

Technology Insurance Company, Inc.

A Stock Insurance Company

WORKERS COMPENSATION
AND EMPLOYERS LIABILITY
INSURANCE POLICY

WC 99 00 01 B
1 of 5
INFORMATION PAGE

Ncci Code: 39071

1. Insured:

BLUWATER IMAGING, INC.
109 INDUSTRIAL BLVD
THOMASVILLE, GA 31792

Other workplaces not shown above:

None

Producer:

AmTrust North America, Inc.
c/o The Braddy Agency LLC
PO Box 2138
Thomasville, GA 31799

Policy Number: TWC3927109

☐ Individual ☐ Partnership

☒ Corporation

Federal Tax ID: 273970514

Risk Id:

Renewal of: TWC3857759

2. The policy period is from 1/29/2021 to 1/29/2022 12:01 a.m. at the insured's mailing address.

3. A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of the states listed here: Georgia

B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in item 3.A. The limits of our liability under Part Two are:

State	Bodily Injury by Accident	Bodily Injury by Disease	Bodily Injury by Disease
	\$100,000 each accident	\$500,000 policy limit	\$100,000 each employee

C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here:

All states except ND, OH, WA, WY and State(s) Designated in Item 3A.

D. This policy includes these endorsements and schedules: See Extension of Information Page

4. The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All information required below is subject to verification and change by audit.

See Extension of Information Page

TOTAL ESTIMATED ANNUAL PREMIUM

907

STATE ASSESSMENT

0

TOTAL ESTIMATED COST

907

Minimum Premium

750

Deposit Premium

226

Issue Date: 11/25/2020

Countersigned by: _____

Authorized Representative

Insured: BLUWATER IMAGING, INC.

Policy Number: TWC3927109

**EXTENSION OF INFORMATION PAGE FOR ITEM #1
ITEM 1: NAMED INSURED and WORKPLACES**

NAMED INSURED:

BLUWATER IMAGING, INC.

Fein: 273970514

WORKPLACES:

Location Number 1.
109 INDUSTRIAL BLVD
THOMASVILLE, GA 31792

Insured: BLUWATER IMAGING, INC.

Policy Number: TWC3927109

EXTENSION OF INFORMATION PAGE FOR ITEM #3.D
ITEM 3.D: ENDORSEMENT SCHEDULE

State	Form Number	Description
	WC000000C	WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY
	WC990001B	DECLARATIONS PAGE
	WC000308	PARTNERS, OFFICERS AND OTHERS EXCLUSION ENDORSEMENT
	WC000404	PENDING RATE CHANGE ENDORSEMENT
	WC000406	PREMIUM DISCOUNT ENDORSEMENT
	WC000414A	NOTIFICATION OF CHANGE IN OWNERSHIP ENDORSEMENT
	WC000419	PREMIUM DUE DATE ENDORSEMENT
	WC000421D	CATASTROPHE (OTHER THAN CERTIFIED ACTS OF TERRORISM) PREMIUM ENDORSEMENT
	WC000422B	TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT DISCLOSURE ENDORSEMENT
	WC000424	AUDIT NONCOMPLIANCE CHARGE ENDORSEMENT
	WC020603	Arizona Amendatory Endorsement (WC 02 06 03)
GA	WC100601C	GEORGIA CANCELLATION, NONRENEWAL, AND CHANGE ENDORSEMENT

Insured: **BLUWATER IMAGING, INC.**Policy Number: **TWC3927109****EXTENSION OF INFORMATION PAGE FOR ITEM #4
ITEM 4: SCHEDULE OF PREMIUMS**

Classifications	# of Emps	Code No.	Premium Basis Total Est. Annual Remuneration	Rate Per \$100 of Remuneration	Estimated Annual Premium
Georgia					
Computer Device Installation, Inspection, Service or Repair	1	5191	55,000	1.11	611
Clerical Office Employees NOC	2	8810	45,000	0.15	68
Manual Premium					679
Total Manual Premium					679
Total Premium Subject To Experience Modification					679
Experience Modification N/A					679
Terrorism 0.8%		9740			8
Catastrophe (other than Terrorism) 2%		9741			20
Expense Constant		0900			200
Total GA Premium					907
Total GA Cost					907
TOTAL ESTIMATED ANNUAL PREMIUM					907
STATE ASSESSMENT					0
TOTAL COST					907

Insured: BLUWATER IMAGING, INC.**Policy Number: TWC3927109****PAYMENT SCHEDULE**

Statement Closing Date	Payment Due Date	Description	Amount Due
	1/29/2021	Downpayment	\$226.00
	3/1/2021	Installment 1 of 3	\$227.00
	3/29/2021	Installment 2 of 3	\$227.00
	4/29/2021	Installment 3 of 3	\$227.00
			<hr/> Total Cost \$907.00

PARTNERS, OFFICERS AND OTHERS EXCLUSION ENDORSEMENT

The policy does not cover bodily injury to any person described in the Schedule.

The premium basis for the policy does not include the remuneration of such persons.

You will reimburse us for any payment we must make because of bodily injury to such persons.

Schedule**Partners****Officers****Others**

L Wayne Keele

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	1/29/2021	Policy No.	TWC3927109	Endorsement No.	0
Insured	BLUWATER IMAGING, INC.			Premium \$	907
Insurance Company	Technology Insurance Company, Inc.				

Countersigned by _____