



AXIS INSURANCE

ADVISORY NOTICE TO POLICYHOLDERS

EXCLUSION – PERFLUOROALKYL AND POLYFLUOROALKYL SUBSTANCES (PFAS)

This Notice does not form part of your policy. No coverage is provided by this Notice nor can it be construed to replace any provision of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided. If there is any conflict between the Policy and this Notice, **THE PROVISIONS OF THE POLICY SHALL PREVAIL.**

Carefully read your policy, including the endorsements attached to your policy.

This Notice provides information concerning the following new endorsement which applies to your renewal policy being issued by us.

PER- AND POLYFLUOROALKYL SUBSTANCES (PFAS) EXCLUSION

When this endorsement is attached to your policy, it generally excludes coverage for bodily injury, property damage and personal and advertising injury related exposures associated with perfluoroalkyl or polyfluoroalkyl substances (PFAS), including any loss, cost or expense arising out of abating, testing for, monitoring, cleaning up, or other related activities, of PFAS by any insured or by any other person or entity.

To the extent that current policy exclusions do not apply to liability arising out of PFAS, this endorsement represents a reduction of coverage.



STATEMENT OF NO LOSS

AGENCY NATIONAL INSURANCE GROUP 11142 S HARLEM AVE WORTH, IL 60482		NAMED INSURED ASL Automotive	
CONTACT NAME: MOHAMMAD FALAH		CARRIER	NAIC CODE
PHONE (A/C, No, Ext): 708-448-4600		POLICY NUMBER	
FAX (A/C, No):		APPROVED BY	
E-MAIL ADDRESS:			
CODE:	SUBCODE:		
AGENCY CUSTOMER ID:			

I CERTIFY THAT I AM NOT AWARE OF ANY LOSSES, ACCIDENTS OR CIRCUMSTANCES THAT MIGHT GIVE RISE TO A CLAIM UNDER THE INSURANCE POLICY WHOSE NUMBER IS SHOWN ABOVE, FROM 12:01 AM ON 10/9/25 TO 10/22/2025 08:52PM UTC.

CANCELLATION DATE

DATE AND TIME SIGNED

OLGA LENSKEY

APPLICANT'S SIGNATURE

RECEIPT

\$ _____ AMOUNT RECEIVED BY: MOE FALAH
PRODUCER
MOE FALAH 10/22/2025 08:53PM UTC
WITNESS DATE AND TIME

ACORD 37 (2008/01)

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Clear All

COMMERCIAL AUTO ABUSE OR MOLESTATION ENDORSEMENTS AND AUTO HACKING EXPENSE COVERAGE ENDORSEMENT ADVISORY NOTICE TO POLICYHOLDERS

This Notice does not form part of your policy. No coverage is provided by this Notice nor can it be construed to replace any provision of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided. If there is any conflict between the Policy and this Notice, **THE PROVISIONS OF THE POLICY SHALL PREVAIL.**

Carefully read your policy, including the endorsements attached to your policy.

This Notice provides information concerning the following new endorsements which applies to your renewal policy being issued by us. The endorsements may reduce, broaden or reinforce coverage. This Notice does not reference every change, including editorial changes, made in your policy.

Broadenings Of Coverage

CA 04 65 – Auto Hacking Expense Coverage

This endorsement generally addresses coverage for certain expenses to diagnose, restore or repair an auto after a hacker attack, with the option to include potential demands for ransom payments.

Reductions Of Coverage

CA 27 21 – Abuse Or Molestation Exclusion For General Liability And Acts, Errors Or Omissions Liability Coverages

With respect to Paragraph **A.** Bodily Injury And Property Damage Liability and Paragraph **B.** Personal And Advertising Injury Liability of Section **II** – General Liability Coverages and Section **III** – Acts, Errors Or Omissions Liability Coverages of the Auto Dealers Coverage Form, this endorsement generally excludes liability arising out of actual, alleged or threatened abuse or molestation, including but not limited to sexual abuse or sexual molestation, of any person committed by anyone, or the negligent employment, investigation, supervision, reporting to the proper authorities, or failure to so report, or retention of a person for whom any insured is or ever was legally responsible and whose conduct would be otherwise excluded under the endorsement.

CA 28 03 – Abuse Or Molestation Exclusion For Covered Autos Liability Exposure

With respect to Covered Autos Liability Coverage, this endorsement generally excludes liability arising out of actual, alleged or threatened abuse or molestation, including but not limited to sexual abuse or sexual molestation, of any person committed by anyone, or the negligent employment, investigation, supervision, reporting to the proper authorities, or failure to so report, or retention of a person for whom any insured is or ever was legally responsible and whose conduct would be otherwise excluded under the endorsement.

Broadenings And Reductions Of Coverage

CA 27 22 – Sexual Abuse Or Sexual Molestation Exclusion For General Liability And Acts, Errors Or Omissions Liability Coverages

With respect to Paragraph **A**. Bodily Injury And Property Damage Liability and Paragraph **B**. Personal And Advertising Injury Liability of Section **II** – General Liability Coverages and Section **III** – Acts, Errors Or Omissions Liability Coverages of the Auto Dealers Coverage Form, this endorsement generally excludes liability arising out of actual, alleged or threatened sexual abuse or sexual molestation of any person committed by anyone, or the negligent employment, investigation, supervision, reporting to the proper authorities, or failure to so report, or retention of a person for whom any insured is or ever was legally responsible and whose conduct would be otherwise excluded under the endorsement.

The attachment of this endorsement will result in a reduction in coverage, unless this endorsement replaces **CA 25 28 – Abuse Or Molestation Exclusion For General Liability Coverages** on a policy in which case it may result in a partial broadening of coverage with respect to Section **II** – General Liability Coverages.

CA 27 23 – Sexual Abuse Or Sexual Molestation Liability Coverage

When this endorsement is attached to your policy, a sexual abuse or sexual molestation exclusion is applied to Paragraph **A**. Bodily Injury And Property Damage Liability and Paragraph **B**. Personal And Advertising Injury Liability of Section **II** – General Liability Coverages and Section **III** – Acts, Errors Or Omissions Liability Coverages of the Auto Dealers Coverage Form. Coverage is provided by means of a separate coverage grant with respect to liability for injury caused by an act of sexual abuse or sexual molestation, defined as the actual, alleged or threatened sexual abuse or sexual molestation of any person committed by anyone, or the negligent employment, investigation, supervision or retention of a person for whom any insured is or ever was legally responsible and whose conduct would constitute sexual abuse or sexual molestation as described in the endorsement.

Coverage applies with respect to injury caused by an act of sexual abuse or sexual molestation or interrelated acts committed in the coverage territory during the policy period, including any continuation, change or resumption of that injury after the end of the policy period.

Coverage provided by this endorsement is subject to the Sexual Abuse Or Sexual Molestation Liability Aggregate Limit shown in the Schedule of the endorsement.

With respect to sexual abuse or sexual molestation liability, if this endorsement replaces **CA 25 28 – Abuse Or Molestation Exclusion For General Liability Coverages** on a policy, it will result in a broadening of coverage. Otherwise, attachment of this endorsement may result in a restriction of coverage in some aspects, but broader coverage in other aspects.

CA 27 24 – Sexual Abuse Or Sexual Molestation Of Any Person Committed By The Insured Liability Coverage

When this endorsement is attached to your policy, a sexual abuse or sexual molestation exclusion is applied to Paragraph **A**. Bodily Injury And Property Damage Liability and Paragraph **B**. Personal And Advertising Injury Liability of Section **II** – General Liability Coverages and Section **III** – Acts, Errors Or Omissions Liability Coverages of the Auto Dealers Coverage Form. Coverage is provided by means of a separate coverage grant with respect to liability for injury caused by an act of sexual abuse or sexual molestation, defined as the actual, alleged or threatened sexual abuse or sexual molestation of any person committed by the insured, or the negligent employment, investigation, supervision or retention of a person for whom any insured is or ever was legally responsible and whose conduct would constitute sexual abuse or sexual molestation as described in the endorsement.

Coverage applies with respect to injury caused by an act of sexual abuse or sexual molestation or interrelated acts committed in the coverage territory during the policy period, including any continuation, change or resumption of that injury after the end of the policy period.

Coverage provided by this endorsement is subject to the Sexual Abuse Or Sexual Molestation Liability Aggregate Limit shown in the Schedule of the endorsement.

With respect to sexual abuse or sexual molestation liability, if this endorsement replaces **CA 25 28 – Abuse Or Molestation Exclusion For General Liability Coverages** on a policy, it will result in a broadening of coverage. Otherwise, attachment of this endorsement may result in a restriction of coverage in some aspects, but broader coverage in other aspects.

SUPPLEMENTAL SPOUSAL LIABILITY COVERAGE NOTICE

New York State law requires an insurer issuing or delivering a policy that satisfies the requirements of New York Vehicle and Traffic Law article 6 to provide supplemental spousal liability insurance, upon written request of an insured and payment of the premium for such insurance in the policy.

Supplemental spousal liability insurance provides bodily injury liability coverage under a motor vehicle insurance policy when a person is injured or killed in a motor vehicle accident caused by the negligence of the person's spouse.

This coverage is included within the policy's bodily injury liability limits and does not increase the amount of those limits.

If you do not request this coverage in writing, then the injured or deceased spouse would not be covered under the bodily injury liability coverage in the policy.

The additional premium for supplemental spousal liability insurance is \$35.00. If you wish to request this coverage, please sign below.

I hereby request supplemental spousal liability insurance.

OLGA LENSKEY

SIGNATURE OF FIRST NAMED INSURED

10/22/2025 08:52PM UTC

DATE



DMI INSURANCE SERVICES, INC.
Automotive Program Specialists
www.dmi-insurance.com
License No.: 0702248

August 7, 2025

National Insurance Group, Inc.
Mohammad Falah

RE: ASL Automotive, LLC
DBA ASL Automotive
Dealer Super Protector+ Renewal Quote #123073

Dear Mohammad:

Please find attached the renewal quote for ASL Automotive, LLC, which is valid until 10/9/2025. Here is a summary of the proposal:

Insured: ASL Automotive, LLC

Carrier: AXIS Insurance Company

Renewal Policy Period: From 10/9/2025 to 10/9/2026

Premiums and Fees:	Premium:	\$3,332.00
	NYMVL Enforcement Fee:	\$0.00
	Total:	\$3,332.00

IMPORTANT! PLEASE READ THOROUGHLY

The attached renewal proposal is only a summary of the insurance protection being offered. Coverages listed in this proposal are offered only if shown as included or a limit is displayed. A quote document does not include all of the provisions of an insurance policy that would be issued. This signed document and renewal proposal shall be made part of the application used in applying for this insurance and only the coverages and deductibles shown therein with a limit displayed or shown as included are being offered for purchase. The accepted renewal proposal replaces any indication, request, or omission of coverage contained within any application used in applying for insurance.

If property coverage has been offered: Your policy will contain a coinsurance clause applicable to Buildings and Business Personal Property. All property must be insured to at least 90% of the replacement cost value. An Independent Loss Control Company may evaluate the Building and Business Personal Property limits and if found to be underinsured the Insurance Carrier may endorse your policy to revise the property limits and issue an additional premium notice. An operable central reporting alarm is required for theft coverage. An alarm warranty will be issued with your policy.

Policyholder attests: I/We understand that a renewal of insurance and the premium quoted is based on all Motor Vehicle Records being acceptable to the company. Unacceptable Motor Vehicle Records will result in driver exclusion(s), premium increase, and/or cancellation of an issued policy. I/We further declare that I/We will notify the insurance company of all employee and driver additions or deletions as they occur. Failure to report employees or independent contractors whether or not they drive can result in a coverage dispute and/or cancellation of the policy applied for.

APPLICANT'S CONSENT / ADVISORY / WARRANTIES

APPLICANT'S INITIALS

ANIMAL EXCLUSION I hereby consent to and accept an Animal Endorsement which will change the policy applied for.	X <u>Ol</u>
POLICY or SERVICE FEE (If Applicable. See quotation.) I hereby consent to and accept a fully earned policy or service fee of up to \$250 for the purpose of having the insurance company arrange loss control consultation for my business. This consent is applicable to new policies and all renewals and is in effect until revoked in writing.	X <u>Ol</u>
I understand that the insurance applied for within this application: DOES NOT INCLUDE WORKERS COMPENSATION THAT IS REQUIRED BY LAW.	X <u>Ol</u>

OLGA LENSKEY
INSURED'S SIGNATURE OF ACCEPTANCE

10/22/2025 08:52PM UTC

DATE

MOE FALAH
BROKER'S SIGNATURE OF ACKNOWLEDGEMENT & COMPLETION

10/22/2025 08:53PM UTC

DATE

Dealer Super Protector+ Renewal Quote

Page 1 of 3

Presented by: **AXIS Insurance Company**

Producer: National Insurance Group, Inc.

Attention: **Mohammad Falah**

Prepared Especially For:

Proposal No 123073

Policy Number

Fax No.

Today's Date: 08/07/2025

Policy Expiration: 10/09/2025

ASL Automotive

Base Premium: \$ 3,332.00

See cover letter for any applicable fees.

Locations Insured

- 1 216 W Bentwood Ct, Albany, NY, 12203
- 2 1815 Jim Walter Dr, Texarkana, AR, 71854

<u>Limits:</u>	<u>Non-Franchised Auto Dealer Coverages (ADCF):</u>
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\$ 100,000	Covered Autos Liability Bodily Injury & Property Damage - Each Accident(\$500 Deductible)
\$ 100,000	General Liability Bodily Injury & Property Damage - Each Accident(\$500 Deductible)
\$ Excluded	Damage to Premises Rented to You - Any One Premises
\$ 100,000	Personal And Advertising Injury Liability - Any One Person Or Organization
\$ 100,000	General Liability Aggregate
\$ 100,000	Products And Work You Performed Aggregate
\$ Excluded	Locations And Operations Medical Payments - Any One Person
\$ 50,000	Uninsured/Underinsured Motorists Bodily Injury - Coverage is NonStacked
\$ 50,000	Personal Injury Protection (PIP Deduct: \$Zero)
\$ Included	Broadened PIP for Named Individual(s)

No. of Dealer Plates or Tags 3

No. of Vehicles Registered: Other

Dealers Physical Damage Coverage **\$60,000 maximum per auto or the limit of insurance, whichever is less.**

100% co-insurance clause applies. Dealers Physical Damage coverage limit must be equal to 100% of the value of all inventory vehicles and other owned vehicles at the time of a loss.

Loc. No.

Limit:

Includes:

Perils:

Deductibles:

Drive Other Car

Named Drivers:

Garagekeepers Coverage

Loc. No.

Limit:

Deductible: \$

Coverage Option:

Collision

Limit:

Deductible:

Specified Vehicles**Commercial General Liability****NOT QUOTED**

\$ Each Occurrence Limit
 \$ General Aggregate Limit
 \$ Personal & Advertising Limit
 \$ Fire Damage (any one fire)
 \$ Medical Expenses
 \$ Deductible

Property Coverages**NOT QUOTED****Loc. No.****Reported Owners/Employees/Drivers/Independent Contractors:**

Name	Date of Birth	License #	State	Furnished Car?	F/T / P/T	Status
Olga Lensky	06/19/1970	649229052	NY	YES	FullTime	Approved
Igor Lensky	05/19/1970	454088427	NY	YES	FullTime	Approved
Samuel Lensky		Not Approved to Drive		NO		Not Approved

Driver Exclusions are continued and apply to all renewals of this policy.

PLEASE REMEMBER TO ADVISE YOUR BROKER OF ANY EMPLOYEES HIRED OR TERMINATED

Renewal Subject To The Following:

This is your renewal proposal. The total annual premium including fees (if applicable) is noted on page 1. This renewal proposal is based on the same coverages, exposures, drivers/employees motor vehicle records and autos as the expiring policy or per your renewal instructions. Exception: Conditional renewals may have changes already made in the proposal. If so, a formal Conditional Renewal Notice has already been mailed. Any change in exposure can void this quote or change the premium quoted.

Please verify the following for accuracy. If any changes are to be made, please contact our office for a revision and we will prepare and forward a revised renewal proposal to your office.

1. Coverages limits and deductibles.

2. All owners, their spouses and all employees whether they drive or not and their Motor Vehicle Record information must be disclosed to the carrier.

I/We further declare that I/We will notify the company of all employee and driver additions or deletions as they occur. Failure to report employees whether or not they drive and all employee and driver changes as they occur can result in a coverage dispute and/or cancellation of the policy applied for.

OLGA LENSKY

10/22/2025 08:52PM UTC

APPLICANT'S SIGNATURE OF ACCEPTANCE

DATE

MOE FALAH

10/22/2025 08:53PM UTC

BROKER'S SIGNATURE OF ACKNOWLEDGEMENT & COMPLETION

DATE

Expiring Premium: \$3,019

Risk is rated with 1 owner & 1 spouse.

Quote is based on acceptable MVRs and no losses in the past year.

Business exclusion will carry forward.

Items required at time of binding:

1. Renewal Propoal
2. Unlicensed Driver Statement for Samuel Lensky

If accepted, a renewal will contain 'Abuse or Molestation Exclusion for Covered Autos Liability, Abuse or Molestation Exclusion for General Liability And Acts, Errors Or Omissions Liability Coverages". Please see important attached policyholder notice advising of the same. Please make sure this time sensitive notice is communicated to the insured.

If accepted, a renewal will contain 'Per and Polyfluoroalkyl Substances (PFAS) exclusion'. Please see important attached policyholder notice advising of the same. Please make sure this time sensitive notice is communicated to the insured.

Thank you for your business!

Dillon Battaglia
Underwriter



DMI INSURANCE SERVICES, INC.
Automotive Program Specialists
www.dmi-insurance.com

NAMED INSURED: ASI Automotive

EFFECTIVE DATE 10/22/25

Unlicensed Driver Statement

Samuel Lensky does not have a valid driver's license and is not allowed to drive a covered auto under any circumstances.

Should he/she acquire a driver's license while my policy is active, I must immediately notify my agent/broker of his/her licensing status and will be required to provide my agent/broker with proof of a personal auto policy or pay additional premium to add him/her to my policy.

Should a loss occur as a result of him/her driving a covered auto, I understand that my policy will be cancelled for misrepresentation and the loss will not be covered.

INSURED'S SIGNATURE OLGA LENSKY

DATE 10/22/2025 08:52PM UTC

INSURED'S NAME OLGA LENSKY

TITLE Owner

Document Completion Certificate

Document Reference : bc29e73b-09b6-4e14-84f6-edf49421fb09
Document Title : ASL AUTOMOTIVE
Document Region : Northern Virginia
Sender Name : MOHAMMAD FALAH
Sender Email : moefalah@nationalinsurancegroup.net
Total Document Pages : 12
Secondary Security : Not Required
Participants

1. OLGA LENSKY (olgalensky@yahoo.com)
2. MOE FALAH (moefalah@nationalinsurancegroup.net)

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10/22/2025 04:49PM US/Eastern	Sender requested participant signing link for olgalensky@yahoo.com.
10/22/2025 04:50PM US/Eastern	Email sent to OLGA LENSKY (olgalensky@yahoo.com).
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