Associated Industries Insurance Company, Inc.

A Stock Insurance Company

WC 99 00 01 B FL 1 of 4

Workers Compensation and Employers Liability Insurance Policy

Information Page

		NCCI Carrier Code No: 25372						
Item 1.		Named Insured:			Policy Nu	mber:	AWC12032	72
		CLIMATE CONTROL HEATING INC.	& AIR CON	DITIONING				
		Mailing Address:			Individ	ual	Partne	ership
		1315-A LPGA Blvd			X Corpor	ation or	·	
		Holly Hill, FL 32117			FEIN:		592268711	
		Other workplaces not shown above: See Extension of Information Page						
<u></u>				41 :				
Item 2.		The policy period is from 1/1/2024 to 1/1						- C
Item 3.	A.	Workers Compensation Insurance: Par the states listed here: Florida	•	• 11		•		
	В.	Employers Liability Insurance: Part Tv		y applies to wo	rk in each s	tate liste	d in item 3.A	۸.
		The limits of our liability under Part T			5 111			
		Bodily Injury by Accident		jury by Disease			by Disease	_
	_	\$1,000,000 each accident		00 policy limit			ch employee	
	C.	Other States Insurance: Part Three of t				ed here:		
	D.	All states except ND, OH, WA, WY at This policy includes these endorsemen				nation P	200	
Item 4.		e premium for this policy will be determin						
1tcm 4.		uns. All information required below is subj				nis, Kau	es and Kating	
		Classifications	Code No.	Premium Ba Estimated			Per \$100 of uneration	Estimated Annual
				Remuner		Rem	uncrution	Premium
See Ex Premiu	tens m	ion Of Information Page Item 4 -						
See Ex Premiu		ion Of Information Page Item 4 -						
See Ex Premiu		on Of Information Page Item 4 -						
See Ex Premiu		ion Of Information Page Item 4 -						
			TD-4.150 **	4.3.4	D	20.405		
		FL Workers Compensa		nated Annual ranty Assoc. S				
		imum Premium: \$1,087		_			_	
	E	expense Constant \$ 160			Fotal Cost:	\$ <u>29,49</u>	7	
		Issue Date: 11/29/2023						
				Count	ersigned by	:		
						Aut	thorized Rep	resentative

Associated Industries Insurance Company, Inc.

WC 99 00 01 B FL 2 of 4

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

INFORMATION PAGE

Insured: CLIMATE CONTROL HEATING & AIR CONDITIONING INC.

Policy Number: AWC1203272

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

Named Insured	FEIN	Address	City	State	Zip
CLIMATE CONTROL HEATING AIR CONDITIONING INC.	& 592268711	1315-A LPGA Blvd	Holly Hill	FL	32117

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE **POLICY**

INFORMATION PAGE

Policy Number: AWC1203272

Insured: CLIMATE CONTROL HEATING & AIR CONDITIONING INC.

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

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

It is ne	ereby understood and	policy.
	WC990001BFL	DECLARATIONS PAGE
	WC00000C	WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY
	WC000308	PARTNERS, OFFICERS AND OTHERS EXCLUSION ENDORSEMENT
	WC000313	WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT
	WC000404	PENDING RATE CHANGE ENDORSEMENT
	WC000406A	PREMIUM DISCOUNT ENDORSEMENT
	WC000414A	NOTIFICATION OF CHANGE IN OWNERSHIP ENDORSEMENT
	WC000419	PREMIUM DUE DATE ENDORSEMENT
FL	WC090303	FLORIDA EMPLOYERS LIABILITY COVERAGE ENDORSEMENT
FL	WC090402A	FLORIDA EXPERIENCE RATING MODIFICATION FACTOR ENDORSEMENT
FL	WC090403C	FLORIDA TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT ENDORSEMENT
FL	WC090407	FLORIDA NON-COOPERATION WITH PREMIUM AUDIT ENDORSEMENT
FL	WC090408A	FLORIDA INSUFFICIENT FUNDS ENDORSEMENT
FL	WC090606	FLORIDA EMPLOYMENT AND WAGE INFORMATION RELEASE ENDORSEMENT
	WC990402	Participating Provision Endorsement

TOTAL COST

29,497

INFORMATION PAGE

Policy Number: AWC1203272

Insured: CLIMATE CONTROL HEATING & AIR CONDITIONING INC.

EXTENSION OF INFORMATION PAGE FOR ITEM #4 SCHEDULE OF CLASSIFICATIONS

Classifications		Code No.	Premium Basis Total Estimated Annual Remuneration	Rate Per \$100 of Remun.	Estimated Annual Premium
Sheet Metal Products Mfg Shop Only Heating, Ventilation, Air-Conditioning and	0	3076	61,795	2.93	1,811
Refrigeration Systems - Installation, Service and Repair, Shop, Yard & Drivers Salespersons, Collectors or	0	5537	1,141,801	3.40	38,821
Messengers—Outside	0	8742	401,315	0.25	1,003
Clerical Office Employees NOC	0	8810	227,276	0.13	295
Manual Premium					41,930
Total Manual Premium					41,930
Premium for Increased Limits Part Two: 1.4% (1000/1000/1000)		9812			587
Blanket Waiver 2% (\$50 Minimum)		0930			839
Safety Credit 2%		9765			-867
Drug Free Workplace Credit		9841			-2,124
Total Premium Subject To Experience Modific	ation	3041			40,365
Experience Modification 77%	ation				31,081
Premium Discount 6.2%		0063			-1,927
Terrorism Risk Insurance Act 1%		9740			183
Expense Constant		0900			160
Total FL Premium					29,497
Total FL Cost					29,497
TOTAL ESTIMATED ANNUAL PREMIUM					29,497
STATE ASSESSMENT					0

Associated Industries Insurance Company, Inc.

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

INFORMATION PAGE

Policy Number: AWC1203272

Insured: CLIMATE CONTROL HEATING & AIR CONDITIONING INC.

PAYMENT SCHEDULE

Statement Closing Date	Payment Due Date	Description	Amount Due
Closing Date		<u> </u>	
	2/10/2024	Pay Period 1 of 12	\$2,459.00
	3/10/2024	Pay Period 2 of 12	\$2,458.00
	4/10/2024	Pay Period 3 of 12	\$2,458.00
	5/10/2024	Pay Period 4 of 12	\$2,458.00
	6/10/2024	Pay Period 5 of 12	\$2,458.00
	7/10/2024	Pay Period 6 of 12	\$2,458.00
	8/10/2024	Pay Period 7 of 12	\$2,458.00
	9/10/2024	Pay Period 8 of 12	\$2,458.00
	10/10/2024	Pay Period 9 of 12	\$2,458.00
	11/10/2024	Pay Period 10 of 12	\$2,458.00
	12/10/2024	Pay Period 11 of 12	\$2,458.00
	1/10/2025	Pay Period 12 of 12	\$2,458.00
		•	Total Coat #20, 407,00

Total Cost \$29,497.00

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
	Larry Hiss	
	Lori Hiss	

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 1/1

1/1/2024

Policy No. AWC1203272

Endorsement No. 0

Insured

CLIMATE CONTROL HEATING & AIR CONDITIONING INC.

Premium \$ 29,497

Insurance Company

Associated Industries Insurance Company, Inc.

Countersigned by _____