



Andrew Schmitz Agency
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Business Owners Policy (BOP) Quote

Clear Day Professional Cleaning, Inc

Hi Justin Brooks,

We are happy to present you with your requested insurance quote. Please review this document and reach out directly to us if you have any questions or would like to move forward with the quote.

Line of Business:	Business Owners Policy (BOP)
Carrier:	Starr
Premium:	\$1,291.00
Taxes:	\$1.00
Service Fee:	\$250.00
Total Cost:	\$1,542.00

Coverage Overview

General Liability

Coverage	Limits
General Liability - Each occurrence:	\$1,000,000
General Liability - Aggregate:	\$2,000,000
Products Completed Operations Aggregate:	\$2,000,000
Damage to Premises Rented to You:	\$100,000
Medical Expense:	\$5,000

Optional Coverages

Coverage	Included / Excluded
Employee Benefits Liability Coverage:	Excluded
Employment-Related Practices Liability Endorsement:	Excluded
Primary and Noncontributory Coverage:	Included
Non Owned and Hired Auto Coverage:	Excluded
Equipment Breakdown:	Excluded
Terrorism:	Included



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Business Property

Coverage	Limits
Business and Personal Property:	\$5,000
Property Deductible:	\$500
Building Coverage:	Excluded
Wind or Hail Deductibles:	0%
Electronic Data:	\$10,000
Computer Operations Interruption:	\$10,000
Accounts Receivable - On Premises:	\$10,000
Accounts Receivable - Off Premises:	\$5,000
Valuable Papers & Records - On Premises:	\$10,000
Valuable Papers & Records - Off Premises:	\$5,000
Water Backup and Sump Overflow Limit:	\$5,000
Water Backup - Business Income / Extra Expense:	\$5,000
Outdoor Property:	\$2,500
Money and Securities - On Premises:	\$1,000
Money and Securities - Off Premises:	\$1,000
Fungi, Dry Rot and Bacteria:	\$15,000
Debris Removal:	\$10,000
Bail bonds:	\$250
Business Income from Dependent Properties:	\$5,000
Business Income Ordinary Payroll:	60.0
Fire Department Service Charge:	\$2,500
Fire Extinguisher Recharge:	\$5,000
Forgery or Alteration:	\$2,500
Increased Cost of Construction:	\$10,000
Lost Wages - Claims Investigation:	\$250
Money orders and Counterfeit Money:	\$1,000
Newly Acquired Property - Building:	\$250,000
Personal Effects:	\$2,500
Personal Property Off Premises:	\$10,000
Pollution Clean-up:	\$10,000
Business Personal Property Temporarily in Portable Storage Units:	\$10,000
Newly Acquired Property - Personal Property:	\$100,000



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Payment Options

A) Full payment:	\$1,542.00
B) Downpayment:	\$509.20
+10 monthly payments:	\$118.90

Disclaimer

Information contained in this summary is intended to provide you with a brief overview of the coverages provided for reference purposes only. It is not intended to provide you with all policy exclusions, limitations, and conditions.



Starr Indemnity & Liability Company

A Member of Starr Companies

Dallas, Texas
Administrative Office: 399 Park Avenue, New York, NY 10022
(866) 519-2522

Date: 02-18-2021

Producer Name:

Thank you for considering Starr Companies for your commercial insurance needs. We are pleased to offer this quote proposal for the captioned named insured:

Named Insured: Clear Day Professional Cleaning, Inc

Quote Number: 206077

Effective Date: 02-22-2021

Final Premium: \$ 1291.00

Plus Terrorism Coverage: \$ 0.00

Plus Taxes and Surcharges: \$ 1.00

Total Policy Premium: \$ 1292.00

OFAC NOTICE: *This proposal does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from offering or providing insurance. To the extent any such prohibitions apply, the proposal is void ab initio.*

This quote is valid for 30 days and is subject to:

- No backdating permitted. Unless a future effective date is requested, quote will reflect the date the quote was generated.
- Any subsequent rate changes.



Starr Indemnity & Liability Company

STARR BUSINESSOWNERS QUOTE PROPOSAL

Dallas, TX

Administrative Office: 399 Park Avenue, 8th Floor, New York, NY 10022

Quote Number: 206077	Producer Name:
Named Insured: Clear Day Professional Cleaning, Inc	
Mailing Address:	
Policy Period: FROM 02-22-2021 TO 02-22-2022 At 12:01 AM Standard Time at your mailing address shown above.	

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

Description Of Business
Form Of Business:
<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Limited Liability Company
<input type="checkbox"/> Organization, including a corporation (but not including a partnership, joint venture or limited liability company)
Business Description:

The Total Annual Premium is \$ 1,292 (a policywriting minimum premium of \$500. applies)
Advance Premium \$
Policies Subject To Premium Audit:
Audit Period: <input type="checkbox"/> Annually <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly

Endorsements Attached To This Policy
Refer to Schedule of Forms and Endorsements in this proposal

Premises Information		
Premises #	Building #	Premises Address:
1	1	14957 Pixie Point Circle Southeast, Prior Lake, MN 55372

Mortgageholder		
Premises #	Building #	Mortgageholder Name and Address:

SECTION I – PROPERTY

Property Coverage Limits of Insurance						
Premises #	Building #	Type Of Property (Building Or Business Personal Property)	Actual Cash Value Bldg. Option (Yes Or No)	Automatic Increase Bldg Limit (%)	Business Personal Property Seasonal Increase (%)	Limit of Insurance*
1	1	Business Personal Property				\$ 10,000

*Includes Automatic Increase Building Limit Percentage

Deductibles (Apply Per Location, Per Occurrence)			
Premises #	Property Deductible	Optional Coverage Deductible (Other Than Equipment Breakdown Protection Coverage)	Windstorm Or Hail Percentage Deductible
1	\$ 500	\$ 500	Not Applicable

Blanket Insurance	
Type of Property to be Blanketed	Blanket Limit of Insurance

Additional Coverages – Optional Higher Limits / Extended Number of Days (Per Policy)		
Coverage	Additional Premium	Limit Of Insurance/Extended Number Of Days
Business Income From Dependent Properties	\$ 0	\$ 5,000
Business Income – Extended Number Of Days For Ordinary Payroll Expenses	\$ 0	60 Days
Extended Business Income – Extended Number Of Days	\$ 0	60 Days
Electronic Data – Increased Limit	\$ 0	\$ 10,000
Forgery Or Alteration	\$ 0	\$ 2,500
Interruption Of Computer Operations – Increased Limit	\$ 0	\$ 10,000

Additional Coverage – Business Income From Dependent Properties		
Secondary Dependent Properties	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Additional Coverage – Business Income – Ordinary Payroll Additional Exemptions		
Coverage	Exempt Job Classifications	Exempt Employees
Business Income		

Additional Coverage – Optional Higher Limits (Per Premises)			
Coverage	Premises #	Additional Premium	Limit Of Insurance
Fire Department Service Charge	1	\$ 0	\$ 2,500

Coverage Extensions – Optional Higher Limits

Coverage	Additional Premium	Limit Of Insurance
Accounts Receivable	\$ 0	\$ 10,000
Business Personal Property Temporarily In Portable Storage Units	\$ 0	\$ 10,000
Outdoor Property	\$ 0	\$ 2,500
"Valuable Papers and Records"	\$ 0	\$ 10,000
Other	\$	\$

Optional Coverages Per Premises (Applicable only if an "X" is shown in the boxes below)

Coverage	Premises #	Building #	Limit Of Insurance
<input type="checkbox"/> Burglary And Robbery (BP 10 09 Named Peril Endorsement) Money and Securities (Amount included when Burglary And Robbery option is selected)			\$ Inside the Premises \$ Outside the Premises
<input type="checkbox"/> Employee Dishonesty			\$ Per Occurrence
<input checked="" type="checkbox"/> Money & Securities	1	1	\$ 1,000 Inside the Premises \$ 1,000 Outside the Premises
<input type="checkbox"/> Outdoor Signs			\$ Per Occurrence
<input type="checkbox"/> Other			\$

Optional Coverage – Equipment Breakdown Protection Coverage

Premises #	Building #	Limit of Insurance	Optional Deductible	Optional Revised Time Deductible

Earthquake / Volcanic Action – Coverage is only applicable if BP 10 03 is attached to this Policy

Premises #	Building #	Earthquake/Volcanic Action Percentage Deductible

Theft Limitations – Optional Higher Limits (Per Policy)

Description of Property	Additional Premium	Limit of Insurance

SECTION II – LIABILITY AND MEDICAL EXPENSES

Each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to **Section II – Liability** in the Businessowners Coverage Form and any attached endorsements.

Coverage	Limit Of Insurance
Liability & Medical Expenses	\$ 1,000,000 Per Occurrence
Medical Expenses	\$ 5,000 Per Person
Damage To Premises Rented To You	\$ 100,000 Any One Premises
Other Than Products/Completed Operations Aggregate	\$ 2,000,000
Products/Completed Operations Aggregate	\$ 2,000,000

Deductible	
Optional Property Damage Liability Deductible:	No Deductible
<input type="checkbox"/> Per Claim (Refer to BP 07 03); or	<input type="checkbox"/> Per Occurrence (Refer to BP 07 04)

Optional Coverages (Applicable only if an "X" is shown in the box below)		
Coverage	Limit of Insurance	
<input type="checkbox"/> Broadened Coverage For Damage To Premises Rented to You (Refer to BP 04 55)	\$	Per Occurrence
<input type="checkbox"/> Motels – Liability for Guests' Property (Optional Limits – Refer to BP 07 10)	\$ \$	Per Occurrence Per Guest
<input type="checkbox"/> Motels–Liability for Guests' Property In Safe Deposit Boxes (Refer to BP 07 11)	\$	Per Occurrence
<input type="checkbox"/> Self-storage Facilities–Customer Goods Legal Liability(Optional Increased Limits - Refer to BP 07 12)	\$	Per Occurrence



QUOTE NUMBER: 206077

SCHEDULE OF FORMS AND ENDORSEMENTS

FORM NUMBER AND EDITION DATE	FORM TITLE
SILC IL 0001 (0118)	Starr Indemnity & Liability Company Cover Page
SIBP DS 01 (0720)	Starr Businessowners Declarations
SIBP DS 02 (0713)	Schedule of Forms and Endorsements
SIBP DS 03 (0713)	Schedule of Taxes, Surcharges or Fees
BP 00 03 07 13	Businessowners Coverage Form
BP 01 25 05 20	Minnesota Changes
BP 04 17 01 10	Employment-Related Practices Exclusion
BP 04 39 07 02	Abuse Or Molestation Exclusion
BP 04 53 07 13	Water Back-Up And Sump Overflow
BP 05 01 07 02	Calculation Of Premium
BP 05 17 01 06	Exclusion - Silica Or Silica-Related Dust
BP 05 24 01 15	Exclusion Of Certified Acts Of Terrorism
BP 05 41 01 15	Exclusion Of Certified Acts Of Terrorism And Exclusion Of Other Acts Of Terrorism Committed Outside The United States
BP 05 77 01 06	Fungi Or Bacteria Exclusion (Liability)
BP 07 01 09 19	Contractors' Installation, Tools And Equipment Coverage
BP 07 03 01 06	Business Liability Coverage - Property Damage Liability Deductible (Per Claim Basis)
BP 10 05 07 02	Exclusion - Year 2000 Computer-Related And Other Electronic Problems
BP 14 78 07 13	Exclusion Of Loss Due To By-Products Of Production Or Processing Operations (Rental Properties)
BP 14 86 07 13	Communicable Disease Exclusion
BP 14 88 07 13	Primary and Noncontributory Other Insurance Condition
BP 14 91 07 13	Amendment Of Personal And Advertising Injury Definition
BP 15 04 05 14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - With Limited Bodily Injury Exception
BP 15 30 09 19	Cannabis Property Exclusion
BP 15 32 09 19	Cannabis Liability Exclusion
SIBP-0001 (0115)	Disclosure Pursuant To Terrorism Risk Insurance Act
SIBP-0004 (0910)	Pollutants Definition Amendment
SIBP-0010 (0720)	Absolute Asbestos Liability Exclusionary Endorsement
SIBP-0011 (0720)	Absolute Lead Liability Exclusionary Endorsement
SIBP-0030 (0720)	Exclusion - Snow and Ice Removal
SIBP-0034 (0720)	Exclusion - Roofing operations
SIBP-0039 (0720)	Residential Construction Exclusionary Endorsement



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SCHEDULE OF TAXES, SURCHARGES OR FEES

The following tax(es), surcharge(s) and/or fee(s) are included in the Total Annual Premium shown in this quote:

<u>State</u>	<u>Description</u>	<u>Amount</u>
MN	Fire Safety Surcharge	\$ 1