the Building					Included

Location 1 Premium : \$ 1,502.00

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

Commercial Property

Additional Interests

Are there any mortgagees or loss payees on this policy? ☒ Yes ☐ No

Florida Community Bank, N.A.
1400 N 15th St
Immokalee, FL 34142 - 2150



PLEASE DOUBLE CHECK

Location 1 - Building 1: 1823 Longwood Lake Mary Rd, Longwood, Florida
Interest Type: Mortgagee
Interest Applies to: Building

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

General Liability

General

Are there any buildings or premises owned or occupied by the applicant but not described on this application?

☐ Yes

☒ No

Have there been any losses or claims relating to allegations of sexual abuse, molestation, discrimination or negligent hiring?

☐ Yes

☒ No

Is this business operated from a private residence?

☐ Yes

☒ No

Have any operations been sold, acquired, or discontinued in the last 5 years?

☐ Yes

☒ No

Does the applicant hire or contract for services? (e.g., building repairs, snow removal, janitorial services, etc.)

☐ Yes

☒ No

Does the applicant require tenants to provide proof of liability insurance listing the applicant as an additional insured?

☒ Yes

☐ No

Products/Completed Operations

Are any of the applicant's products related to the aircraft or space industry?

☐ Yes

☒ No

Have any of the applicant's products been recalled, discontinued or changed?

☐ Yes

☒ No

Are products of others sold or re-packaged under the applicant's label?

☐ Yes

☒ No

Are products manufactured or sold under the label of others?

☐ Yes

☒ No

Is vendors coverage required?

☐ Yes

☒ No

1823 Longwood, Inc.

Commercial Insurance Application

Quote Number: ACP 3007414897

General Liability

Policy 1 :	GLZO	Total Policy Premium	\$ 1,000.00
States of Operation:	Florida		
Primary Operations State:	Florida		
Premium for Certified Acts of Terrorism			\$ 0.00

Coverage	Limit	Deductible	Premium
General Aggregate Limit (Other Than Products-Completed Operations)	\$ 2,000,000		Included
Products - Completed Operations Aggregate	\$ 2,000,000		Included
Personal and Advertising Injury	\$ 1,000,000		Included
Each Occurrence	\$ 1,000,000		Included
Damage to Premises Rented to you - any one premise	\$ 100,000		Included
Medical Expense Limit - any one person	\$ 5,000		Included

Schedule

Location 1
1823 Longwood Lake Mary Rd
Longwood, FL 32750 - 4600
Territory 006

Classification Description	Code Number	Rating Basis	Exposure	Rate Other	Rate PR/CO	Premium Other	Premium PR/CO
Buildings or Premises - Bank or Office - Mercantile or Manufacturing (Lessor's Risk Only) - Other than Not-For-Profit	61212	Area	2,600	112.935	Included	\$ 294.00	Included



Allied Insurance

1823 Longwood, Inc.

Quote Number: ACP 3007414897

Account Summary

First Quoted 10/09/2015 12:57 PM CDT

Pricing Modifications Summary

Line of Business (Prefix)

General Liability (GLZO)	None	None	None	\$ 1,000.00
--------------------------	------	------	------	-------------

Total: **\$ 2,507.50**

Underwriting Instructions:

Account: Standard

Lines of Business:

Underwriting:

Standard
Standard