



Enclosed you will find an annual **admitted** renewal Liquor Liability quote for National Lutheran Inc, and The Village of Orchard Ridge, Inc,. The Expiring policy number is CL 1949967D and the expiration date is 8/4/2024.

- Section I-** Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.
- Section II-** Summarizes the locations, building information, property coverages, warranties, and the corresponding classifications with the exposures and rates.
- Section III-** Lists the required coverage forms, notices, endorsements and exclusions.
- Section IV-** Offers optional coverages that are available to the applicant but are not currently included in the quote.

In addition we have included some materials that will assist in the evaluation of this offer of coverage.

- A pre-filled application that includes the information you have already provided.
- A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

For your convenience, an area on page 1 of the quote has been provided to record your requested effective date and which optional coverages you might want to include when you are ready to bind coverage.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to quote this account!

Sincerely,
Janine Berkezchuk
AMWINS ACCESS
(215) 885-7300



MLQ024Y1070

Quote is valid until 8/4/2024

Re: **National Lutheran Inc, and The Village of Orchard Ridge, Inc,**
Renewal of: CL 1949967D - Expiration Date: 8/4/2024

To:

Attn:
Commission: 11%

From: Janine Berkezhuk

janine.berkezhuk@amwins.com / (215) 885-7300

Please bind effective: _____

Insured email address: _____

Insured phone number: _____

Confirm optional coverages:

☐ Do not include any optional coverages.

☐ Include the following optional coverages

(Taxes & Fees may apply to optional premium if purchased)

☐ Option 1 - (add: \$50.00) - Waiver of Rights of Recovery

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

LIQUOR LIABILITY POLICY INFORMATION

Carrier:	United States Liability Insurance Company
Status:	Admitted
A.M. Best Rating:	A++ (Superior) - XII
Term Quoted:	Annual
Minimum Earned Premium:	25%

EACH COMMON CAUSE/AGGREGATE LIMIT	TOTAL POLICY PREMIUM
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<input type="checkbox"/> \$25,000/\$50,000	\$268
<input type="checkbox"/> \$50,000/\$100,000	\$287
<input type="checkbox"/> \$100,000/\$200,000	\$301
<input type="checkbox"/> \$300,000/\$600,000	\$343
<input type="checkbox"/> \$500,000/\$1,000,000	\$381
<input type="checkbox"/> \$1,000,000/\$2,000,000	\$457

ADDITIONAL QUOTE INFORMATION

Reduce your premium up to 5% if you utilize an identification scanner to verify the ages of your patrons.

ADDITIONAL COSTS

Wholesaler Broker Fee	\$35
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Please contact us with any questions regarding the terminology used or the coverages provided.

****Read the quote carefully, it may not match the coverages requested****

This account is subject to the following - Sections A, B and C:

Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements.

A. Prior To Bind Requirements:

- No Prior to Bind Requirements

B. Items Required Within 21 days of the inception of coverage:

- Our completed Confirmation of Material Information Form (attached) signed & dated by the Owner, Officer, Partner or Managing Member.

C. Underwriting Notes:

- Call Us! We want to work with you to retain your business!
- Quote is subject to Audit results and/or Inspection (if any).
- Your liquor liability premium can be reduced up to 5% if you utilize an identification scanner device to verify the ages of your patrons.
- Above Liquor Liability premium includes the liquor license holder as an additional insured.

II. DIRECT BILL QUOTE INFORMATION

Additional Quote Information

This renewal is eligible for direct bill. In order to add this policy to direct bill, please advise us by 7/15/2024 so that there is sufficient time to invoice the policyholder. If this renewal remains agency billed, please forward a request to bind in order to renew coverage.

III. COVERED LOCATION(S) AND CORRESPONDING CLASSIFICATIONS

Location #1 - 400 Clocktower Ridge Drive, Winchester, VA 22603

Liquor Liability Coverage

Classification	Code	Exposure	Limit	Rate	Premium
Restaurant - With Sale Of Alcoholic Beverages That Are 25% Or Less Of The Food And Alcohol Receipts Of The Restaurant	00090	\$128,800 Receipts	\$1M/\$2M	0.355	\$457

Liquor Liability Coverage Premium for Location #1: \$457

Conditions (as represented on the Liquor Policy Conditions Endorsement)

- The insured has no knowledge of more than 1 liquor liability and/or assault or battery claims or notification of potential liquor liability and/or assault or battery claims for this location arising out of occurrences within five years prior to the date the application is signed (excluding a liquor liability claim closed without payment because insured found not legally liable).
- The insured has no knowledge of more than three (3) citations, violations, charges or enforcement actions at this location within five (5) years of the date of the application. Of those three (3), no more than two (2) relate to the sale or service of alcohol or criminal activities.
- Employees or other persons are not permitted to consume alcohol during their hours of employment or service.
- Only the insured and its authorized employees or members are permitted to serve alcohol. In the alternative, the insured agrees that persons serving alcohol who are not the insured's authorized employees or members are covered under a policy of liquor liability insurance with limits greater than or equal to the limits of this policy.
- The establishment closes by 2:30 AM daily.
- Alcohol sales cease by 2:00 AM.

Please contact us with any questions regarding the terminology used or the coverages provided.

****Read the quote carefully, it may not match the coverages requested****

IV. REQUIRED FORMS & ENDORSEMENTS**Liquor Endorsements**

CG0033	(12/07) Liquor Liability Coverage Form	L-657	(01/13) Absolute Pollution Exclusion-Liability
IL0017	(11/98) Common Policy Conditions	L-816	(01/18) Amendment of Conditions - Insurance Under Two or More Coverage Forms
IL0021	(09/08) Nuclear Energy Liability Exclusion Endorsement	LLQ-100	(07/06) Amendatory Endorsement
IL0138	(10/15) Virginia Changes - Cancellation and Nonrenewal	LLQ-367	(12/06) Minimum Earned Premium Endorsement
Jacket	(07/19) Policy Jacket	LLQ-368	(08/10) Separation Of Insureds Clarification Endorsement
L-224VA	(11/10) Punitive Or Exemplary Damages Exclusion	LQ-203	(08/07) Additional Insured - Liquor License Holder
L-584Z	(03/17) Policy Conditions Endorsement	LQ-346	(09/06) Definition of Receipts
L-590	(01/04) Exclusion - New Entities	LQ-354	(10/09) Limitation of Coverage to Insured Premises
L-610VA	(11/10) Expanded Definition Of Bodily Injury	LQ-428	(03/12) Absolute Firearms Exclusion
L-618C	(09/09) Amendment Of Premium Audit Conditions	VA Notice	(01/21) Virginia Notice

V. OFFER OF OPTIONAL COVERAGE(S)

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote.

Coverage		Additional Premium
Option 1	Waiver of Rights of Recovery	\$50.00

Important Information

- If this coverage is desired, add LQ-349 Waiver of Rights of Recovery.
- Prior to adding, we will need to add the applicable additional insured form and will need to know the Name and Address of the entity seeking the waiver and their relationship to the applicant.

USLI

1190 Devon Park Drive, PO Box 6700, Wayne, PA 19087

Phone (888) 523-5545 Fax (610) 688-4391

Policy #: **CL 1949967D** Insured: **National Lutheran Inc, and The Village of Orchard Ridge, Inc,**

Expiration: **08/04/2024** Location **400 Clocktower Ridge Drive, Winchester, VA 22603**

Liquor Liability **Confirmation of Material Information Form** **for Renewal Policies Only**

If any of the following questions are answered 'YES', please submit complete details along with this application. The questions on the form apply to the Named Insured's operations as of the date indicated above and for the next 12 months.

	YES	NO
1. The current policy will be subject to an audit to ensure the premium reflects accurate food and alcohol sales. This account was underwritten last year based on annual food sales of \$1,330,100 and alcohol sales of \$128,800 . Are sales expected to increase by more than 10% over the next 12 months?	_____	_____
If yes, please specify expected sales of food \$ _____ and alcohol \$ _____	_____	_____
2. Are there changes in the named insured's organization, operation, location, receipts, financial condition, losses or other conditions that could reasonably be expected to affect eligibility and pricing of renewal coverage?	_____	_____
3. Does the Named Insured have a valid, active liquor license (if required by ordinance or law)?	_____	_____
4. Does the Named Insured feature bands (three or more members, excluding jazz bands), or a DJ with dancing?	_____	_____
If yes, specify number of times per week: _____ or times per year: _____	_____	_____
5. For Non-Profit Private, Fraternal or Social Clubs:		
a. For Non-Profit Private, Fraternal or Social Clubs only; Are same day memberships available? (If not eligible,	_____	_____
b. For Non-Profit Private, Fraternal or Social Clubs only; Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? (If not eligible, answer no.)	_____	_____
6. Does the Named Insured continue the sale, service or furnishing of alcohol past 12:00 AM?	_____	_____
7. Does the establishment close and are all patrons vacated from the premises after 12:30 AM?	_____	_____
8. If facilities are available for banquets, receptions or private affairs, is entertainment provided by the Named Insured or Leasee?	_____	_____
If yes, specify number of times per week: _____ or times per year: _____	_____	_____
9. Does the Named Insured offer any of the following: drink specials or happy hour after 9:00 PM, more than two complimentary drinks per patron per day, beer pong or other drinking games, or "all you can drink" specials?	_____	_____
10. Does the Named Insured ever sell beer or malt beverages for less than \$2.00 or win/liquor for less than \$3.00 including happy hours and specials?	_____	_____
11. Is BYOB (bring your own bottle) permitted?	_____	_____
12. Are whole bottles of liquor (other than wine) sold, served or furnished for bottle service with set ups or BYOB liquor set ups offered?	_____	_____
13. Does the Named Insured have general liability insurance less than the limits of this liquor liability policy?	_____	_____
14. Does the Named Insured use bouncers, security or doorpersons in its operations?	_____	_____
15. Are patrons under the legal drinking age permitted on the Named Insured's premises after 11:00 PM?	_____	_____

16. Has your mailing or location address changed during the last year? If so, please provide your current address.

Mailing: _____

Location: _____

17. Insured Email Address: _____

WARRANTIES: I/we warrant that the information contained herein is true and that it shall be the basis of the policy of insurance and deemed incorporated therein, should the Company evidence its acceptance of this application by issuance of a policy. I/we agree that such policy shall be null and void if such information is false or misleading in any way, as this would materially affect acceptance of a risk by the Company. I/we hereby authorize release of claim information from any insurers or their general agent. I/we warrant that premises liability coverage will be maintained at limits at least equal to the liquor liability limits during the entire term of the liquor policy. I/we agree to submit records for audit by the Company upon termination or expiration of this policy for the determination of actual gross receipts during the period of coverage, if requested.

I certify the above is true and representative to the best of my knowledge.

Signature of Owner, Officer, Partner or Managing
Member*

Title

Date

*Signing this application does not require the insurer to issue a policy of insurance or require the applicant to accept the insurance offered.

FRAUD STATEMENTS

Alabama, Arkansas, District of Columbia, New Mexico, Rhode Island and West Virginia: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Arizona Notice: Misrepresentations, omissions, concealment of facts and incorrect statements shall prevent recovery under the policy only if the misrepresentations, omissions, concealment of facts or incorrect statements are; fraudulent or material either to the acceptance of the risk, or to the hazard assumed by the insurer or the insurer in good faith would either not have issued the policy, or would not have issued a policy in as large an amount, or would not have provided coverage with respect to the hazard resulting in the loss, if the true facts had been made known to the insurer as required either by the application for the policy or otherwise.

California: For your protection California law requires the following to appear on this application. Fraud Statement: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Colorado: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.

Florida Fraud Statement: 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.

Kansas Fraud Statement: Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto may be guilty of a crime and may be subject to fines and confinement in prison.

Maine Fraud Statement: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

Maryland: Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

New Jersey Fraud Statement: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

New York Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other 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 shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Ohio Fraud Statement: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Ohio Representation Statement: By acceptance of this policy, the Insured agrees the statements in the application (new or renewal) submitted to the company are true and correct. It is understood and agreed that, to the extent permitted by law, the Company reserves the right to rescind this policy, or any coverage provided herein, for material misrepresentations made by the Insured. It is understood and agreed that the statements made in the insurance applications are incorporated into, and shall form part of, this policy. **THE INSURED UNDERSTANDS AND AGREES THAT ANY MATERIAL MISREPRESENTATION OR OMISSION ON THIS APPLICATION WILL ACT TO RENDER ANY CONTRACT OF INSURANCE NULL AND WITHOUT EFFECT OR PROVIDE THE COMPANY THE RIGHT TO RESCIND IT.**

Oklahoma Fraud Statement: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Oregon Fraud Statement: Notice to Oregon applicants: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud.

Kentucky and Pennsylvania Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other 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 such person to criminal and civil penalties.

Tennessee, Virginia and Washington Fraud Statement: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Fraud Statement (All Other States): Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.

We may need to collect certain personal information to provide you with our services and products. For information on how we store, use and protect personal information, please see our Privacy Policy accessible on our website, <https://www.usli.com/privacy-policy/>.





Bar and Restaurant Product

Do you have the right coverage?

- ▶ General liability that includes coverage for mental anguish or emotional distress
- ▶ Flexibility to provide coverage for renovations
- ▶ Coverage for your liquor liability exposure

Why choose our Bar and Restaurant product?

COVERAGE FEATURES	USLI	COMPETITORS
General liability that expands the definition of bodily injury to include mental anguish or emotional distress with no deductible		
Liquor liability coverage available		
Replacement cost coverage available		
Special cause of loss available		
Loss of income coverage including loss of rents available		
Equipment breakdown coverage including a \$250,000 food spoilage sublimit available		
Value Plus endorsement is available on accounts eligible for Special Form offering 15 valuable coverage enhancements including: water back-up, money and securities, employee dishonesty, signs, electronic data, transit and more		
Specialized claims unit with expertise in liquor liability		
Assault or battery covered on many risks		
Defense/Expense costs included outside the limits		

Insure your financial well-being with a stable company that will be there to pay your claim.



business resource center



As a policyholder through USLI, you have access to many free and discounted services that will assist you in operating and growing your business through the Business Resource Center (BRC). Consider the following services and associated cost savings when deciding where to place your insurance!

Cybersecurity

- Complimentary access to eRiskHub®, a data breach prevention and response resource that will help you understand your exposure to a data breach and the importance of a response plan
- Best practice checklists for securing personal and payment card information, plus tips on protecting against cyberattacks

Background Checks and Screenings

- Discounted background checks, including multi-court criminal database searches, county criminal searches and more (first background check is free)
- Best practices for performing a background check
- Discounted tenant and drug screenings and motor vehicle reports (MVRs)

Disaster Preparation and Recovery

- Guidance on preparing for natural disasters and severe weather
- Business planning and recovery toolkit
- Sample incident reporting form and disaster loan assistance resource

Human Resources

- Free PeopleSystems' human resources consultation helpline to be used for personnel issues, including harassment and discrimination, the Family and Medical Leave Act, disability, wage and hours regulations and more
- Online library with information, forms and articles pertaining to human resources
- Discounted HR and payroll management system by PrimePoint
- Discounted employee workplace assessment by Talogy, previously PSI Caliper
- Resources for recruiting, interviewing and terminating employees

Marketing

- Resources marketing via email and social media, capturing leads and building surveys
- Free and discounted stock imagery sites and photo and video editing programs
- Discount stationery, signage, promotional items and gifts

Property Safety

- Free workplace safety and occupational health consultation
- Tips for building maintenance, fire prevention and water safety

Industry-specific Resources For:

- Health, wellness and sports
- Hospitality, food and beverage
- Nonprofits and social services
- Residential and rental properties
- Retail and professional services
- Youth services and child care
- ... and more!



Try our cost-savings calculator to see how much you could save!

ONLINE LEARNING

Need help training your new employees?

Properly preparing new employees can be time-consuming and expensive. We offer a variety of free and discounted industry-specific training and certifications to help you save time and money!

Topics include:

- Food manager and handler safety
- Liquor safety
- CPR, first aid and concussion
- Sexual harassment
- Leadership and professional development



For a full list of vendors, discounts and resources, visit bizresourcecenter.com.



Privacy Notice At Collection

We may need to collect certain personal information to provide you with our services and products. For information on how we store, use and protect personal information, please see our Privacy Policy accessible on our website, <https://www.usli.com/privacy-policy/>.

BUSINESS RESOURCE CENTER



Did you know that as a policyholder through USLI, you have access to many services through our Business Resource Center that will assist you in growing and protecting your business?

Be sure to consider the following additional services and associated cost savings when making your decision where to place your insurance!

Human Resource Services

FREE & UNLIMITED access to a Human Resource Specialist Helpline and 24/7 access to an online library of Human Resource information that can provide assistance in areas such as:

- Wage and Hour Regulations
- Harassment and Discrimination
- Family and Medical Leave Act
- Americans with Disabilities Act
- Affordable Care Act

This service could save you hundreds of dollars in consultant fees while also reducing your exposure to Employment Practices Liability claims!

This service is provided by People Systems, a nationally recognized leader in helping businesses limit liability and improve productivity.

Workers Compensation Resource Services

FREE & UNLIMITED access to a Workers Compensation Specialist Helpline used to answer questions such as:

- What should I do when an accident occurs?
- What are my rights as an employer in the case of an accident?
- Is this considered Workers Compensation or disability?

Responding quickly and appropriately when accidents occur can save you thousands of dollars in future Workers Compensation premiums!

Background Check & Recruiting Services

Background Checks - First one is FREE and then pricing for each additional screen starts at \$10, excluding court and/or state fees that may apply

Each includes the following:

- Criminal Background Check
- Social Security Number Verification
- Address History Check
- Registered Sex Offender Check

Recruiting Assistance Services (discounted rates)

- Drug Screenings
- Motor Vehicle Reports
- Caliper Personality Profiles

These services can assist you in hiring quality people to help grow your business while reducing your exposure to loss!

