

Surplus Lines Front Page

Insured's Name: Jason Sapp

Policy #: 41-LX-065044421-1

Policy Dates: 4/28/2022 to 4/28/2023

Surplus Lines Agent's Name: Kimberley J. Stufflet

Surplus Lines Agent's Address: 3321 N. Berkley Lake Rd; Duluth, GA 30096

Surplus Lines Agent's License #: P057627

Producing Agent's Name: Seth Dotson w/ Market Finders, Inc.

Producing Agent's Physical Address: P.O. Box 6549; Louisville, KY 40206

"THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER."

"SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY."

Policy Premium: **\$1,684.00**

Policy Fee: **\$35.00**

FSLSO Fee: **\$1.03**

Taxes: **\$84.92**

EMPA COMM: **\$4.00**

CONTRACT#: L10-0359-AP
JW HOLDINGS, LLC
HANGAR LEASE BLOCK 8 LOT 4
EXPIRES: 03/31/2042

Surplus Lines Agent's Countersignature:



"THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE OR WIND LOSSES, WHICH MAY RESULT IN HIGH OUT- OF-POCKET EXPENSES TO YOU."

"THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU."

LEXINGTON INSURANCE COMPANY

A stock company
99 High Street, Boston, MA 02110
COMMON POLICY DECLARATIONS
RENEWAL DECLARATION

POLICY NO: 41-LX-065044421-1
RENEWAL OF 41-LX-065044421-0

NAMED INSURED AND MAILING ADDRESS

JASON SAPP
P.O. BOX 856
PARAGOULD, AR 72451

PRODUCER MAILING ADDRESS

93575

PREFERRED AVIATION UNDERWRITER
3321 N BERKLEY LAKE RD STE 200
DULUTH, GA 30096

POLICY PERIOD: FROM 04/28/2022 TO 04/28/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

THE NAMED INSURED IS: Individual

BUSINESS DESCRIPTION:

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

THIS POLICY CONSISTS OF THE COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.

		PREMIUM
COMMERCIAL PROPERTY	\$	1,123
COMMERCIAL GENERAL LIABILITY	\$	561
CRIME AND FIDELITY	\$	
COMMERCIAL INLAND MARINE	\$	
PROFESSIONAL LIABILITY	\$	
CYBEREDGE	\$	
	TOTAL PREMIUM	\$ 1,684
	POLICY PREMIUM	\$ 1,684.00

FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS

See Forms Schedule

NOTE: IF NO ENTRY APPEARS ON THE ABOVE ENDORSEMENTS, INFORMATION REQUIRED TO COMPLETE THE FORM WILL BE SHOWN ON THE SUPPLEMENTAL FORM DECLARATION IMMEDIATELY FOLLOWING THE APPLICABLE ENDORSEMENT.

THESE DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND ENDORSEMENTS, AND SUPPLEMENTAL FORM DECLARATION(S), IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

LEXINGTON INSURANCE COMPANY

A stock company
99 High Street, Boston, MA 02110
COMMERCIAL PROPERTY
RENEWAL DECLARATION

POLICY NO: 41-LX-065044421-1

RENEWAL OF: 41-LX-065044421-0

NAMED INSURED AND MAILING ADDRESS

JASON SAPP
P.O. BOX 856
PARAGOULD, AR 72451

PRODUCER MAILING ADDRESS

93575

PREFERRED AVIATION UNDERWRITER
3321 N BERKLEY LAKE RD STE 200
DULUTH, GA 30096

POLICY PERIOD: FROM 04/28/2022 TO 04/28/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

THE NAMED INSURED IS :Individual

BUSINESS DESCRIPTION :

NOTICE:

Your Policy Provides Coverage For A Catastrophic Ground Cover Collapse That Results In The Property Being Condemned And Uninhabitable. Otherwise, Your Policy Does Not Provide Coverage For Sinkhole Losses. You May Purchase Additional Coverage For Sinkhole Losses For An Additional Premium.

LOCATION: 1 BUILDING: 1

PROPERTY AT YOUR PREMISES

ADDRESS: DESTIN FORT WALTON AIRPORT, LOT 1, BLOCK 8 DESTIN JET WAY, DESTIN, FL 32541

BUILDING DESCRIPTION: HANGAR

PROTECTION CLASS: 3 CONSTRUCTION: NON-COMBUSTIBLE

COVERAGES PROVIDED

INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH AN AMOUNT OF INSURANCE IS SHOWN

COVERAGE	CAUSE OF LOSS	DED	COINSURANCE	AMOUNT OF INSURANCE
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PERSONAL PROPERTY COVERAGE(S)

Business Personal Property	Special Including Theft	1,000	100%	10,000
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Agreed Value: \$10,000

Exp Date: 04/28/2023

Replacement Cost

LEXINGTON INSURANCE COMPANY
COMMERCIAL PROPERTY
 RENEWAL DECLARATION

POLICY NO: 41-IX-065044421-1
INSURED: JASON SAPP

EFFECTIVE DATE: 04/28/2022
AGENT: PREFERRED AVIATION UNDERWRITER

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WINDSTORM AND HAIL		
Minimum Per Occurrence Deductible:\$2,500		
Annual Aggregate Deductible :		
LOCATION#	BUILDING#	DEDUCTIBLE
1	1	\$2,500

TERRORISM RISK INSURANCE ACT IS INCLUDED

\$11

TOTAL COMMERCIAL PROPERTY PREMIUM	\$1,123
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FORMS AND ENDORSEMENTS

APPLYING TO COMMERCIAL PROPERTY AND MADE PART OF THIS POLICY AT TIME OF ISSUE:

See Forms Schedule

NOTE: IF NO ENTRY APPEARS ON THE ABOVE ENDORSEMENTS, INFORMATION REQUIRED TO COMPLETE THE FORM WILL BE SHOWN ON THE SUPPLEMENTAL FORM DECLARATION IMMEDIATELY FOLLOWING THE APPLICABLE ENDORSEMENT.

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LEXINGTON INSURANCE COMPANY

A stock company
99 High Street, Boston, MA 02110
GENERAL LIABILITY
RENEWAL DECLARATION

POLICY NO: 41-LX-065044421-1

RENEWAL OF: 41-LX-065044421-0

NAMED INSURED AND MAILING ADDRESS

JASON SAPP
P.O. BOX 856
PARAGOULD, AR 72451

PRODUCER MAILING ADDRESS

93575

PREFERRED AVIATION UNDERWRITER
3321 N BERKLEY LAKE RD STE 200
DULUTH, GA 30096

POLICY PERIOD: FROM 04/28/2022 TO 04/28/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

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

COMMERCIAL GENERAL LIABILITY COVERAGE

LIMITS OF INSURANCE	
GENERAL AGGREGATE	\$1,000,000
PRODUCTS – COMPLETED OPERATIONS AGGREGATE	EXCLUDED
PERSONAL INJURY & ADVERTISING INJURY EACH OCCURRENCE	EXCLUDED
DAMAGE TO PREMISES RENTED TO YOU	\$1,000,000
MEDICAL EXPENSE	EXCLUDED ANY ONE PREMISES
	EXCLUDED ANY ONE PERSON

LOCATION OF ALL PREMISES YOU OWN, RENT OR OCCUPY:

1 Destin Fort Walton Airport, Lot 1, Block 8 Destin Jet Way, Destin, FL 32541

DESCRIPTION OF BUSINESS

FORM OF BUSINESS:

INDIVIDUAL

PARTNERSHIP

JOINT VENTURE

TRUST

LIMITED LIABILITY COMPANY

ORGANIZATION, INCLUDING A CORPORATION (BUT NOT INCLUDING A PARTNERSHIP, JOINT VENTURE OR LIMITED LIABILITY COMPANY)

OTHER

BUSINESS DESCRIPTION: _____

LEXINGTON INSURANCE COMPANY
GENERAL LIABILITY
 RENEWAL DECLARATION

POLICY NO: 41-LX-065044421-1
INSURED: JASON SAPP

EFFECTIVE DATE: 04/28/2022
AGENT: PREFERRED AVIATION UNDERWRITER

LOC	CLASSIFICATION	CODE	PREMIUM BASIS	EXPOSURE	PMS RATE	PDTS RATE	OTHER RATE
1	Warehouses - private (For-Profit)	68706	Square Feet	1,200			

TERRORISM RISK INSURANCE ACT IS INCLUDED

\$5

GENERAL LIABILITY PREMIUM	\$561
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FORMS AND ENDORSEMENTS
APPLYING TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT TIME OF ISSUE:
 See Forms Schedule

NOTE: IF NO ENTRY APPEARS ON THE ABOVE ENDORSEMENTS, INFORMATION REQUIRED TO COMPLETE THE FORM WILL BE SHOWN ON THE SUPPLEMENTAL FORM DECLARATION IMMEDIATELY FOLLOWING THE APPLICABLE ENDORSEMENT.

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LEXINGTON INSURANCE COMPANY

99 High Street, Boston, MA 02110

FORMS SCHEDULE

POLICY NO: 41-LX-065044421-1

RENEWAL OF: 41-LX-065044421-0

**ACCOUNT NUMBER:
NAMED INSURED AND MAILING ADDRESS**

JASON SAPP
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POLICY PERIOD: FROM 04/28/2022 TO 04/28/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

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COMMON POLICY PACKAGE		APPLICABLE COVERAGE PARTS
123112 08-21	AIG Combined Privacy Notice	General Liability, Commercial Property
125595 03-20	Terrorism Certified Acts Endorsement	General Liability, Commercial Property
89644 06-13	Economic Sanctions Endorsement	General Liability, Commercial Property
IL0003 09-08	Calculation of Premium	General Liability
IL0017 11-98	Common Policy Conditions	General Liability
IL0021 09-08	Nuclear Energy Liability Exclusion Endorsement (Broad Form)	General Liability
IL0935 07-02	Exclusion Of Certain Computer- Related Losses	Commercial Property
IL0175 09-07	Florida Changes - Legal Action Against Us	Commercial Property
IL0255 03-16	Florida Changes - Cancellation And Nonrenewal	Commercial Property
PRG 2023 05-14	Service of Suit Condition	General Liability, Commercial Property
90231 08-13	Florida Notice of Loss Control	General Liability, Commercial Property

COMMERCIAL PROPERTY FORMS	
CP0140 07-06	Exclusion Of Loss Due To Virus Or Bacteria
63940 12-04	Commercial Property Coverage Form Extension Of Supplemental Declarations
63958 06-04	Commercial Property Coverage Form Schedule Of Premises
64543 12-04	Property One Coverage Form
PRG9100 12-04	Commercial Property Coverage Part - Lexington Insurance Company Supplemental Declarations
90610 09-17	Windstorm or Hail Deductible Endorsement
97080 02-12	Amendatory Endorsement
111881 02-13	Ordinance or Law Amendatory Endorsement

Lexington Insurance Company

FORMS SCHEDULE

POLICY NO: 41-LX-065044421-1
INSURED: JASON SAPP

EFFECTIVE DATE: 04/28/2022
AGENT: PREFERRED AVIATION UNDERWRITER

COMMERCIAL PROPERTY FORMS	
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68146 03-06	Florida Amendatory Endorsement
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COMMERCIAL GENERAL LIABILITY FORMS	
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113513 03-13	Physical Abuse, Sexual Abuse or Molestation Exclusion Endorsement
62898 07-12	Radioactive Matter Exclusion
64004 07-12	ERISA Exclusion
82540 07-12	Asbestos and Silicosis Exclusion
CG0001 04-13	Commercial General Liability Coverage Form
CG2010 12-19	Additional Insured - Owners, Lessees Or Contractors - Scheduled Person Or Organization
CG2104 11-85	Exclusion - Products/Completed Operations Hazard
CG2106 05-14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-related Liability - With Limited Bodily Injury Exception
CG2132 05-09	Communicable Disease Exclusion
CG2135 10-01	Exclusion - Coverage C - Medical Payments
CG2138 11-85	Exclusion - Personal And Advertising Injury
CG2144 04-17	Limitation Of Coverage To Designated Premises, Project Or Operation
CG2145 07-98	Exclusion - Damage To Premises Rented To You
CG2147 12-07	Employment-Related Practices Exclusion
CG2149 09-99	Total Pollution Exclusion Endorsement
CG2153 01-96	Exclusion - Designated Ongoing Operations
CG0220 03-12	Florida Changes - Cancellation And Nonrenewal
58332 08-07	Total Lead Exclusion
78689 07-03	Fungus Exclusion

LEXINGTON INSURANCE COMPANY

99 High Street, Boston, MA 02110

INSTALLMENT PLAN

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RENEWAL OF 41-LX-065044421-0

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PREMIUM AMOUNT: \$1,684.00

DUE DATE **PREMIUM DUE**
04/28/2022 \$1,684