#### WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY



#### **INFORMATION PAGE**

ZENITH INSURANCE COMPANY NCCI CARRIER CODE NO. - 13145

POLICY NUMBER Z141429503

STP

1. INSURED

PRIOR POLICY NUMBER

SIP

URBAN PRIME FOODS, LLC

Z141429502

DBA: URBAN PRIME RESTAURANT AND MARKET

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Policy Type

SPECIALTY MARKETS Limited Liability Company

Entity

06 0644507

MELBOURNE FL 32940-5342

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86-3644507

MAILING ADDRESS 2435 METFIELD DR MELBOURNE FL 32940-5342

2435 METEIELD DR

DIRECT BILL

#### OTHER WORKPLACES NOT SHOWN ABOVE: None

- 2. The policy period is from: 9/21/24 12:01 a.m. to 9/21/25 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 \$ 1,000,000 Each Accident
Bodily Injury by Disease \$ 1,000,000 Policy Limit
Bodily Injury by Disease \$ 1,000,000 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 \$21,765 Expense Constant \$160

Florida Workers Compensation Insurance

Guaranty Association Surcharge \$0
Total Cost \$21,765

120

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For Policy Information Call:

**PRODUCER** 

CATON-HOSEY INSURANCE 3731 Nova Road Port Orange, FL 32129

(386) 767-3161 017-013627A

Minimum Premium

Countersigned by:

\$402

Date:

Authorized Representativ

SERVICING OFFICE

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

#### WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY



# EXTENSION OF INFORMATION PAGE ITEM 4 SCHEDULE OF PREMIUM

NAMED AND ADDRESS OF INSURED URBAN PRIME FOODS, LLC DBA: URBAN PRIME RESTAURANT AND MARKET 2435 METFIELD DR MELBOURNE FL 32940-5342 POLICY NUMBER Z141429503

Class	Description	Premium Basis Total Estimated Annual iption Remuneration				
STATE COVERAGE						
09/21/2024 - 09/21/2025						
8033-0	STORE: MEAT, GROCERY AND PROVISION STORE S CO	787,500	1.20	9,450		
9082-0	RESTAURANT N.O.C	1,050,000	1.22	12,810		

#### PREMIUM CALCULATION DETAILS

Code No.	Premium Adjustments		Limits/Amount	Perc	Premium
		09/21/2024	to 09/21/2025		
	STATE MANUAL PREMIUM				22,260
	EMPLOYERS LIABILITY LIMITS		1,000,000/1,000,000/1,000,000	1.40%	312
	PREMIUM DISCOUNT			-5.10%	-1,151
	EXPENSE CONSTANT TERRORISM				160
			1,837,500		184
			Sub-Total		21,765
		TOTAL ES	TOTAL ESTIMATED PREMIUM		
		State Charges 9/21/24 to 9/21/25			
		Ins	Florida Workers Compensation Insurance Guaranty Association Surcharge		
		Total Cost			21,765

#### WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY



## EXTENSION OF INFORMATION PAGE ITEM 1 ADDITIONAL NAMED INSURED

POLICY NUMBER Z141429503

ADDITIONAL NAMED INSURED	FEIN	ENTITY TYPE	STREET ADDRESS	CITY	STATE	E ZIP
URBAN PRIME FOODS, LLC	86-3644507	LIMITED LIABILITY COMPANY	2435 METFIELD DR	MELBOURNE	FL	32940-5342
URBAN PRIME FOODS, LLC / DBA: URBAN PRIME RESTAURANT AND MARKET	86-3644507	LIMITED LIABILITY COMPANY	2435 METFIELD DR	MELBOURNE	FL	32940-5342



### **EXTENSION OF INFORMATION PAGE**

### ITEM 3D ENDORSEMENTS AND SCHEDULES

POLICY NUMBER Z141429503

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-09-06-09	2	FLORIDA CANCELLATION AND NONRENEWAL ENDORSEMENT		
WC-09-06-06	3	FLORIDA EMPLOYMENT AND WAGE INFORMATION RELEASE ENDORSEMENT		
WC-09-04-07A	4	FLORIDA NON-COOPERATION WITH PREMIUM AUDIT ENDORSEMENT		
WC-09-04-03C	5	FLORIDA TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT ENDORSEMENT		
WC-09-03-03	6	FLORIDA EMPLOYERS LIABILITY COVERAGE ENDORSEMENT		
WC-00-04-14A	7	NOTIFICATION OF CHANGE IN OWNERSHIP ENDORSEMENT		
WC-00-03-10	8	SOLE PROPRIETORS, PARTNERS, OFFICERS AND OTHERS COVERAGE ENDORSEMENT		
WC-00-04-06A	9	PREMIUM DISCOUNT ENDORSEMENT		
WC-09-06-07A	10	FLORIDA WORKERS COMPENSATION INSURANCE GUARANTY ASSOCIATION SURCHARGE ENDT		
WC-99-01-01	11	PARTICIPATING ENDORSEMENT		
WC-99-04-05	12	INSTALLMENT PAYMENT ENDORSEMENT		
WC-99-09-19	13	FLORIDA STIPULATION TO VENUE		



### SOLE PROPRIETORS, PARTNERS, OFFICERS AND OTHERS COVERAGE ENDORSEMENT

An election was made by or on behalf of each person described in the Schedule to be subject to the workers compensation law of the state named in the Schedule. The premium basis for the policy includes the remuneration of such persons.

<u>Persons</u>	Schedule		<u>State</u>
Sole Proprietor: Partners: ERCAN EKINCI, MANAGER		Effective 09/21/2024	FL
Officers:			
Others:			

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 09/21/2024

Insured URBAN PRIME RESTAURANT AND MARKET

Policy No. Z141429503 FSMG

Policy Period 09/21/2024 To 09/21/2025

Issued On 07/23/2024

At Orlando, FL

CHIEF EXECUTIVE OFFICER

ZENITH INSURANCE COMPANY - 13145

WC-00-03-10 (Ed. 04-84)

Endorsement No. 8