

## INFORMATION PAGE

ZENITH INSURANCE COMPANY  
NCCI CARRIER CODE NO. - 13145

## POLICY NUMBER

Z134990207

STP

## PRIOR POLICY NUMBER

Z134990206

Policy Type

SPECIALTY MARKETS

Entity

Limited Liability Company

FEIN

27-2131191

## 1. INSURED

DOMINICK'S TO GO OF WINTER SPRINGS, LLC  
DBA: DOMINICK'S ITALIAN RESTAURANT  
1301 WINTER SPRINGS BLVD  
WINTER SPRINGS FL 32708-3806

## MAILING ADDRESS

C/O DOMINICK COMMESSO  
930 ARABIAN AVE  
WINTER SPRINGS FL 32708-4523

## DIRECT BILL

OTHER WORKPLACES NOT SHOWN ABOVE: None

2. The policy period is from: 4/28/24 12:01 a.m. to 4/28/25 12:01 a.m. standard time 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:

FL

B. Employers Liability Insurance: Part Two of the Policy applies to work in each state listed in item 3A.

The limits of our Liability under Part Two are:

Bodily Injury by Accident	\$	100,000	Each Accident
Bodily Injury by Disease	\$	500,000	Policy Limit
Bodily Injury by Disease	\$	100,000	Each Employee

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

All states except states listed in item 3A and North Dakota, Ohio, Washington, Wyoming.

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 Plan.  
All information required below is subject to verification and change by audit. See Extension of Information Page.

Total Estimated Premium	\$2,743
Expense Constant	\$160
Florida Workers Compensation Insurance	
Guaranty Association Surcharge	\$0
Total Cost	\$2,743
Minimum Premium	\$577

For Policy Information Call:

## PRODUCER

CATON-HOSEY INSURANCE

3731 Nova Road

Port Orange, FL 32129

(386) 767-3161 017-013627A

120

Countersigned by:

Date:

  
Authorized Representative

## SERVICING OFFICE

3504 Lake Lynda Dr, Ste 200, Orlando, FL 32817-1484, Ph: (407) 206-8200

## WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

**TheZenith®**

## EXTENSION OF INFORMATION PAGE

## ITEM 4 SCHEDULE OF PREMIUM

NAMED AND ADDRESS OF INSURED  
DOMINICK'S TO GO OF WINTER SPRINGS, LLC  
DBA: DOMINICK'S ITALIAN RESTAURANT  
1301 WINTER SPRINGS BLVD  
WINTER SPRINGS FL 32708-3806

POLICY NUMBER  
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Class	Description	Premium Basis Total Estimated Annual Remuneration	Rate per \$100 of Remuneration	Estimated Annual Premium
STATE COVERAGE				
04/28/2024 - 04/28/2025				
7380-0	DRIVERS, CHAUFFEURS & THEIR HELPERS N.O. C-CO	0	4.17	0
9082-0	RESTAURANT N.O.C	210,000	1.22	2,562

## PREMIUM CALCULATION DETAILS

Code No.	Premium Adjustments	Limits/Amount	Perc	Premium
04/28/2024 to 04/28/2025				
	STATE MANUAL PREMIUM			2,562
	EMPLOYERS LIABILITY LIMITS	100,000/100,000/500,000		0
	EXPENSE CONSTANT			160
	TERRORISM	210,000		21
		Sub-Total		2,743
TOTAL ESTIMATED PREMIUM				2,743
State Charges 4/28/24 to 4/28/25				
	Florida Workers Compensation Insurance Guaranty Association Surcharge			0
	Total Cost			2,743

EXTENSION OF INFORMATION PAGE

ITEM 1 ADDITIONAL NAMED INSURED

POLICY NUMBER  
Z134990207

ADDITIONAL NAMED INSURED	FEIN	ENTITY TYPE	STREET ADDRESS	CITY	STATE	ZIP
DOMINICK'S TO GO OF WINTER SPRINGS, LLC	27-2131191	LIMITED LIABILITY COMPANY	1301 WINTER SPRINGS BLVD	WINTER SPRINGS	FL	32708-3806

## EXTENSION OF INFORMATION PAGE

## ITEM 3D ENDORSEMENTS AND SCHEDULES

POLICY NUMBER  
Z134990207

It is hereby understood and agreed that the following forms and endorsements are attached to and are a part of this policy:

Form Number	Endorsement Number	Name
WC-00-00-01A	1	POLICY INFORMATION PAGE
WC-09-06-06	2	FLORIDA EMPLOYMENT AND WAGE INFORMATION RELEASE ENDORSEMENT
WC-09-04-07A	3	FLORIDA NON-COOPERATION WITH PREMIUM AUDIT ENDORSEMENT
WC-09-04-03C	4	FLORIDA TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT ENDORSEMENT
WC-09-03-03	5	FLORIDA EMPLOYERS LIABILITY COVERAGE ENDORSEMENT
WC-00-04-14A	6	NOTIFICATION OF CHANGE IN OWNERSHIP ENDORSEMENT
WC-00-03-08	7	PARTNERS, OFFICERS AND OTHERS EXCLUSION ENDORSEMENT
WC-09-06-07A	8	FLORIDA WORKERS COMPENSATION INSURANCE GUARANTY ASSOCIATION SURCHARGE ENDT
WC-99-01-01	9	PARTICIPATING ENDORSEMENT
WC-99-09-19	10	FLORIDA STIPULATION TO VENUE

**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**Partner

MARY E COMMESSO  
MEMBER  
Excluded: 04/28/2024

OfficerOthers

NICOLE COMMESSO  
MEMBER  
Excluded: 04/28/2024

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 04/28/2024  
Insured DOMINICK'S ITALIAN RESTAURANT  
Policy No. Z134990207 FSMG  
Policy Period 04/28/2024 To 04/28/2025  
Issued On 02/28/2024

ZENITH INSURANCE COMPANY - 13145



CHIEF EXECUTIVE OFFICER

At Orlando, FL