tmorgan@potomacinsurance.net

Enclosed you will find **an admitted** Commercial Liability quote for Direct Professional Services, LLC. The quote number is MSE017S1818.

- **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- Covers the events, locations, dates and corresponding classifications with exposures.
- 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 and notates missing information with a black arrow in the margin
- 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 buy 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, TaNoah Morgan POTOMAC INSURANCE EXCHANGE

tmorgan@potomacinsurance.net

MSE017S1818

Quote is valid until 2/10/2018

To: Direct Professional Services, LLC

Please bind effective:
Confirm optional coverages: Do not include any optional coverages. Include the following optional coverages from Section V (Taxes & Fees may apply to optional premium if purchased) Option 1 - Set-up and/or Take-down Coverage Option 2 - (add: \$50) - Rain Date Coverage Option 3 - (add: \$100) - Banner Coverage Option 4 - Terrorism Coverage
Signature:

From: TaNoah Morgan

tmorgan@potomacinsurance.net

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

COMMERCIAL LIABILITY POLICY INFORMATION	
Carrier:	United States Liability Insurance Company
Status:	Admitted
A.M. Best Rating:	A++ (Superior) - X
GENERAL LIABILITY OCCURRENCE/AGGREGATE	GENERAL LIABILITY PREMIUM
\$300,000/\$300,000	\$233
\$300,000/\$600,000	\$240
\$500,000/\$500,000	\$273
\$500,000/\$1,000,000	\$279
\$1,000,000/\$1,000,000	\$319
\$1,000,000/\$2,000,000	\$325
\$1,000,000/\$3,000,000	\$329
ADDITIONAL QUOTE INFORMATION	
Policy Minimum Premium: \$220	
Personal & Advertising Injury: Same as the Occurrence Limit	
Products Aggregate: See L-535	
Damages to Premises Rented: \$100,000	
Medical Payments: \$1,000	
Refer to Covered Events section for event dates covered	

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

MSE017S1818

Policy Period is 2/10/2018 to 2/12/2018

Underwriting Notes:

• Binding order must be received prior to the start of the event or no coverage will be provided.

Prior to Bind Requirements: this account is subject to the following:

Coverage cannot be bound without the following information. We may modify the terms and/or premiums quoted or rescind this quote if the information provided below or on the completed application materially affects the rating or eligibility of the risk.

• If you have not already provided the mailing address, location address and additional insured information, we will need this information in order to bind coverage.

II. COVERED EVENTS

Event #1 - 3439 Benning Road, Washington, DC 20019

Entity Type: (applicant is the organizer of the event)

Event Coverages: General Liability			
Event	Exposure	Start Date	End Date
Party / Social Event - Mardi Gras Party (applicant is the host of the event) (Liability)	350 Attendees	2/10/2018	2/10/2018

Event Coverages	Exposure	Limit	Premium
Additional Insured - Property Owner or Lessors of Premises (Liability)	1 Per Additional Insured		Included

MSE017S1818 III. REQUIRED FORMS & ENDORSEMENTS General Liability Endorsements

2110	(09/10) Service Of Suit	L-526	(01/15) Absolute War Or Terrorism Exclusion
CG0001	(12/07) Commercial General Liability Coverage Form	L-535	(03/15) Exclusion - Products-Completed Operations Hazard Other Than Food Or Beverage Products
CG2011	(04/13) Additional Insured - Managers or Lessors of Premises	L-536	(09/09) Exclusion - Participation In Athletic Activity, Physical Activity Or Sports
CG2107	(05/14) Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included	L-599	(10/12) Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
CG2109	(06/15) Exclusion – Unmanned Aircraft	L-607	(02/11) Exclusion For Climbing, Rebounding And Interactive Games And Devices
CG2136	(03/05) Exclusion - New Entities	L-608	(02/11) Exclusion For Firearms, Fireworks And Other Pyrotechnic Devices
CG2139	(10/93) Contractual Liability Limitation	L-609	(02/11) Animal Exclusion
CG2144	(07/98) Limitation Of Coverage To Designated Premises Or Project	L-610	(11/04) Expanded Definition Of Bodily Injury
CG2147	(12/07) Employment-Related Practices Exclusion	L-656	(02/06) Extension Of Coverage - Committee Members
IL0017	(11/98) Common Policy Conditions	L-686	(10/12) Absolute Exclusion for Liquor and Other Related Liability
IL0021	(09/08) Nuclear Energy Liability Exclusion Endorsement	L-729	(08/09) Exclusion - Violation Of Statutes That Govern E-Mails, Fax, Phone Calls Or Other Methods Of Sending Material Or Informat
IL0278	(09/08) District Of Columbia Changes - Cancellation And Nonrenewal	LLQ101	(08/06) Expanded Definition Of Employee
L-224	(10/10) Punitive Or Exemplary Damages Exclusion	LLQ-368	(08/10) Separation Of Insureds Clarification Endorsement
L-387	(03/06) Exclusion - Mechanical Rides	ME Jacket	(09/10) The Main Event Special Event Commercial Liability Policy Jacket
L-423	(02/11) Exclusion For Structure Collapse	SPE 300	(05/09) Special Events Property Damage Amendment
L-461	(12/11) Assault Or Battery Exclusion	SPE 312	(03/15) Who Is An Insured
L-472	(07/08) Exclusion - Injury To Performers Or Entertainers	TRIADN	(02/15) Policyholder Disclosure Notice of Terrorism Insurance Coverage

IV. 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
Option 1	Set-up and/or Take-down Coverage
Impo	rtant Information
•	this coverage is purchased, add L-563 Set-Up and/or Take-Down Coverage for Special Events
	Set-up and take-down coverage is available. If you wish to purchase, please submit the following with your ind request: dates requested, confirm no heavy machinery used during set-up and take-down (bulldozers,

backhoes, excavators and any type of industrial machinery). Note: additional premium will apply.

	Coverage		Additional Premium
Option 2	Rain Date Coverage		\$50

Important Information

• If this coverage is purchased, add L-562 Rain Date Coverage for Special Events

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

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

MSE017S1818

	Coverage	Additional Premium			
Option 3	Banner Coverage	\$100			
Impo	Important Information				
● If	this coverage is purchased, add L-788 Banner Coverage For Scheduled Special Events				
	Coverage	Additional Premium			

Option 4	Terrorism Coverage	See notes for rate information

Important Information

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for an additional premium of \$100 or 5.00% of the total policy premium, whichever is greater. When making your decision to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount, and limits in this policy applicable to losses arising from events other than acts of terrorism. If not desired attach TRIADN Disclosure Notice of Terrorism Insurance Coverage or add form NTE Notice of Terrorism Exclusion.
- The Terrorism premium shown above has been calculated as a percentage of the quoted coverages. If any coverages are added or removed at binding, the additional premium show above is subject to change.
- This coverage cannot be added mid-term.

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



Special Events Application

MSE017S1818

You or your agent provided the information used to complete the questions below. Please answer all remaining questions in the space provided. By signing this application you are warranting that all information on this application is true and correct.

I. <u>General Information</u>

Applicant's Name:	Direct Professional Services, L	LC	
Form Of Business:	Individual Corporation	Partnership VLLC Other:	
Mailing Address:			
City:		State:	Zip:
Phone Number:		Fax Number:	
Web Address:		E-mail Address:	
Coverage Desired:	General Liability	Liquor Liability	

Please advise all entities requesting to be added as Additional Insured on this policy:

Complete Name	Address	Interest
Brief Narrative of Event(s)		

Mardi Gras masquerade ball

Location Address of the Event(s) and Corresponding Classification(s) II.

Address	City	State	e Zip	
3439 Benning Road	Washington	DC	200	19
Years At Current Location:				
Event	Start Date	End Date	# of Attendees:	# of Consumers
Party / Social Event - Mardi Gras Party (applicant is the organizer of the event)	2/10/2018	2/10/2018	350	

Will the event feature fireworks?

Will the event feature firearms?

Ш. Limit of Insurance

Please select a limit:

Limits of Liability Occurrence/Aggregate

- \$500,000/\$500,000
- **\$1,000,000/\$1,000,000**
- **\$1,000,000**
- **\$1,000,000**

Additional Quote Information

Personal & Advertising Injury	Will match the Occurrence Limit				
Products Aggregate	See L-535				
Damages to Premises Rented	\$100,000.00				
Medical Payments	\$1,000.00				
General Liability Limits must be equal to or greater than Liquor Liability Limits.					

Classification

Additional Insured - Property Owner or Lessors of Premises - General Liability

Yes

🗸 No

District of Columbia Fraud Statement: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

District of Columbia Fraud Statement: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

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 may subject such person to criminal and/or civil penalties and other sanctions.

Applicant's Warranty Statement: I warrant that the information provided in this Application, and any amendments or modifications to this Application are true and correct. I acknowledge that the information provided in this Application is material to acceptance of the risk and the issuance of the requested policy by Company. I agree that any claim, incident, occurrence, event or material change in the Applicant's operation taking place between the date this application was signed and the effective date of the insurance policy applied for which would render inaccurate, untrue or incomplete, any information provided in this Application, will immediately be reported in writing to the Company and the Company may withdraw or modify any outstanding quotations and/or void any authorization or agreement to bind the insurance. Company may, but is not required, to make investigation of the information provided in this Application. A decision by the Company not to make or to limit such investigation does not constitute a waiver or estoppel of Company's rights.

I acknowledge that this Application is deemed incorporated by reference in any policy issued by Company in reliance thereon whether or not the Application is attached to the policy.

I acknowledge and agree that a breach of this WARRANTY STATEMENT is grounds for Company to declare void any policy or policies issued in reliance thereon and/or deny any claim(s) for coverage thereunder.

Applicants Signature*	:	Title:			Date:			
Brokers Signature:	(Must be Owner, Officer or Partner)	-	(Required)	Date:	· _	(Required)		
If your state requires that we have the name and address of your (insured's) authorized Agent or Broker.								
Name of Authorized Agent or Broker:								
Address:								

SUBMITTING THIS APPLICATION DOES NOT BIND THE APPLICANT TO PURCHASE INSURANCE. ACCEPTANCE OF THIS APPLICATION DOES NOT BIND THE COMPANY TO ISSUE INSURANCE.

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act ("the Act"), as amended, you have a right to purchase insurance coverage for losses arising out of acts of terrorism. *As defined in Section 102(1) of the Act*. The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security, and the Attorney General of the United States, to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

You should know that any coverage for losses caused by certified acts of terrorism is partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss covered by the federal government under the Act.

Coverage for "insured losses", as defined in the Act, is subject to the coverage terms, conditions, amounts and limits in this policy applicable to losses arising from events other than acts of terrorism.

You should know that the Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement, as well as insurers' liability, for losses resulting from certified acts of terrorism when the amount of such losses in any one calendar year exceeds \$100 billion. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

You should also know that, under federal law, you are not required to purchase coverage for losses caused by certified acts of terrorism.

REJECTION OR SELECTION OF TERRORISM INSURANCE COVERAGE

Please "X" one of the boxes below and return this notice to the Company.

I decline to purchase Terrorism Coverage. I understand that I will have no			
coverage for losses arising from acts of Terrorism.			
I elect to purchase coverage for certified acts of Terrorism for a premium of			
\$			

Note: if you do not respond to our offer and do not return this notice to the Company, you will have no Terrorism Coverage under this policy.

Applicant Name (Print)

Named Insured

Authorized Signature

Date

TRIADN (02-15)

Page 1 of 1



Special Events Product

You are vulnerable to suits alleging "Property Damage," "Bodily injury" or "Medical Payments" caused by the negligent operations or activities at your special event.

- If someone trips and falls at your affair, there is the potential you may be facing a significant lawsuit due to their injuries.
- Property damage to the venues is the most common type of claim we see on special events.
- One or several attendees could suffer from serious food poisoning and you may be responsible for their medical expenses.

DEPENDING ON THE LAWS IN YOUR STATE, YOU MAY BE HELD LIABLE FOR THE ACTIONS OF INTOXICATED OR UNDERAGE PERSONS YOU SERVED AT YOUR SPECIAL EVENT

- > The negligent service to an intoxicated or underage person can produce substantial verdicts or settlements.
- Underage drinkers make up a significant portion of alcohol-related traffic crashes.
- > You may also be held responsible for the actions of those selling/serving alcohol for you.
- Even if you are ultimately cleared of liability, it may cost thousands of dollars to defend a claim.

There are many important coverage features you should have in your Special Event Policy. Why you should place coverage with us:

Coverage Features	Our Group	Competitors' Policy	
General Liability Coverage and/or Liquor Liability Coverage available with separate limits	\checkmark	?	
Expense outside policy limits	\checkmark	?	
No deductibles	\checkmark	?	
Coverage for damage to rented premises includes other perils in addition to fire	\checkmark	?	
Property owner can be included as an Additional Insured at no additional premium	\checkmark	?	
Automatic coverage for volunteers, temporary or leased workers and committee members	\checkmark	?	
Extended coverage for events lasting past midnight at no additional premium	\checkmark	?	
Specialized Claims Team	\checkmark	?	
A.M. Best rated A++ carrier	\checkmark	?	

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

This document does not amend, extend or alter the coverage afforded by the Policy. For a complete understanding of any insurance you purchase, you must first read your Policy, Declaration Page and any Endorsements and discuss them with your Broker. A specimen policy is available from an Agent of the Company. Your actual Policy Conditions may be amended by Endorsement or affected by State Laws.