

Division of State Purchasing 4050 Esplanade Way, Suite 360 Tallahassee, FL 32399-0950

> Ron DeSantis, Governor J. Todd Inman, Secretary

The State of Florida

Department of Management Services

Invitation to Bid (ITB)

84131503 / COMMERCIAL AUTOMOBILE INSURANCE ITB No: 21-84131503-ITB

Jill Soderberg, Procurement Officer 4050 Esplanade Way, Suite 360 Tallahassee, Florida 32399-0950 850-488-7996 Jill.soderberg@dms.fl.gov

Failure to file a protest within the time prescribed in section 120.57(3), Florida Statutes, or failure to post the bond or other security required by law within the time allowed for filing a bond shall constitute a waiver of proceedings under Chapter 120, Florida Statutes.

Any protest concerning this agency decision or intended decision must be timely filed with the Department of Management Services' Agency Clerk. Protests may be filed by courier, hand delivery, or regular mail at: Department of Management Services, Office of the General Counsel, Attention: Agency Clerk, 4050 Esplanade Way, Suite 160, Tallahassee, Florida 32399-0950. Protests may also be filed by fax at 850-922-6312, or by email at <u>agencyclerk@dms.fl.gov</u>. It is the filing party's responsibility to meet all filing deadlines.

The Procurement Officer should be copied on such filings.

TABLE OF CONTENTS

1	INTRODUCTION	. 4
1.1	Timeline of Events	. 4
1.2	Definitions	. 4
1.3	Objective	. 6
1.4	Scope of Work	. 6
1.5	Term	. 6
1.6	Procurement Officer	. 6
1.7	Order of Precedence for Solicitation	. 6
1.8	Commitment to Diversity	. 7
1.9	Department's Rights to Reject Bids	. 7
2	THE ITB PROCESS	. 8
2.1	Question Submission	. 8
2.2	Addenda to the ITB	. 8
2.3	Public Opening	. 8
2.4	Special Accommodations	. 8
2.5	Mandatory Responsive Requirements	. 8
2.6	Equal Bids	. 9
2.7	Basis of Award	. 9
2.8	Electronic Posting of Notice of Intent to Award	11
2.9	Contract Formation	11
2.10	Other Requirements Following Award	11
2.10	.1 Registration with the Florida Department of State	11
2.10	.2 Florida Substitute Form W-9	11
3	RESPONDING TO THE ITB	12

3.1	General Instructions	.12
3.2	Special Instructions	.12
3.3	How to Submit a Bid in MyFloridaMarketPlace	.15
3.3.1	MFMP Registration	.15
3.3.2	MFMP Sourcing Phases	.16
3.3.3	MFMP Training	.17
3.3.4	MFMP Assistance	.17
3.4	Modification or Withdrawal of Bid	.17
3.5	Cost of Bid Preparation	.17
3.6	Independent Preparation	.17
3.7	False or Erroneous Information	.18

1 INTRODUCTION

1.1 Timeline of Events

The table below contains the Timeline of Events for this solicitation. The dates and times within the Timeline of Events are subject to change. It is the responsibility of the Bidder to check for any changes on the Vendor Bid System (VBS).

Bidders shall not rely on the MyFloridaMarketPlace (MFMP) Sourcing time clock. It is not the official submission date and time deadline. The official solicitation dates and time deadlines are reflected in the Timeline of Events.

Timeline o	of Events	
Event	Time (Eastern Time)	Date
Solicitation posted on VBS and in MFMP Sourcing		August 11, 2021
Deadline to submit questions in MFMP Sourcing	2:00 PM	August 17, 2021
Department's anticipated date of posting Q&A on VBS		August 24, 2021
Deadline to submit bid and all required documents in MFMP Sourcing	2:00 PM	September 14, 2021
Public meeting: Bid opening (non-mandatory) Conference Call # 888-585-9008 Participant Code #145-153-086 Any person requiring a special accommodation due to a disability should contact the Department's Americans with Disabilities Act (ADA) Coordinator at (850) 922-7535 or ADA.Coordinator@dms.myflorida.com at least five (5) business days prior to the scheduled event.	2:01 PM	September 14, 2021
Anticipated date to post Notice of Intent to Award on VBS		September 28, 2021
Anticipated Contract start date		October 20, 2021

1.2 Definitions

Definitions contained in section 287.012, Florida Statutes (F.S.); Rule 60A-1.001, Florida Administrative Code (F.A.C.); Attachment C, Special Contract Conditions; and the PUR 1001, General Instructions to Respondents (10/06), are incorporated by reference. In the event of a

conflict, the definitions listed in this section supersede the incorporated definitions for the purposes of this ITB document. All definitions apply in both their singular and plural sense.

Bid – The document(s) submitted by a Bidder in response to this ITB.

Bidder – A vendor who submits a bid to this ITB.

Broker – An insurance intermediary that holds current and valid Florida resident or nonresident insurance license(s) in the appropriate line of business described in this ITB.

Business Day – Monday through Friday, inclusive, except for those holidays specified in section 110.117, F.S., from 8:00 a.m. to 5:00 p.m. Eastern Time.

Claim – A demand for recovery for loss or damages resulting from a covered cause of loss.

Commodity Code – The State's numeric code for classifying commodities and contractual services which meet specific requirements, specifications, terms, and conditions herein. Florida has adopted the United Nations Standard Products and Services Code (UNSPSC) for classifying commodities and services.

Confidential Information – Information that is trade secret or otherwise confidential or exempt from disclosure under Florida or federal law.

Contract – The written agreement between the Department and the awarded Bidder(s) resulting from this solicitation.

Contractor – A Broker that enters into a Contract with the Department as a result of this procurement.

Customer – A State Agency or Eligible User included in the insurance policy.

Department – The Department of Management Services, a State Agency.

Eligible User – For the purposes of this solicitation Eligible Users are state universities as described by section 1000.21(6), Florida Statutes.

Insurance Policy or Policy – Has the same meaning as defined in section 627.402(3), F.S. The parties to the Insurance Policy will be the Department, the Named Insured, the Broker, and the Insurer.

Insurer – Has the same meaning as defined in section 624.80(1), F.S. The insurance company selected by the Broker to provide insurance coverage described in this ITB. The term 'Underwriter' is synonymous with 'Insurer' in this procurement.

Named Insured - Those entities listed in the Scope of Work and those added during the Policy Period.

Policy Inception - The effective date of the Insurance Policy.

Policy Period – The time between the exact hour and date of Policy Inception and the hour and date of Policy expiration.

Premium – Has the same meaning as defined in section 627.403, F.S.

State – The State of Florida.

Vendor Bid System (VBS) – The State's bidding system developed in accordance with section 287.042(3)(b)2., F.S. The Vendor Bid System is accessible at <u>http://www.myflorida.com/apps/vbs/vbs_www.main_menu</u>.

1.3 Objective

The Department is issuing this ITB to replace the expiring one-year Insurance Policy for commercial automobile Insurance, Attachment G, Expiring Commercial Auto Policy No. GPNU-AU-0024153-00, with a single policy for multiple Policy Periods, if possible. The Department intends to make a single statewide award to the responsive and responsible Respondent in accordance with sections 287.057(1) and 287.022, F.S. However, the Department reserves the right to make no award, as determined to be in the best interest of the State.

The average annual spend of the past five years for commercial automobile insurance is \$260,981.00. The average annual spend is provided for informational purposes only and should not be construed as representing actual, guaranteed, or minimum spend under a new contract.

1.4 Scope of Work

Bidder(s) awarded a Contract under this ITB shall market and secure the Insurance Policy as provided in the Attachment F, Scope of Work.

1.5 Term

The term is as specified in the Attachment A, Draft Contract.

1.6 Procurement Officer

In accordance with section 21 of the PUR 1001: The Procurement Officer is the sole point of contact for this ITB. Violation of section 21 of the PUR 1001 may be grounds for rejecting a Bid. The contact information for the Procurement Officer is:

Jill Soderberg Purchasing Analyst, Division of State Purchasing Florida Department of Management Services 4050 Esplanade Way, Suite 360, Tallahassee, FL 32399-0950 Phone: 850-488-7996 Email: jill.soderberg@dms.fl.gov

****ALL EMAILS TO THE PROCUREMENT OFFICER SHOULD CONTAIN THE SOLICITATION NUMBER IN THE SUBJECT LINE OF THE EMAIL****

1.7 Order of Precedence for Solicitation

In the event of a conflict between the documents comprising this ITB, the conflict will be resolved in the following order of priority (highest to lowest):

- a) Addenda to ITB, if issued (in reverse order of issuance)
- b) This ITB document
- c) Attachment E, Price Sheet
- d) Attachment F, Scope of Work

- e) Attachment G, Expiring Commercial Auto Policy No. GPNU-AU-0024153-00
- f) Attachment B, Additional Special Contract Conditions
- g) Attachment C, Special Contract Conditions
- h) Attachment A, Draft Contract
- i) Other ITB attachments

1.8 Commitment to Diversity

The State is committed to supporting its diverse business population through involving woman-, veteran-, and minority-owned business enterprises in the state's purchasing process. The Department supports diversity in its procurements, and requests that all subcontracting opportunities afforded by this solicitation be shared with certified woman-, veteran-, and minority-owned business enterprises. The award of subcontracts should reflect the vast array of citizens in the State. Bidders can search for certified businesses online at the Office of Supplier Diversity's Certified Vendor Directory or by contacting 850-487-0915 for information on certified businesses that may be considered for subcontracting opportunities. The Certified Vendor Directory is accessible at https://osd.dms.myflorida.com/directories.

The Office of Supplier Diversity's Mentor-Protégé Program connects certified businesses with private business entities for business development mentoring. The Department strongly encourages Vendors doing business with the State to consider becoming a Mentor and participating in this initiative. More information on the Mentor-Protégé Program may be obtained by contacting the Office of Supplier Diversity at 850-487-0915 or osdinfo@dms.fl.gov.

1.9 Department's Rights to Reject Bids

The Department may reject any Bid not submitted in the manner specified by this solicitation.

Bids that do not meet all requirements, specifications, terms, and conditions of the solicitation or fail to provide all required information, documents, or materials may be rejected as non-responsive. Bidders whose Bids, references, or current status do not reflect the capability, integrity, or reliability to fully and in good faith perform the requirements of the Contract may be rejected as not responsible. The Department reserves the right to determine which Bids meet the requirements of this solicitation and which Bidders are responsive and responsible.

In this solicitation, the words "should" or "may" indicate desirable attributes or conditions but are permissive in nature. Where language indicates that the attribute or condition is mandatory, the Department still reserves the right to waive any minor irregularity if the Department determines that it is in the best interest of the State to do so.

A deviation from a requirement or condition is material if, in the Department's discretion, it provides a substantial advantage to one Bidder over another or has a potentially significant effect on the quality of the Bid or on the cost to the State.

2 THE ITB PROCESS

2.1 Question Submission

The Department invites interested and registered Vendors to submit questions regarding the solicitation.

Questions must be submitted in MFMP Sourcing by the time and date reflected in the 'Timeline of Events' section.

Bidders are strongly encouraged to ask any questions regarding this ITB, including the proposed Contract terms and conditions, prior to the deadline to submit questions.

2.2 Addenda to the ITB

The Department reserves the right to modify this solicitation by addenda. Addenda may modify any aspect of this solicitation. Any addenda issued will be posted on VBS. It is the Bidder's responsibility to check VBS for any changes throughout the procurement process and prior to submitting a bid.

2.3 Public Opening

Bids will be opened on the date and at the location indicated in the 'Timeline of Events' section. Bidders are not required to attend. The Department will only announce the names of Bidders who submitted a Bid at this public meeting, in accordance with section 119.071(1)(b), F.S.

2.4 Special Accommodations

Any person requiring a special accommodation due to a disability should contact the Department's Americans with Disabilities Act (ADA) Coordinator at 850-922-7535 or <u>ADA.Coordinator@dms.fl.gov</u> at least five Business Days prior to the scheduled event. If hearing or speech-impaired, please contact the ADA Coordinator by using the Florida Relay Service at 800-955-8771 (TDD).

2.5 Mandatory Responsive Requirements

The Department will not review Bids from Bidders who do not meet the mandatory responsive requirements listed below.

Note: The Department will perform an initial responsiveness check. Bids found to be nonresponsive will not be considered for award. The Department reserves the right to act upon information discovered during and after the initial responsiveness check impacting the responsibility or responsiveness of the Bidder.

2.5.1 Attachment D, Certification Requirements for Responsiveness

Bidder must submit a signed Attachment D, Certification Requirements for Responsiveness form. The Department will not review Bids from Bidders who do not certify they meet the minimum mandatory requirements listed in Attachment D, Certification Requirements for Responsiveness.

2.5.2 Attachment E, Price Sheet

The Bidder must provide pricing on Attachment E, Price Sheet, in accordance with the Price Sheet instructions.

2.5.3 Insurer Quotation and A.M. Best Rating

The Department will not evaluate Bids that do not contain a selected insurer quotation document with the insurer's most recent A.M. Best Rating.

The Bidder must provide a copy of the Insurer quotation document which provides coverage limits and deductible information at the same or better for the state as provided for in the expiring policy Attachment G, Commercial Auto Policy No. GPNU-AU-0024153-00, and Attachment E, Price Sheet.

If the Broker provides pricing for additional Policy Periods in Attachment E, Price Sheet, the Broker should identify in the Insurer quotation document the % loss ratio threshold which, if met or exceeded by the Named Insured during any Policy Period, will prompt the Insurer to reevaluate premium and/or deductible pricing for the next Policy Period.

Premium and deductible adjustments will be in accordance with Attachment F, Scope of Work, Section 6.1.

The Department reserves the right to reject a Bid as non-responsive if the insurance quotation does not include coverage that is the same or better coverage contemplated in Attachment G referenced above.

The Bidder must select an Insurer with an A.M. Best Key Financial Rating of at least A – or a Financial Performance Rating of V from the current A.M. Best's Key Rating Guide.

The Bidder must provide the selected Insurer's most recent A.M. Best Rating Information with the Insurer's quotation.

2.6 Other Documents to be submitted by vendor with Bid prior to ITB opening

2.6.1 Attachment H, Certification of a Drug Free Workplace

The Bidder should complete and submit Attachment H, Certification of a Drug Free Workplace, if applicable.

2.6.2 Attachment I, Broker Information

The Bidder should complete and submit Attachment I, Broker Information.

2.6.3 Certificate of Insurance

The Bidder should submit the bidder company's Certificate of Insurance.

2.7 Equal Bids

In the event that there is no multiple award contemplated in the ITB, and the Department receives equal Bids eligible for award, the Department will comply with the following, as applicable: sections 287.057(12), 287.082, 287.087, 287.092, 295.187(4)(a), and 295.187(4)(b), F.S. In order to clarify the Bidders' status with regard to the applicable statutory preference requirements, the Department may request information from Bidders with equal eligible bids. A Bidder will not be permitted to amend or suplement its Bid in response to such request for clarification.

2.6 Basis of Award

The Department intends to award one statewide Contract to a Broker for commercial automobile insurance.

The Contract will be awarded to the responsible and responsive Bidder whom the Department determines has provided the lowest Calculated Premium (CP), as provided in Attachment E, Price Sheet. The Department will consider the total cost for each Policy Period of the Contract, including Policy Period 1, or Policy Periods 1 through 2, as submitted by the Bidder.

The Department reserves the right to award to a single Bidder or to make no statewide award, as determined to be in the best interest of the State. The Department reserves the right to accept or reject all offers, and to waive any minor irregularity, technicality, or omission if the Department determines that doing so will serve the best interest of the State. The Department reserves the right to award the Contract to the responsible and responsive Bidder with the next lowest responsive Bid to this solicitation if the Department cannot execute a Contract with a Bidder previously awarded a Contract.

The input of Premiums and assessments and/or fees by a Bidder for Policy Periods 1 and 2 must be as described in the "Instructions" tab in Attachment E, Price Sheet.

For each Policy Period bid, Bidders shall provide an annual premium for commercial automobile coverage for each vehicle for each named insured listed in Attachment E, Price Sheet.

The Premium Sub-Total is the auto-calculated total of all Premiums for the coverage requirements identified on the Price Sheet for a Policy Period.

The Total Premium (TP) is the auto-calculated total of the Premium Sub-Total for a Policy Period, plus any amounts for assessments and/or fees bid for that Policy Period.

The Discounted Premium (DP) and CP are automatically calculated on the Price Sheet based on information input by a Bidder. The DP and CP are for scoring of the Bidder's Price Sheet only and will not become part of any resulting awarded Contract.

The DP for a Policy Period is calculated using the following formulas:

DP for Policy Period 1 (PP1) = TP for PP1 DP for Policy Period 2 (PP2) = TP for PP2 \div (1 + R)

Where:

R = The most recent ten-year inflation rate from the Survey of Professional Forecasters as of the 1st quarter of 2021. Percentages are expressed as decimals for calculation purposes.

To calculate the CP for a Bid for Policy Period 1 only, the CP is equal to the DP.

To calculate the CP for a Bid for multiple Policy Periods, the CP is the AVERAGE of the DP's for Policy Periods 1 and 2, as submitted by the Bidder.

In accordance with section 626.916(1)(b), F.S., the Premium rate at which the coverage is exported shall not be lower than that rate applicable, if any, in actual and current use by a majority of the authorized insurers for the same coverage on a similar risk. Bids submitted from an eligible surplus lines' insurer with a lower CP than a Bid submitted by an authorized insurer will not be considered.

2.7 Electronic Posting of Notice of Intent to Award

The Department will electronically post a 'Notice of Intent to Award' on VBS in accordance with the Timeline of Events. The 'Notice of Intent to Award' will remain posted for a period of 72 hours, not including Saturdays and Sundays or State holidays, as specified in section 110.117, F.S.

2.8 Contract Formation

The Department may issue a 'Notice of Intent to Award' to award Contract(s) to successful Bidder(s). However, no contract shall be formed between a Bidder and the Department until both parties sign the Contract. The Department shall not be liable for any work performed before the Contract is effective.

The Department intends to enter into the Contract(s) with Bidder(s) pursuant to the 'Basis for Award' section of this solicitation. No additional documents submitted by a Bidder shall be incorporated in the Contract unless they are specifically identified, incorporated by reference, and approved by the Department. If any additional documents are submitted by the Bidder, the additional documents will not be considered for the Basis for Award.

2.9 Other Requirements Following Award

2.9.1 Registration with the Florida Department of State

If awarded a Contract, the Bidder shall provide a PDF file of its current and active registration with the Florida Department of State prior to execution of a Contract or, if exempt from registration, a statement to that effect noting the basis for the exemption. Bidders should note that foreign entities are required to obtain a Florida Certificate of Authorization pursuant to applicable Florida Statutes from the Florida Department of State, Division of Corporations, to transact business in the State of Florida. For additional information, please visit https://dos.myflorida.com/sunbiz/.

2.9.2 Florida Substitute Form W-9

It is the responsibility of the awarded Bidder to complete a Florida Substitute Form W-9 prior to execution of a Contract. The Internal Revenue Service receives and validates the information provided on the Florida Substitute Form W-9. For instructions on how to complete the Florida Substitute Form W-9, please visit <u>https://flvendor.myfloridacfo.com/</u>.

3 RESPONDING TO THE ITB

3.1 General Instructions

The PUR 1001, General Instructions to Respondents (10/06), is incorporated by reference and is accessible at https://www.dms.myflorida.com/content/download/2934/11780/PUR_1001_General_Instructions_to_Respondents.pdf.

3.2 Special Instructions

The following special instructions modify the general instructions provided in the incorporated PUR 1001.

Paragraphs 8 and 13 of the PUR 1001 are inapplicable in their entirety.

Paragraphs 3, 4, 5, 7, 9, 14, 15, 19, and 20 of the PUR 1001 are inapplicable and are replaced as follows:

3. Electronic Submission of Bids. Bids shall be submitted in accordance with How to Submit a Bid in MyFloridaMarketPlace section.

4. Terms and Conditions. All Bids are subject to the terms of this solicitation, which, in case of conflict, will have the order of precedence listed in the 'Order of Precedence for Solicitation' section.

The Department will not accept any unrequested terms or conditions submitted by a Bidder, including any appearing in documents attached as part of a Bidder's response. In submitting its Bid, a Bidder agrees that any additional terms or conditions, whether submitted intentionally or inadvertently, shall have no force or effect.

5. Questions. Questions shall be submitted in accordance with the 'Question Submission' section of this solicitation.

7. Convicted Vendor, Discriminatory Vendor, and Antitrust Violator Vendor Lists. a. Convicted Vendor List.

Pursuant to section 287.133, F.S., a person or affiliate who has been placed on the Convicted Vendor List following a conviction for a public entity crime may not submit a bid, proposal, or reply on a contract to provide any goods or services to a public entity; may not submit a bid, proposal, or reply on a contract with a public entity for the construction or repair of a public building or public work; may not submit bids, proposals, or replies on leases of real property to a public entity; may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity; and may not transact business with any public entity in excess of the threshold amount provided in section 287.017, F.S. for CATEGORY TWO for a period of 36 months following the date of being placed on the Convicted Vendor List. b. Discriminatory Vendor List.

Pursuant to section 287.134, F.S., an entity or affiliate who has been placed on the Discriminatory Vendor List may not submit a bid, proposal, or reply on a contract to provide any goods or services to a public entity; may not submit a bid, proposal, or reply on a contract with a public entity for the construction or repair of a public building or public work; may not submit bids, proposals, or replies on leases of real property to a public entity; may not be awarded or perform work as a contractor, supplier,

subcontractor, or consultant under a contract with any public entity; and may not transact business with any public entity.

c. Antitrust Violator Vendor List.

Pursuant to section 287.137, F.S., a person or an affiliate who has been placed on the Antitrust Violator Vendor List following a conviction or being held civilly liable for an antitrust violation may not submit a bid, proposal, or reply for any new contract to provide any goods or services to a public entity; may not submit a bid, proposal, or reply for a new contract with a public entity for the construction or repair of a public building or public work; may not submit a bid, proposal, or reply on new leases of real property to a public entity; may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a new contract with a public entity; and may not transact new business with a public entity.

9. Bidder's Representation and Authorization. In submitting a Bid, each Bidder certifies that it understands, represents, and acknowledges the following:

- a. The Bidder is not currently under suspension or debarment by the State or any other governmental authority.
- b. The Bidder currently has no delinquent obligations to the State, including a claim by the State for liquidated damages under any other contract.
- c. The submission is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any entity or person to submit a complementary or other noncompetitive Bid.
- d. The prices and amounts have been arrived at independently and without consultation, communication, or agreement with any other Bidder or potential Bidder; neither the prices nor amounts, actual or approximate, have been disclosed to any other Bidder or potential Bidder, and they will not be disclosed before the solicitation opening.
- e. The Bidder has fully informed the Department in writing of all convictions of the Bidder, its affiliates (as defined in section 287.133(1)(a), F.S.), and all directors, officers, and employees of the Bidder and its affiliates for violation of any state or federal law involving a public entity crime (as defined in section 287.133(1)(g), F.S.). This includes disclosure of the names of current employees who were convicted of public entity crimes while in the employ of another company.
- f. Neither the Bidder nor any person associated with it in the capacity of owner, partner, director, officer, principal, investigator, project director, manager, auditor, or in a position involving the administration of federal funds:
 - Is presently indicted or, within the preceding three years, has been convicted or found guilty of, or found civilly liable for: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a federal, state, or local government transaction or public contract; violation of federal or state antitrust statutes; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; or
 - Has within a three-year period preceding this certification had one or more federal, state, or local government contracts terminated for cause or default.
- g. The products and services offered by the Bidder conform to the specifications contained herein without exception.

- h. The Bidder has read and understands the terms and conditions listed in the Draft Contract, and the submission is made in conformance with those terms and conditions.
- i. If an award is made to the Bidder, the Bidder agrees that it will execute the Draft Contract.
- j. The Bidder has made a diligent inquiry of its employees and agents responsible for preparing, approving, or submitting the Bid, and has been advised by each of them that he or she has not participated in any communication, consultation, discussion, agreement, collusion, act, or other conduct inconsistent with any of the statements and representations made in the Bid.
- k. The Bidder shall indemnify, defend, and hold harmless the Department, Customer, and their employees against any cost, damage, or expense which may be incurred or be caused by the Bidder's Bid (including any errors therein).
- All information provided by, and representations made by, the Bidder are material and important and will be relied upon by the Department in awarding the Contract. Any misstatement may be treated as fraudulent concealment from the Department and Customers of the true facts relating to submission of the Bid. A misrepresentation may be punishable under law.

The Department reserves the right to deem the Bidder non-responsive or nonresponsible based on any information provided in, or omitted from, the Bidder's Bid related to the certifications of this section.

14. Firm Response. The Department intends to make an award within thirty days after the date of the opening, during which period Bids shall remain firm and shall not be withdrawn. If award is not made within thirty days, the Bid shall remain firm until the Department enters into a Contract or the Department receives from the Bidder written notice that the Bid is withdrawn.

15. Clarifying Information. The Department may request, and Bidder shall provide, clarifying information or documentation. Failure to supply the information or documentation as requested may result in the Bid being deemed non-responsive.

19. Public Records. Article 1, section 24, Florida Constitution, guarantees every person access to all public records, and section 119.011, F.S., provides a broad definition of "public record." As such, the entirety of the Bids are public records and are subject to disclosure unless exempt from disclosure by law. If the Bidder considers any portion of its Bid to be Confidential Information, the Bidder is to mark the document as "confidential" and simultaneously provide the Department with a separate, redacted copy of its Bid. For each portion redacted, the Bidder is to briefly describe in writing the grounds for claiming exemption, including the specific statutory citation for such exemption. On the cover of the redacted copy, the Bidder is to provide its name and the Department's solicitation name and number and clearly title it, "Redacted Copy." Only portions of material that the Bidder claims are Confidential Information are to be redacted.

In accordance with section 119.0701, F.S., Bids are exempt from production in response to public records requests until such time as the Department provides notice of an intended decision or until 30 days after opening the Bids, whichever is earlier. After that time, the Department will provide the redacted copy, if any, in response to a public records request.

In the event of a request for public records pursuant to Chapter 119, F.S., the Florida Constitution, or other authority, to which documents that are marked as "confidential" are responsive, the Department will provide the redacted copy to the requestor. If a requestor asserts a right to the redacted Confidential Information, the Department will notify the Bidder such an assertion has been made. It is the Bidder's responsibility to take the appropriate legal action to assert that the information in question is exempt from disclosure under Chapter 119, F.S., or other applicable law.

If the Department becomes subject to a demand for discovery or disclosure of documents that are marked as "confidential" in a legal proceeding, the Department will give the Bidder notice of the demand or request. It will be the Bidder's responsibility to take the appropriate legal action in response to the demand and to defend its claims of confidentiality. If the Bidder fails to take appropriate and timely action to protect the materials it has designated as Confidential Information, the Department will provide the unredacted materials to the requester.

By submitting a Bid, the Bidder agrees to protect, defend, and indemnify the Department for all claims arising from or relating to the Bidder's determination that the redacted portions of its Bid are Confidential Information. If a Bidder fails to submit a redacted copy in accordance with this section, of information it claims is Confidential Information, the Department is authorized to produce the entire material submitted to the Department in response to a public records request for, or demand for discovery or disclosure of, these records.

20. Protests. Any protest concerning this solicitation should be made in accordance with sections 120.57(3) and 287.042(2), F.S., and Chapter 28-110, F.A.C. Any communication not in accordance with these sections or the solicitation, including questions to the Procurement Officer, will not constitute formal notice of a protest.

3.3 How to Submit a Bid in MyFloridaMarketPlace

3.3.1 MFMP Registration

In order to submit questions regarding this procurement, and to submit a Bid, a Vendor must be registered in the MFMP Vendor Information Portal (VIP). After registering, the Vendor should log in to MFMP VIP using its username and password to ensure that its contact information is correct and that it has registered with the matching commodity code(s) of the MFMP Sourcing event. To participate in the procurement, a Vendor must also indicate its intent to participate in electronic solicitations in MFMP Sourcing on the 'Solicitation Selections' page of its MFMP VIP account.

If the Vendor is not currently registered with MFMP VIP, the Vendor must:

- a) Create an account through MFMP VIP.
- b) Within MFMP VIP, indicate on the 'Solicitation Selections' page that the Vendor wishes to participate in electronic solicitations.
- c) Within MFMP VIP, in the 'Commodity Codes' section, ensure that the Vendor has selected the matching commodity codes used in this procurement. VBS and MFMP Sourcing may provide automated notifications to the Vendor community, as a courtesy, based on commodity codes that are tied to a Vendor's registration in MFMP VIP. Vendors with a commodity code that matches the commodity code

of the MFMP Sourcing event will be able to 'Join' the MFMP Sourcing event. If a Vendor does not have a matching commodity code, VBS and MFMP Sourcing will not provide a courtesy notification and the Vendor will not be able to 'Join' the MFMP Sourcing event. Vendors will not receive notifications for procurements with commodity codes that they have not selected in their MFMP VIP account.

Vendors have the ability to access and update their registration in MFMP VIP by adding commodity codes to their Vendor account. <u>Changes made in MFMP VIP, including new registrations, may take up to 24 hours to take effect.</u>

The MFMP VIP is accessible at <u>https://vendor.myfloridamarketplace.com/</u>.

The Department strongly recommends the Vendor set its Microsoft Internet Explorer browser to compatibility mode while using MFMP applications. For more information regarding recommended internet browser settings, please visit <u>https://www.dms.myflorida.com/business_operations/state_purchasing/myfloridamarketp_lace/mfmp_agency_customers/mfmp_university/job_aids</u>

ALL VENDORS MUST 'JOIN' THE MFMP SOURCING EVENT PRIOR TO THE DEADLINE TO SUBMIT BID DATE LISTED IN THE TIMELINE OF EVENTS IN ORDER TO PARTICIPATE IN THIS SOLICITATION.

Once registered in MFMP, in order to 'Join' the MFMP Sourcing event, Vendors must:

- a) Have a current MFMP Vendor registration within MFMP VIP; and
- b) Select 'Yes' to participate in electronic sourcing events in MFMP Sourcing on the 'Solicitations' page of their MFMP VIP account.
- c) Within MFMP VIP, in the Commodity Selections section, ensure that the Vendor has selected the matching commodity code(s) used in this procurement. Vendors will not be able to join or receive notifications for procurements with commodity codes that they have not selected in their MFMP VIP account.

MFMP Sourcing is accessible at <u>https://sourcing.myfloridamarketplace.com</u>.

3.3.2 MFMP Sourcing Phases

A solicitation formally begins when the Department posts the solicitation on VBS. The Department will also publish the solicitation in MFMP Sourcing. Do not rely on MFMP Sourcing for notices of solicitation or agency decisions. VBS is the centralized procurement website designated by the Department for agency decisions or intended decisions. MFMP Sourcing is the application for submitting formal questions and Bids in response to the Department's solicitation. The answers to the formal questions will be posted on VBS.

The following are MFMP Sourcing phases:

Preview Status

When this solicitation is published as a 'Public Event' in MFMP Sourcing, it will initially exist in a 'Preview' status. During the 'Preview' status, Vendors without a matching commodity code can only preview the MFMP Sourcing event using the "Public Access" feature. Vendors with a matching commodity code can 'Join' the event, view and download solicitation documents, and accept the 'Bidder's Agreement.'

In accordance with the time stated on the Timeline of Events, Vendors may submit questions to the Procurement Officer in the 'Messages' tab of the MFMP Sourcing event, during the Preview status, after they have joined the event. The solicitation will remain in 'Preview' status until the 'Open' status begins.

Open Status

When a solicitation is in 'Open' status, all registered Vendors with a matching commodity code who 'Join' the MFMP Sourcing event and accept the 'Bidders Agreement' may submit Bids until the Bid due date and time listed in the 'Timeline of Events' section, above.

Pending Selection Status

After the Bid due date and time, the solicitation will enter 'Pending Selection' status. During this phase of the solicitation, the 'Pending Selection' tab will appear in MFMP Sourcing.

Completed Status

If the tab in MFMP Sourcing indicates 'Completed,' either an agency decision or an intended decision has been posted on VBS. However, do not rely on MFMP Sourcing for this information. VBS is the centralized procurement website for the posting of agency decisions.

3.3.3 MFMP Training

MFMP University offers Vendor training materials on a variety of topics, including Vendor Registration and Selecting Commodity Codes; training materials are accessible at https://www.dms.myflorida.com/business_operations/state_purchasing/myfloridamarketplace/mfmp_vendors/training_for_vendors.

It is highly recommended that Vendors review the training for 'Responding to Electronic Solicitations' provided at

https://www.dms.myflorida.com/business_operations/state_purchasing/myfloridamarketp lace/mfmp_agency_customers/mfmp_university/course_catalog.

3.3.4 MFMP Assistance

Vendors needing assistance with using MFMP may contact the MFMP Customer Service Desk Monday through Friday, 8:00 a.m. to 6:00 p.m. ET, at 866-352-3776 or email at <u>VendorHelp@myfloridamarketplace.com</u>.

3.4 Modification or Withdrawal of Bid

Bidders are responsible for the content and accuracy of their Bids. A Bidder may modify or withdraw its Bid in MFMP Sourcing at any time prior to the Bid due date and time set forth in the 'Timeline of Events' section.

3.5 Cost of Bid Preparation

The costs related to the development and submission of a Bid are the full responsibility of the Bidder and are not chargeable to the Department.

3.6 Independent Preparation

A Bidder shall not, directly, or indirectly, collude, consult, communicate or agree with any other Bidder as to any matter related to the bid each is submitting. Additionally, a Bidder shall not induce any other Bidder to modify, withdraw, submit, or not submit a bid.

3.7 False or Erroneous Information

A Bidder who submits false or erroneous information may be deemed non-responsive and not awarded a Contract. If the Bidder's Bid is found to contain false or erroneous information after Contract award, the Contract may be terminated, and the Department may pursue any other legal action available.

ITB ATTACHMENTS

Attachment A	Draft Contract					
Attachment B	Additional Special Contract Conditions					
Attachment C	Special Contract Conditions					
Attachment D	Certification Requirements for Responsiveness					
Attachment E	Price Sheet					
Attachment F	Scope of Work					
Attachment G	Commercial Automobile Insurance Policy No. GPNU-AU-0024153-00					
Attachment H	Certification of a Drug Free Workplace					
Attachment I	Broker Information					
Attachment J	Historical Premium and Loss Information					
Required Documents to be submitted by vendor prior to ITB opening						

Vendor's completed Attachment D, Certification Requirements for Responsiveness Vendor's completed Attachment E, Price Sheet Vendor's secured Insurer Quotation per ITB section 2.5.3

Other Documents to be submitted by vendor with Bid prior to ITB opening

Vendor's completed Attachment H, Certification of a Drug Free Workplace, if applicable Vendor's completed Attachment I, Broker Information



Solicitation No: 21-84131503-ITB Commercial Automobile Insurance Attachment A Draft Contract No. 84131503-21-ITB

This Contract is between the State of Florida, Department of Management Services (Department), an agency of the State of Florida and **Contractor Name** (Contractor), collectively referred to herein as the "Parties."

Accordingly, the Parties agree as follows:

I. Contract Term.

The term of the contract will be for one year, with an option for additional policy periods if pricing for such was provided in the Contractor's bid, with annual pricing terms as follows:

- a. October 20, 2021, 12:01 a.m., and ending October 20, 2022, 12:01 a.m.
- b. October 20, 2022, 12:01 a.m., and ending October 20, 2023, 12:01 a.m.

II. Contract.

As used in this document, "Contract" (whether or not capitalized) shall, unless the context requires otherwise, include this document and all incorporated attachments and exhibits, which set forth the entire understanding of the Parties and supersedes all prior agreements. No additional documents submitted by a Broker shall be incorporated in the Contract unless specifically identified, incorporated by reference, and approved by the Department. All modifications to this Contract must be in writing and signed by all Parties.

All exhibits and attachments listed below are incorporated in their entirety into, and form part of, this Contract. The Contract document and Attachments shall have priority in the following order:

- 1) This Contract document
- 2) Exhibit A, Additional Special Contract Conditions (ITB Attachment B)
- 3) Exhibit B, Special Contract Conditions (ITB Attachment C)
- Exhibit C, Insurance policy as issued by Insurer and as endorsed throughout the policy period(s)
- 5) Exhibit D, Broker's submitted Price Sheet
- 6) Exhibit E, Scope of Work (ITB Attachment F), with ITB Attachment G, Expiring Commercial Auto Policy No. GPNU-AU-0024153-00 and ITB Attachment D, Certification Requirements for Responsiveness
- 7) Exhibit F, Broker's Bid (excluding Broker's submitted Price Sheet)

Solicitation No: 21-84131503-ITB Commercial Automobile Insurance Attachment A Draft Contract No. 84131503-21-ITB

III. Contract Management.

Department's Contract Manager:

Jill Soderberg, Purchasing Analyst Division of State Purchasing Florida Department of Management Services 4050 Esplanade Way, Suite 360 Tallahassee, Florida 32399-0950 Telephone: (850) 488-7996 Email: jill.soderberg@dms.fl.gov

Brokers's Contract Manager:

[Insert Contractor Manager Name] [Insert Contractor name] [Insert Contractor's physical address] Telephone: [(XXX) 555-XXXX] Email: [jane.doe@business.gmail.com]

This Contract is executed by the undersigned officials as duly authorized. This Contract is not valid and binding on all Parties until signed and dated by both Parties.

Contractor Name	STATE OF FLORIDA, DEPARTMENT OF MANAGEMENT SERVICES
[Name]	J. Todd Inman Secretary
Date:	Date:



Solicitation No: 21-84131503-ITB Commercial Automobile Insurance Attachment B Additional Special Contract Conditions

The following Sections of ITB Attachment C, Special Contract Conditions, are hereby removed in their entirety:

- Section 3.2 Price Decreases.
- Section 4.3 Department's Contract Manager.
- Section 4.4 Contractor's Contract Manager.
- Section 4.6 RESPECT.
- Section 4.7 PRIDE.
- Section 6.4 Inspection and Acceptance of Commodities.
- Section 6.5 Safety Standards.
- Section 6.10 Cooperative Purchasing.
- Section 13.1 Background Check.
- Section 13.3 Disqualifying Offenses.

The following sections of the Special Contract Conditions replaced in their entirety as follows:

2.2 Renewal.

Upon written agreement, the Department and Contractor may renew the Contract in whole or in part only as set forth in the Contract documents, and in accordance with section 287.057(14), F.S.

3.7 Transaction Fees.

The Broker must pay the Transaction Fees unless the transaction is considered exempt per Rule 60A-1.031, Florida Administrative Code.

5.1 Conduct of Business.

The Contractor must comply with all laws, rules, codes, ordinances, and licensing requirements that are applicable to the conduct of its business, including those of federal, state, and local agencies having jurisdiction and authority. For example, the Contractor must comply with section 274A of the Immigration and Nationality Act, the Americans with Disabilities Act, Health Insurance Portability and Accountability Act, if applicable, and all prohibitions against discrimination on the basis of race, religion, sex, creed, national origin, handicap, marital status, or veteran's status. The provisions of subparagraphs 287.058(1)(a)-(c) and (g), F.S., are hereby incorporated by reference.

Nothing contained within this Contract shall be construed to prohibit the Contractor from disclosing information relevant to performance of the Contract or purchase order to members or staff of the Florida Senate or Florida House of Representatives.

Pursuant to section 287.057(26) Florida Statutes, the Contractor shall ensure a representative will be available to team members of the continuing oversight team.



5.4 Convicted, Discriminatory, Antitrust Violator, and Suspended Vendor Lists. In accordance with sections 287.133, 287.134, and 287.137, F.S., the Contractor is hereby informed of the provisions of sections 287.133(2)(a), 287.134(2)(a), and 287.137(2)(a), F.S. For purposes of this Contract, a person or affiliate who is on the Convicted Vendor List, the Discriminatory Vendor List, or the Antitrust Violator Vendor List may not perform work as a contractor, supplier, subcontractor, or consultant under the Contract. The Contractor must notify the Department if it or any of its suppliers, subcontractors, or consultants have been placed on the Convicted Vendor List, the Discriminatory Vendor List, or the Antitrust Violator Vendor List during the term of the Contract.

In accordance with section 287.1351, F.S., a vendor placed on the Suspended Vendor List may not enter into or renew a contract to provide any goods or services to an agency after its placement on the Suspended Vendor List.

A firm or individual placed on the Suspended Vendor List pursuant to section 287.1351, F.S., the Convicted Vendor List pursuant to section 287.133, F.S., the Antitrust Violator Vendor List pursuant to section 287.137, F.S., or the Discriminatory Vendor List pursuant to section 287.134, F.S., is immediately disqualified from Contract eligibility.

5.6 Cooperation with Inspector General and Records Retention.

Pursuant to section 20.055(5), F.S., the Contractor understands and will comply with its duty to cooperate with the Inspector General in any investigation, audit, inspection, review, or hearing. Upon request of the Inspector General or any other authorized State official, the Contractor must provide any information the Inspector General deems relevant. Such information may include, but will not be limited to, the Contractor's business or financial records, documents, or files of any type or form that refer to or relate to the Contract. The Contractor will retain such records for the longer of five years after the expiration or termination of the Contract, or the period required by the General Records Schedules maintained by the Florida Department of State, at the Department of State's Records Management website. The Contractor agrees to reimburse the State of Florida for the reasonable costs of investigation incurred by the Inspector General or other authorized State of Florida official for investigations of the Contractor's compliance with the terms of this or any other agreement between the Contractor and the State of Florida which results in the suspension or debarment of the Contractor. Such costs will include but will not be limited to: salaries of investigators, including overtime; travel and lodging expenses; and expert witness and documentary fees. The Contractor agrees to impose the same obligations to cooperate with the Inspector General and retain records on any subcontractors used to provide goods or services under the Contract.

7.3 Florida Authorized Insurers.

All insurance shall be with insurers authorized and eligible to transact the applicable line of insurance business in the State of Florida, except as contemplated in section 626.916, F.S. The Contractor shall provide Certification(s) of Insurance evidencing that all appropriate coverage is in place and showing the Department to be an additional insured.



8.1.1 Termination of Contract.

The Department may terminate the Contract for refusal by the Contractor to comply with this section by not allowing access to all public records, as defined in Chapter 119, F. S., made or received by the Contractor in conjunction with the Contract unless the records are exempt from s. 24(a) of Art. I of the State Constitution and section 119.071(1), F.S.

8.1.2 Statutory Notice.

Pursuant to section 119.0701(2)(a), F.S., for contracts for services with a contractor acting on behalf of a public agency, as defined in section 119.011(2), F.S., the following applies:

IF THE CONTRACTOR HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE CONTRACTOR'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE DEPARTMENT'S CONTRACT MANAGER LISTED IN SECTION 4.3 OF THE SPECIAL CONTRACT CONDITIONS.

Pursuant to section 119.0701(2)(b), F.S., for contracts for services with a contractor acting on behalf of a public agency as defined in section 119.011(2), F.S., the Contractor shall:

- (a) Keep and maintain public records required by the public agency to perform the service.
- (b) Upon request from the public agency's custodian of public records, provide the public agency with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, F.S., or as otherwise provided by law.
- (c) Ensure that public records that are exempt or confidential and exempt from public records disclosure are not disclosed except as authorized by law for the duration of the Contract term and following the completion of the Contract if the Contractor does not transfer the records to the public agency.
- (d) Upon completion of the Contract, transfer, at no cost, to the public agency all public records in possession of the Contractor or keep and maintain public records required by the public agency to perform the service. If the Contractor transfers all public records to the public agency upon completion of the Contract, the Contractor shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If the Contractor shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the public agency, upon request from the public agency's custodian of public records, in a format that is compatible with the information technology systems of the public agency.

8.4 Intellectual Property.

The Parties do not anticipate that any intellectual property will be developed as a result of this Contract. Unless specifically addressed in the Contract, intellectual property rights to



all property created or otherwise developed by the Contractor for the Department or the Customer will be owned by the Contractor at the completion of the Contract. Intellectual property rights to all property created or otherwise developed by the Department will be owned by the Department at the completion of the Contract.

9 Data Security.

The Contractor will maintain the security of State of Florida data including, but not limited to, maintaining a secure area around any displayed visible data and ensuring data is stored and secured when not in use. In the event of a security breach involving State of Florida data, the Contractor shall give notice to the Customer and the Department within one business day. For purposes of this section, "security breach" will refer to a confirmed event that compromises the confidentiality, integrity, or availability of data. Once a security breach has been contained, the Contractor must provide the Department with a post-incident report documenting all containment, eradication, and recovery measures taken. The Department reserves the right in its sole discretion to enlist a third party to audit Contractor's findings and produce an independent report, and the Contractor will fully cooperate with the third party. The Contractor will also comply with all HIPAA requirements and any other state and federal rules and regulations regarding security of information.

12.1 Performance or Compliance Audits.

The Department may conduct or have conducted performance and/or compliance audits of the Contractor and subcontractors as determined by the Department. The Department may conduct an audit and review all the Contractor's and subcontractors' data and records that directly relate to the Contract. To the extent necessary to verify the Contractor's fees and claims for payment under the Contract, the Contractor's agreements or contracts with subcontractors, partners, or agents of the Contractor, pertaining to the Contract, may be inspected by the Department upon fifteen (15) calendar days' notice, during normal working hours and in accordance with the Contractor's facility access procedures where facility access is required. Release statements from its subcontractors, partners, or agents are not required for the Department or its designee to conduct compliance and performance audits on any of the Contractor's contracts relating to this Contract. The Inspector General, the State of Florida's Chief Financial Officer, and the Office of the Auditor General shall also have authority to perform audits and inspections.

13.2 E-Verify.

The Contractor and its subcontractors have an obligation to utilize the U.S. Department of Homeland Security's (DHS) E-Verify system for all newly hired employees in accordance with section 448.095, F.S. By executing this Contract, the Contractor certifies that it is registered with, and uses, the E-Verify system for all newly hired employees in accordance with section 448.095, F.S. The Contractor must obtain an affidavit from its subcontractors in accordance with paragraph (2)(b) of section 448.095, F.S., and maintain a copy of such affidavit for the duration of the Contract. The Contractor shall provide a copy of its DHS Memorandum of Understanding (MOU) to the Department's Contract Manager within five days of Contract execution.

This section serves as notice to the Contractor regarding the requirements of section 448.095, F.S., specifically sub-paragraph (2)(c)1, and the Department's obligation to terminate the Contract if it has a good faith belief that the Contractor has knowingly



violated section 448.09(1), F.S. If terminated for such reason, the Contractor will not be eligible for award of a public contract for at least one year after the date of such termination. The Department will promptly notify the Contractor and order the immediate termination of the contract between the Contractor and a subcontractor performing work on its behalf for this Contract should the Department have a good faith belief that the subcontractor has knowingly violated section 448.09(1), F.S.

The following section is added to the Special Contract Conditions:

12.3 Document Inspection.

In accordance with section 216.1366, F.S., the Department is authorized to inspect the: (a) financial records, papers, and documents of the Contractor that are directly related to the performance of the Contract or the expenditure of state funds; and (b) programmatic records, papers, and documents of the Contractor which the Department determines are necessary to monitor the performance of the Contract or to ensure that the terms of the Contract are being met. The Contractor shall provide such records, papers, and documents requested by the Department within 10 Business Days after the request is made.



Solicitation No. 21-84131503-ITB Commercial Automobile Insurance Attachment D Certification Requirements for Responsiveness

The Bidder certifies that the Bidder is not on the Suspended Vendor List maintained pursuant to section 287.042(1)(a), F.S., and neither the Bidder nor any supplier, subcontractor, nor consultant included in its Bid are on the Convicted Vendor, Discriminatory Vendor, or Antitrust Violator Vendor Lists specified in Sections 7 and 8 of the PUR1001 form, as modified by section 3.2 of the ITB.

The Bidder certifies it is in compliance with Section 9 of the <u>PUR1001 form</u>, as modified by the ITB Special Instructions.

The Bidder certifies that it is not on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or the Scrutinized Companies that Boycott Israel List; and is not engaged in a boycott of Israel.

The Bidder certifies that if awarded a Contract it will provide a PDF file of its current and active registration with the Florida Department of State, Division of Corporations, or, if exempt from registration, a statement to that effect noting the basis for the exemption, prior to Contract execution. For additional information, please visit https://dos.myflorida.com/sunbiz/.

NOTE: Foreign entities are required to obtain a Florida Certificate of Authority pursuant to applicable Florida Statutes from the Florida Department of State, Division of Corporations, to transact business in the State of Florida.

The Bidder certifies that within the last year (i.e., within the last 365 days), it has not had a contract terminated under section 448.095(2)(c), F.S., by a public employer, as defined by section 448.095(1)(i), F.S.

The Bidder certifies that the Broker's key management personnel assigned to securing the Insurance Policy will maintain current and active insurance license(s) required to provide the services contemplated herein.

The Bidder certifies that the Bidder and the selected Insurer possess a valid and current certificate of authority to transact insurance, in accordance with section 624.404, Florida Statutes, or are an eligible surplus lines insurer in accordance with section 626.918, Florida Statutes.

The Bidder certifies that the Bidder and the selected Insurer each have 10 years of experience in the placement and account management of the insurance coverage described in this ITB.

Respondent should note the other responsiveness requirements indicated in section 2.5, Mandatory Responsiveness Requirements, of the ITB.

Signature below certifies that the signatory has the authority to respond to this solicitation on the Bidder's behalf and certifies conformance with all Responsiveness Requirements listed above.

Bidder's Name

Signature of Bidder's Authorized Representative

Date

Solicitation No. 21-84131503-ITB Commercial Automobile Insurance Attachment E Price Sheet Instructions

- 1 Bidders will download the Microsoft[®] Excel file Attachment E, Price Sheet. Review and follow these instructions and the general information as provided in the Price Sheet.
- 2 The Bidder is required to supply accurate and complete information.
- 3 The Price Sheet contains the most complete vehicle information available from each Named Insured at the time of the solicitation being posted as indicated in ITB Section 1.1, Timeline of Events.
- 4 The Price Sheet is locked and will move automatically to the areas highlighted in yellow where pricing, applicable statutory assessments, or fees are to be input, as applicable, in order to be considered for a policy period.
- 5 A Bidder may provide pricing for either Policy Period 1; or Policy Periods 1 and 2. No other combination of Policy Periods will be accepted or scored by the Department. Failure to provide consecutive pricing will result in the Bid being deemed non-responsive. Information regarding how the the pricing provided will be scored is specified in the ITB, with specifics in ITB Section 2.6, Basis of Award.
- 6 Bidders not submitting pricing for Policy Period 2 should not input any data into those pricing fields; pricing fields are coded for a numeric response, and anything other than a numeric response will render an error code in the Calculated Premium cell.
- 7 The Price Sheet will automatically discount Bids for multiple Policy Periods in accordance with ITB Section 2.6, Basis of Award.
- 8 The most recent ten-year inflation rate from the Survey of Professional Forecasters as of the 2nd Quarter of 2021 can be found below:

https://www.philadelphiafed.org/research-and-data/real-time-center/survey-of-professional-forecasters/historical-data/inflation-forecasts

2021 Q2 2.30%

- *9* For each Policy Period for which the Bidder intends to submit a Bid, the Bidder must input a pricing response as indicated below:
 - a. For each Policy Period bid, Bidders shall provide an annual premium for each vehicle for each Named Insured listed in the Price Sheet.
 - b. Coverage for all vehicles shall include Liabililty, PIP, Medical Payments, Collision and Other Than Collision; except for:
 - 1 Current Policy Vehicle Number FL-088, 2016 FVXL KITCHEN TRAILER, VIN 4U3J04827GL015336 requires only Liability coverage 2 Current Policy Vehicle Number FL-089, 2017 FREEDOM TRAILER, 5WKBE1014H1045810 requires only Collision coverage
 - c. Bidders should not include UnInsured Motorist coverage, as this coverage in not being requested under this policy.
 - d Bidders should **not** include Terrorism Risk Insurance (TRIA) premium pricing, as this coverage is not required on this policy.
- 10 If there are any assessments or fees associated with the proposed Insurance Policy, they must be identified as follows:
 - a. If any statutorily required and authorized assessments are to be included, identify the name of that assessment, and its applicable percentage of the premium subtotal associated with the applicable Policy Period. The Price Sheet will auto-calculate the associated cost for the assessment for that Policy Period.
 - b. Any other fee shall be identified by name; and Bidder shall input the total annual cost of that fee for the Policy Period bid.
 - c. For an inspection fee, if applicable, a Bidder must input the associated total annual cost for the Policy Period bid.
 - d. In accordance with subsection 626.932(4), Florida Statutes, surplus lines tax fees shall not be assessed.
- 11 If awarded a Contract, the Bidder (Contractor) will not be allowed to impose any fee not listed in the Price Sheet for a Policy Period, unless required by statute.
- 12 Other than providing the required bid information within the Price Sheet, the responding Bidder may not alter the information, specifications, or contents of the Price Sheet, as created by the Department. Any such alteration of the Price Sheet specifications or contents may result in the Bidder being deemed non-responsive and its response not scored. Bidders are reminded that only one Price Sheet may be submitted by a Bidder.
- 13 Once filled-in, upload the filled-in Microsoft® Excel file within the MFMP Sourcing Application. Do not convert the Price Sheet to a PDF.
- 14 If there is a conflict between this Instructions tab and the Price Sheet tab, the Instructions on this tab will control.

Solicitation No: 21-84131503-ITB Commercial Automobile Insurance Attachment E Price Sheet

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Desc Desc <thdesc< th=""> Desc Desc <thd< td=""><td>FL-0027</td><td>FSU 20</td><td>12 TO</td><td>YOTA PRIUS</td><td>JENTICE</td><td>JTDKDTB38C1505773</td><td>123</td><td></td><td>18,751.00</td><td>739800</td><td></td><td></td><td></td><td></td><td>\$ -</td><td>\$</td><td></td><td></td></thd<></thdesc<>	FL-0027	FSU 20	12 TO	YOTA PRIUS	JENTICE	JTDKDTB38C1505773	123		18,751.00	739800					\$ -	\$		
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Date Description Description <thdescription< th=""> <thde< td=""><td>FL-0031</td><td>FSU 20</td><td>16 FO</td><td>RD TRANSIT CONNECT XLT</td><td></td><td>NM0GE9F78G1259457</td><td>123</td><td>Leon \$</td><td>24,825.00</td><td>588100</td><td>Y Y</td><td>1</td><td>V Y</td><td>Y Y</td><td>\$ -</td><td>\$</td><td>-</td><td></td></thde<></thdescription<>	FL-0031	FSU 20	16 FO	RD TRANSIT CONNECT XLT		NM0GE9F78G1259457	123	Leon \$	24,825.00	588100	Y Y	1	V Y	Y Y	\$ -	\$	-	
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Index <th< td=""><td>FL-0068</td><td>USF 20</td><td>06 DC</td><td>DDGE CARAVAN</td><td></td><td>1D4GP24E76B612661</td><td>107</td><td>Hillsborough \$</td><td>23,015.00</td><td>739800</td><td>Y Y</td><td>1</td><td>V Y</td><td>Y Y</td><td>\$ _</td><td>\$</td><td></td><td></td></th<>	FL-0068	USF 20	06 DC	DDGE CARAVAN		1D4GP24E76B612661	107	Hillsborough \$	23,015.00	739800	Y Y	1	V Y	Y Y	\$ _	\$		
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Lo2JobsJo					SERVICE	2C4RDGBG1GR285094		Hillsborough \$							\$ -	\$		
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IP-002 FAMU 2017 VOVTA RAV IP-MREPUHDOT7S IS-3 Low S 29800 V<	FL-0080	FAMU 20	17 FO	RD SUPER DUTY E450	mould	1FDFE4FS9HDC31975	123	Leon \$	58,000.00	214990	Y Y	1	V Y	Y Y	\$	\$		
FALOBIT SUL <					T	JTMRJREV6HD077456	123			739800	(<u>Y</u>	/	V Y	Y Y	\$ -	\$	-	
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If-Do36 DAC-PD0 DD17 NISAM AUTIMA IMALIAPAHC275Q IA3 Hendry S<2.500 7.73800 V<	FL-0084	JAC-PD06 20	15 FO	RD EDGE SEL AWD		2FMTK4J96FBC18054	106	Pinellas \$	33,785.00	739800	Y Y	1	V Y		s -	\$		
Inclust 2017 PODE DRPDRER Intervision and anti-post															<u>\$</u>	\$	-	
If-009 US 2017 REEDOM TRALER TRALER SVMBEID HH105SUP 10 H1050cm \$ 2,200.0 648490 N <th< td=""><td>FL-0087</td><td>USF 20</td><td>17 FO</td><td>RD EXPLORER</td><td></td><td>1FM5K8B80HGC78705</td><td>107</td><td>Hillsborough \$</td><td>33,810.00</td><td>739800</td><td>Y Y</td><td>/</td><td>V Y</td><td>Y Y</td><td>\$</td><td>\$</td><td></td><td></td></th<>	FL-0087	USF 20	17 FO	RD EXPLORER		1FM5K8B80HGC78705	107	Hillsborough \$	33,810.00	739800	Y Y	/	V Y	Y Y	\$	\$		
If CADD AC SA19 2017 IFODD EXPLORER IFINAST/BBANGB3304 1/8 St. Low S 3, 66.0.0 738800 Y	FL-0088	FSU 20	16 FV.	XL KITCHEN TRAILER			123		50,000.00	674990 Y					s -	5	-	LIABILILTY COVERAGE ONLY
IACPODE 2017 IORD TANUST InfoREX/PROMPARABUS 106 Pineting \$ 34,515.00 582.00 Y <th< td=""><td></td><td></td><td></td><td></td><td>TRAILER</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>s</td><td>5</td><td></td><td>REQUIRES SEPARATE PULICY CONTENTS COVERAGE</td></th<>					TRAILER										s	5		REQUIRES SEPARATE PULICY CONTENTS COVERAGE
Inc.Pools 2017 IPODE fusion 1 StateWorkPathenessing Inc.Pools StateWorkPathenessing StateWorkPathenesing StateWorkPathenessing	FL-0091	JAC-PD06 20	17 FO	IRD TRANSIT		1FMZK1YM0HKA34983	106		34,515.00	588200	Y Y	1	V Y	Y Y	\$	\$		
I/2.0094 I/2.0096 2017 FORD FUSION 2 (HYBRID) 3FA6POUU3HR236175 106 Pinelios \$ 25,675,0 73800 Y	FL-0092														\$ -	5	-	
FL-0095 [AC-PD06 2017 FORD FUSION 3 (HYBRID) 3FAFPOUULHR235175 106 Pinellos \$ 25,675,00 739800 Y Y N N Y Y S S - S -															\$ -	5		
FL-0096 4217 FORD FUSION 4 3FAGPOG7DHR235173 106 Pinelias \$ 22,610.0 739800 Y Y N N Y Y Y S 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5	FL-0095	JAC-PD06 20	17 FO	RD FUSION 3 (HYBRID)		3FA6P0UU1HR236175	106	Pinellas \$	25,675.00	739800	Y Y		V Y	Y Y	\$ -	\$	-	
	FL-0096	JAC-PD06 20	17 FO	RD FUSION 4		3FA6P0G70HR236173	106	Pinellas \$	22,610.00	739800	(Y	1	V Y	Y Y	\$ -	\$	-	

Number	Named Insured Entity	Veh Year	Vehicle Desc	USE	Veh Id	Territory #	County	Vehicle Cost	Class Code	Liab PIP	P UM	Med Pav	Coll OTC	Annual Premium		Annual Premium	Addt'l Insured / Loss Payee
L-0097	FSU		TOYOTA CAMRY		4T1B31HKXJU501463		Leon \$	27,396.00	739800	Y Y		Y		\$	- 5	-	
L-0098 L-0099	JAC-PD20 JAC-PD20		NISSAN ALTIMA 2.5 NISSAN ALTIMA 2.5		1N4AL3APX1JC138823 1N4AL3AP0JC139964		Hendry \$ Hendry \$	18,836.00 18,836.00	739800 739800		N N	Y		\$ \$	- \$		
L-0100	JAC-PD06		FORD EXPLORER		1FM5K8B89JGA71381		Pinellas \$	27,086.00	739800	Y Y		Y		\$	- \$	-	
L-0101	FSDB		DODGE CARAVAN		2C4RDGBG0JR176438		St. Johns \$	21,687.00	739800		N			\$	- \$	-	
-0102 -0106	FAMU DFS		GOSHEN COACH HYUNDAI SONATA	SERVICE	1FDFE4FS0HDC31976 5NPE24AA5JH707274		Leon \$ Leon \$	72,000.00 23,660.00	658300 739800			Y		\$	- \$	-	
-0107			FORD TAURUS		1FAHP2D88/G123909		Pinellas \$	20,930.00	739800	Y Y	N N			\$	- \$		
-0108	UF		CHEVROLET BOLT		1G1FX6S06H4183309		Alachua \$	41,000.00	739800			Ŷ		\$	- 5		
-0109	USF		FORD TRANSIT		1FBZX2ZG6JKA62723	107	Hillsborough \$	38,285.00	588100			Y		\$	- \$	-	
-0110 -0111	DCF DCF		NISSAN ALTIMA NISSAN ALTIMA		1N4AL3AP0JC251034 1N4AL3AP8JC249208	181	Leon \$ Leon \$	18,013.00 18,013.00	739800 739800	Y Y V V	N N	Y	Y Y Y Y	\$	- \$		Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105 Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
-0112	DCF		NISSAN ALTIMA NISSAN ALTIMA		1N4AL3AP3/C249208		Leon \$	18,013.00	739800	Y Y		Y		\$	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 10805 St. Louis, MO 63105
	DCF		NISSAN ALTIMA		1N4AL3AP2JC247163		Leon \$	18,013.00	739800		N			\$	- \$; -	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
-0114	DCF DCF		NISSAN ALTIMA		1N4AL3AP8JC248690		Leon \$	18,013.00	739800	Y Y		Y		\$	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
-0115 -0116			NISSAN ALTIMA NISSAN ALTIMA		1N4AL3AP9JC250920 1N4AL3APXJC247136	181	Leon \$ Leon \$	18,013.00 18.013.00	739800 739800	Y Y	N	Y		\$		-	Loss Payee: Enterprise FM Trust, PO Bax 16805 St. Louis, MO 63105 Loss Payee: Enterprise FM Trust. PO Bax 16805 St. Louis. MO 63105
-0117	DCF		NISSAN ALTIMA		1N4AL3APXJC249226	181	Leon \$	18,013.00	739800		N	Ŷ		\$	- 5	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
-0118	DCF		NISSAN ALTIMA		1N4AL3AP6JC250499		Leon \$	18,013.00	739800	γγ	N	Y	Y Y	\$	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
-0119 -0120	DCF DCF		NISSAN ALTIMA NISSAN ALTIMA		1N4AL3APXJC249100 1N4AL3AP8JC249855	181	Leon \$ Leon \$	18,013.00 18.013.00	739800 739800	Y Y	N	Y Y	Y Y Y Y	<u>\$</u>	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105 Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0120	DCF		NISSAN ALTIMA		1N4AL3AP6JC249855		Leon \$	18,013.00	739800		N			\$	- 5		Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0122	DCF	2018	NISSAN ALTIMA		1N4AL3AP8JC248849	181	Leon \$	18,013.00	739800		N			\$	- \$; -	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0123	DCF		NISSAN ALTIMA		1N4AL3AP7JC247286		Leon \$	18,013.00	739800			Ŷ		\$	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0124 0125	DCF DCF		NISSAN ALTIMA NISSAN ALTIMA	+	1N4AL3AP8JC248902 1N4AL3APXJC247198		Leon \$ Leon \$	18,013.00 18,013.00	739800 739800		N N	Y Y		\$	- <mark>\$</mark>		Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105 Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0125	DCF		NISSAN ALTIMA NISSAN ALTIMA		1N4AL3APXJC247198 1N4AL3AP4JC250646		Leon \$	18,013.00	739800 739800		N			\$	- 5	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105 Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0127	DCF	2018	NISSAN ALTIMA		1N4AL3AP6JC248753	181	Leon \$	18,013.00	739800		N	Ŷ		\$	- 5	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0128	DCF		NISSAN ALTIMA		1N4AL3AP1/C247459	181	Leon \$	18,013.00	739800	Y Y	N	Y	Y Y	\$	- \$	•	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0129 0130	DCF DCF		NISSAN ALTIMA NISSAN ALTIMA	+	1N4AL3AP1JC251091 1N4AL3AP5JC251062		Leon \$ Leon \$	18,013.00 18,013.00	739800		N N	Y Y		5	- S		Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105 Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
)130	DCF		NISSAN ALTIMA NISSAN ALTIMA	1 1	1N4AL3AP3JC231082 1N4AL3AP0JC247291		Leon \$	18,013.00	739800		N N			\$	- 5		Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0132	DCF	2018	NISSAN ALTIMA		1N4AL3AP9JC250867	181	Leon \$	18,013.00	739800	Y Y	N	Y	Y Y	\$	- 5	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0133	DCF		NISSAN ALTIMA		1N4AL3AP7JC247272	181	Leon \$	15,875.00	739800					\$	- \$	•	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0134 0135	DCF DCF		NISSAN ALTIMA NISSAN ALTIMA	+	1N4AL3AP9JC250450 1N4AL3AP5JC249229	181	Leon \$ Leon \$	15,875.00 15.875.00	739800 739800		N	Y		\$	- S	•	Loss Payee: Enterprise FM Trust, PO Bax 16805 St. Louis, MO 63105 Loss Payee: Enterprise FM Trust. PO Bax 16805 St. Louis. MO 63105
0136	DCF		NISSAN ALTIMA NISSAN ALTIMA		1N4AL3AP5JC249229 1N4AL3AP6JC248669	181	Leon \$	15,875.00	739800	Y Y	N		YY	\$			Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0137	DCF	2018	NISSAN SENTRA		3N1AB7AP5JY302929	181	Leon \$	15,875.00	739800		N	Ŷ		\$	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0138	DCF		NISSAN SENTRA		3N1AB7AP2JY304105		Leon \$	15,875.00	739800		N			\$	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
139	DCF DCF		NISSAN SENTRA NISSAN SENTRA		3N1AB7AP1JY305472 3N1AB7AP2JY304959	181	Leon \$ Leon \$	15,875.00 15,875.00	739800 739800	Y Y		Y Y		<u>\$</u>	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105 Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
140	DCF		NISSAN SENTRA		3N1AB7AP4JY300136		Leon \$	15,875.00	739800	Y Y		Y		\$	- 5		Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
142	DCF		NISSAN SENTRA		3N1AB7AP8JY302911	181	Leon \$	15,875.00	739800		N	Ŷ	Y Y	\$	- \$. -	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
143	DCF		NISSAN SENTRA		3N1AB7AP0JY303552		Leon \$	15,875.00	739800	Y Y	N	Ŷ	Y Y	\$	- \$	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0144 0145	DFS DOH		CHEVROLET MALIBU DODGE GRAND CARAVAN SE		1G1ZC5ST2GF260385 2C4RDGBG3JR310343	123 123	Leon \$ Alachua \$	23,225.00 26.250.00	739800 739800	Y Y	N	Y Y	Y Y Y Y	<u>\$</u>	- \$	-	Loss Pavee: Enterarise FM Trust. PO Box 16805 St. Louis. MO 63105
0146			DODGE GRAND CARAVAN SE		2C4RDGBG1JR310343		Alachua \$	26,250.00	739800		N			5			Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
147	DOH		DODGE GRAND CARAVAN SE		2C4RDGBG8JR311908		Alachua \$	26,250.00	739800		N			\$	- 5	-	Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
0149	UF		FORD F150	SERVICE	1FTMF1EFSHKD56835		Collier \$	27,028.00	014990			Y		\$	- \$; -	
0150 0151	UF UF		FORD F150 FORD EXPLORER	SERVICE	1FTEX1EM8CFC22581 1FM5K8B89EGC60389		Collier \$ Collier \$	20,127.00 20,000.00	014990 739800		N	Y		\$	- \$	-	
0152	UF		TOYOTA TUNDRA	SERVICE	5TFUM5F10HX072306		Collier \$	35,000.00	014990			Y		\$			
0153	UF		JEEP CHEROKEE		1C4PJMAB1HW513723		Collier \$	22,270.00	739800			Ŷ		\$	- 5	-	
154	HSMV		WINNEBAGO/RV	SERVICE	1F66F5DY210A10975	123	Leon \$	173,560.00	314990	γγ	N	Y	Y Y	\$	- \$	-	
0155 0156	DOH DOH		FORD F150 FORD F150	SERVICE	1FTEW1E50JFA65122 1FTEW1E54JFA65124		Duval \$ Pinellas \$	13,917.00 13,917.00	014990		N N	Y Y		<u>\$</u>	- \$	-	
0157	DOH		FORD F150	SERVICE	1FTEW1E56JFA65125		Lake \$	13,917.00	014990		N N			\$	- 3	-	
0158	DOH		FORD F150	SERVICE	1FTEW1E59JFA65121		Lee \$	13,917.00	014990	Y Y		Ŷ	Y Y	\$	- \$. -	
0159	DOH		FORD F150	SERVICE	1FTEW1E50JFA65119		Monroe \$	13,917.00	014990		N			\$	- \$	-	
0160 0161	DOH		FORD F150 FORD F150	SERVICE	1FTEW1EFXJKE95666 1FTEW1E58JKE95665	123	Leon \$ Escambia \$	13,917.00 13.917.00	014990		N	Y		<u>\$</u>	- \$	-	
0162	FAMU		GOSHEN COACH	SERVICE	1FDFE4FS4JDC01465	181	Leon \$	72,454.00	658300	Y Y	N		Y Y	\$	- 5		
163	USF	2017	FORD F250 Crew Cab	SERVICE	1FT7W2B69HEE58256		Monroe \$	30,005.00	014990			Y		\$	- \$	-	
164	USF		FORD F250	SERVICE	1FT7W2B68BEB76147		Monroe \$	25,960.00	014990		N			\$	- \$	•	
165 166	UWF FIU		FORD EXPLORER FORD F250	SERVICE	1FM5K7D89JGC76030 1FTSW21Y18EC82672	167	Escambia \$ Miami-Dade \$	33,387.00 19,844.00	739800 014990	Y Y Y Y	N N	Y Y	Y Y Y Y	5	- 5		
167	DFS		HONDA SONATA	JENVICE	5NPE24AA0JH673941		Broward \$	22,050.00	739800	· · ·		Y	Y Y	\$	- 5		
168	JAC-PD06	2019	FORD TRANSIT CARGO	SERVICE	1 FTYR1YMOKKA16194	106	Pinellas \$	22,604.00	014990	Y Y	N	Y	Y Y	\$	- 5	-	
169	UWF		FORD TRANSIT WAGON		1FBVU4XM3KKA11595		Escambia \$	39,902.00	588100	Y Y	N	Y	Y Y	\$	- \$	•	
170 171	USF		CHEVROLET CRUZ TOYOTA RAV 4	+	1G1BC5SM6K7100328 JTMRJREV6JD242430		Hillsborough \$ Hillsborough \$	16,518.00 24,964.00	739800 739800	r Y	N	Y Y	Y Y Y Y	\$ \$	- S		
171	JAC-PD20		DODGE CARAVAN SE		2C4RDGBG2KR654747		Hilisborougn \$ Lee \$	24,954.00	739800 739800		N			\$	- 5	-	
173	JAC-SA19	2019	FORD EXPLORER		1FM5K7B87KGA37483		St. Lucie \$	24,955.00	739800		N		Y Y	\$	- \$;	
174	USF		HYUNDAI GENESIS		KMHG54JH0KU050528		Hillsborough \$	69,228.00	739800			Y		\$	- \$	-	
175 176	JAC-PD20 JAC-PD20		CHEVROLET IMPALA CHEVROLET IMPALA	+	2G11X5S30K9143651 2G11X56S31K9144503		Lee \$ Lee \$	21,871.00 21,871.00	739800 739800		N N	Y		\$	- 5	-	
176	JAC-PD20 JAC-PD20		CHEVROLET IMPALA CHEVROLET IMPALA	1 1	2G11X55S31K9144503 2G11X5S3XK9143818		Lee \$	21,871.00	739800 739800			Y Y		\$			
178	JAC-PD12	2019	CHEVROLET MALIBU 4DR		1G1ZC5ST6KF208198		Manatee \$	17,144.00	739800			Ŷ		\$	- \$;	
179	JAC-PD12	2013	CHEVROLET MALIBU 4DR		1G1ZC5ST4KF209687	144	Sarasota \$	17,144.00	739800	Y Y	N	Y	Y Y	\$	- \$	-	
180 181	FWC		FORD F150 (Trophy Catch) TOYOTA SIENNA	SERVICE	1FTEW1EG5JFA33686 5TDZZ3DC5KS006900		Orange County \$ Leon \$	30,000.00 33,542.00	014990 739800		N			\$	- 5	-	Loss Payee: Bartow Ford, 2800 US Hwy 98N, Bartow FL, 33830 Additional Insured and Loss Payee: Enterprise FM Trust, PO Box 16805 St. Louis, MO 63105
181	JAC-PD08		FORD ESCAPE	+	1FMCU0F77KUC07157		Alachua \$	33,542.00	739800 739800			Y Y		\$	- 5	-	naannanna maarea and Luss Fuyee. Enterprise Fini Frust, FO DUX 10003 St. LUUIS, MO 03103
83	FSU	2012	HONDA CIVIC		19XFB5F53CE000140		Leon \$	10,000.00	739800	Y Y	N	Y	Y Y	\$	- 5	÷ -	
84	FSDB	2019	DODGE CARAVAN		2CYROGBG9KR665000		St. Johns \$			Y Y				\$	- \$	-	
85 86	FSDB FSDB	2019	DODGE CARAVAN	+	2CYROGBG2KR664997 2CYROGBG2KR664999		St. Johns \$ St. Johns \$	23,390.00 23.390.00	739800 739800		N			\$	- 5	-	
	FSDB FSDB	2019 2019	DODGE CARAVAN DODGE CARAVAN	+ +	2CYROGBG2KR664999 2CYROGBG9KR665001		St. Johns \$ St. Johns \$	23,390.00 23,390.00	739800 739800	Y V	N	r Y	Y Y Y Y	\$		-	
188	FSDB	2019	DODGE CARAVAN	1 1	2CYROGBG2KR664998		St. Johns \$	23,390.00	739800	Y Y	N	Ŷ	Y Y	\$	- 5		
189	USF	2019	DODGE CARAVAN		2C4RDGB9KR502917		Hillsborough \$	25,851.00	739800	Y Y	N	Y	Y Y	\$	- \$	-	
190	USF	2019	FORD ESCAPE		1FMCU0F74KUC35210		Hillsborough \$		739800				Y Y	\$	- \$	-	
191			TOYOTA RAV4 FWD TOYOTA RAV4 FWD	+	2T3H1RFV4KW038921 2T3H1RFV7KC017806		Jackson \$ Jackson \$	28,688.00 28.688.00	739800 739800		N		Y Y Y Y	\$	- 5	-	Additional Insured: VT INC., 6150 Omni Park Drive, Mobile, AL 36609 Additional Insured: VT INC., 6150 Omni Park Drive, Mobile, AL 36609
192			TOYOTA SIENNA 8 Passenger Van	SERVICE	5TDKZ3DC2LS028419		Jackson \$	37,190.00	739800	· · ·	N	· Y	· · ·	\$	- 5		Additional Insured: VT INC., 6150 Omni Park Drive, Mobile, AL 36609 Additional Insured: VT INC., 6150 Omni Park Drive, Mobile, AL 36609
			CHEVROLET VAN		1GAZGYFG7C1181899	110	Polk \$	10,000.00	589200	Y Y	N	Y	Y Y	\$	- \$	<u>-</u>	
0193 0194					1FDEE3FL5GDC23496	110	Polk \$	30,000.00	589200	Y Y	N	Y	Y Y	\$	- \$	-	
1193 1194 1195	FPU (Admissions 1015)		FORD E SERIES BUS														
0193 0194 0195 0196	FPU (Admissions 1015) FPU (Admissions 1015)	2014	GEM (6 P)		52CG6SGA2E0010750	110	Polk \$	15,000.00	588100	Y Y	N	Y	Y Y	\$	- 5	-	
193 194 195	FPU (Admissions 1015) FPU (Admissions 1015) FPU (Admissions 1015)	2014 2014		SERVICE		110		15,000.00	588100	Y Y	N	Ŷ	Y Y	\$ \$ \$	- S	-	

Current Policy Vehicle Number	Named Insured Entity	Veh Year	Vehicle Desc	USE	Veh Id	Territory #	County	Vehicle Cost	Class Code Liab	b PIP	UM	Med Pay C	ош отс	Annual Premium	Annual Premium	Addt'l Insured / Loss Payee	
-0201	FPU (FIPRI 1020)		FORD EXPLORER XLS 4X4 4DR 6 Cylinder	SERVICE	1FMZU72K45ZA48845	110	Polk	\$ 21,589.00	014990 Y			Y	Y Y	\$ -	\$ -		
0202	FPU (Bus. Svcs)		FORD ESCAPE		1FMCU9DG2BKC12284		Polk	\$ 9,824.00	739800 Y			Y	Y Y	\$-	\$ -		
204	HSMV		FORD WINNEBAGO	SERVICE	1F66F6DY2K0A00772		Hillsborough	\$ 169,000.00	314990 Y			Y	Y Y	\$ -		Loss Payee: VT INC TRUSTEE OF WORLD OMNI, PO BOX 991817, MOBILE, AL 36691-8817	
205	HSMV		FORD WINNEBAGO	SERVICE	1F66F5DY2K0A01176		Volusia	\$ 169,000.00	314990 Y			Y	Y Y	ş -	<u>s</u> -	Loss Payee: VT INC TRUSTEE OF WORLD OMNI, PO BOX 991817, MOBILE, AL 36691-8817	
206	FAMU		FORD 156 Transit 350 HD 14 Passenger	SERVICE	1FDES8PM2KKA38355	123	Leon	\$ 61,099.00	014990 Y			Y	Y Y	ş -	<u>\$</u>		
207	JAC-PD02		FORD TRANSIT VAN	SERVICE	1FBZX2CM7KKB39437	123	Leon	\$ 34,036.65	739800 Y			Y	Y Y	ş -		Loss Payee: VT INC TRUSTEE OF WORLD OMNI, PO BOX 991817, MOBILE, AL 36691-8817	
208	FAMU		INTERNATIONAL 4300		1HTMMMMLXJH674924	-	Leon	\$ 61,465.00	214990 Y				Y Y Y Y	\$ -	<u> </u>	Additional Insured: WARD INTERNATIONAL TRUCKS, INC., WARD IDEALEASE LLC. AND THE OWNER(S), 2200 MICHIGAN AVE., MOBILE, AL 3661	
0209 0210	FSU FAU		FORD SUPER DUTY F250, 4X4 CREW CAB XL TOYOTA SEQUOIA SPT UTILITY LTD	-	1FT7W2BT4KEF87499 5TDKY5G17JS070185		Leon Palm Beach County	\$ 45,178.56 \$ 50,001.00	014990 Y 739800 Y		-	Y Y	Y Y	s -	s -	Loss Payee: VT INC TRUSTEE OF WORLD OMNI, PO BOX 991817, MOBILE, AL 36691-8817	
210	FAU		MERCEDES BENZ E 300		WDDZF4JB7JA482934		Palm Beach County	\$ 54,050.00	739800 Y			Y	7 7 Y Y	3 - 6		Loss Payee: MERCEDES BENZ FINANCIAL SERVICES, PO BOX 591817, MOBILE, AL 30891-8817	
213	LISE		FORD TRANSIT CV350 MED ROOF-	SERVICE	1FTBW1DM1KKA70799		Hillsborough	\$ 28.676.00	014990 Y			Y	Y Y	2	6	LOSS PUPEE. MERCEDES BENZ FINANCIAE SERVICES, PO BOX 5205, CAROL STREAM, IE 00157	
213	FAU	2013	FORD ECONOLINE E250	SERVICE	1FDXE45S19DA06490		Palm Beach County	\$ 11.600.00	739800 Y			Y	7 7 Y Y	5	6		
0215	I IE	2003	TOYOTA TUNDRA	SERVICE	5TFDM5F1XKX083840		St. Lucie	\$ 16,169.00	014990 Y			Y	v v	\$.	\$		
216	UE	2019	TOYOTA TUNDRA	SERVICE	5TFDM5F13KX083856		St. Lucie	\$ 16,169.00	014990 Y			Y	x x	¢ .	\$		
217	DOH	2020	CHEVROLET TAHOE	JENNILE	2GNSKAKC9LR206828		Leon	\$ 49.000.00	739800 Y			Y	Y Y	¢ .	\$	Loss Payee: ACME AUTO LEASING, 440 WASHINGTON, NORTH HAVEN, CT. USA 06437	
218	FAU	2020	TOYOTA COROLLA		JTDDPRAE0LJ079630		Palm Beach County	\$ 17,504.45	739800 Y			Y	Y Y	\$ -	\$.		
219	FAU	2020	TOYOTA COROLLA		JTDDPRAE0L1080938		Palm Beach County	\$ 17,504.45	739800 Y			Y	Y Y	\$ -	\$.		
220	FAU	2020	TOYOTA COROLLA		JTDDPRAE0L1081690		Palm Beach County	\$ 17,504.45	739800 Y			Y	Y Y	\$.	\$.		
221	JAC-SA17		CHEVROLET TRAVERSE LS FWD		1GNERFKW3LJ181729		Broward	\$ 34,061.25	739800 Y			Ŷ	Y Y	s -	\$ -		
223	JAC-SA19		FORD FUSION		3FA6P0G73LR104047	158	St. Lucie	\$ 17,670.80	739800 Y				Y Y	s -	\$ -		
224	JAC-SA19		FORD FUSION		3FA6P0G76LR104236		St. Lucie	\$ 17,670.80	739800 Y				Y Y	s -	\$ -		
225	JAC-SA19		FORD FLEX		2FMGK5B88KBA17893		St. Lucie	\$ 29,550.00	739800 Y			Ŷ	Y Y	s -	\$ -		
226	FAU		ACURA RLX		JH4KC2F96LC000278		Palm Beach County	\$ 61.900.00	739800 Y			Y	Y Y	\$ -	\$.		
227	NCE	2020	FORD TRANSIT 350 WAGON		1FBAX2Y82LKA04974		Sarasota	\$ 33,276.00	588200 Y			Ŷ	Y Y	\$.	\$.		
228	UNE		GMC TERRAIN		3GKALMEV2LL205340		Duval	\$ 24,448.00		Y Y		Ŷ	Y Y	\$.	\$.		
229	JAC-SA19		FORD EXPLORER		1FMSK7BH1LGB61205		St. Lucie	\$ 26,551.68	739800 Y			Y	Y Y	s -	s -		
230	USF		FORD TRANSIT 250 AMBULANCE		1FDYR2CM5JKB40808		Hillsborough	\$ 75.000.00	791900 Y		N	Y	Y Y	s -	s -	AGREED VALUE NOT ACTUAL CASH VALUE) SPECIAL EQUIPMENT DETAILS PROVIDED	
231	FAU	2019	ASPT GT4	ELECTRIC CAR	FLA108390	120	Palm Beach County	\$ 60,000.00	739800 Y	Y Y	N	Y	Y Y	s -	s -		
0232	UWF		CHEVROLET SILVERADO 4X4 CREW CAB		1GC1KREG9KF179521		Escambia	\$ 33,799.00	014990 Y	Y Y	N	Y	Y Y	\$ -	s -		
0233	FAU		ELDORADO 24 PASSENGER BUS		1FDAF5GYXKEG59491		Palm Beach County	\$ 90,436.00	658300 Y		N	Ŷ	Y Y	\$ -	\$ -		
0234	FAU	2020	ELDORADO 24 PASSENGER BUS		1FDUF5GT6LDA01398	120	Palm Beach County	\$ 90,436.00	658300 Y	Y Y	N	Y	Y Y	\$-	\$ -		
235	UF	2020	CHEVROLET SILVERADO		3GCUYAEFXLG289613	158	St. Lucie	\$ 30,000.00	014990 Y	Y Y	N	Y	Y Y	\$ -	\$ -	Loss Payee: THE BANCORP, 3755 PARK LAKE STREET, ORLANDO, FL 32803	
0236	FPU	2020	FORD SUPERCREW F-150 4WD	SERVICE	1FTFW1E53LKD06248	110	Polk	\$ 33,859.26	014990 Y	Y Y	N	Y	Y Y	\$ -	\$ -		
237	UNF	2019	GMC ARCADIA SLT		1GKKNMLS1KZ202802	136	Duval	\$ 24,000.00	739800 Y	Y Y	N	Y	Y Y	\$ -	\$ -		
240	USF	2020	FORD LINCOLN AVIATOR		5LM5J7XC8LGL27651	107	Hillsborough	\$ 74,120.00	739800 Y	Y Y	N	Y	Y Y	\$ -	\$ -	Loss Payee: NORTHGATE LINCOLN MERCURY INC. DBA PARKS LINCOLN TAMPA, 10505 NORTH FLORIDA AVE, TAMPA, FL 33612	
241	USF	2020	FORD EXPLORER		1FMSK7FHXLGB47846	107	Hillsborough	\$ 47,415.00	739800 Y	Y Y	N	Y	Y Y	\$ -	\$ -	Loss Payee: MUIRFIELD INC., DBA PARKS FORD OF WESLEY CHAPEL, 28739 SR 54 WEST, WESLEY CHAPEL, FL 33543	
242	UF	2020	TOYOTA TACOMA SR5		5TFCZ5AN9LX240234	145	Collier	\$ 34,142.00	739800 Y	Y Y	N	Y	Y Y	\$ -	\$ -	Premium from FL-0148 deletion applied to this vehicle addition	
243	UF	2021	TOYOTA RAV4 HYDRID LE AWD SE		4T3L6RFVXMU017277	145	Collier	\$ 26,681.00	739800 Y	Y Y	N	Y	Y Y	\$ -	\$ -		
244	UF	2021	TOYOTA RAV4 HYDRID LE AWD SE		4T3L6RFV2MU017015	145	Collier	\$ 26,681.00	739800 Y	Y Y	N	Y	Y Y	\$ -	\$ -		
245	UWF	2020	FREIGHTLINER MC WINNEBAGO WK1385	SERVICE	4UZACMFC8LCMF0347	167	Escambia	\$ 330,000.00	314990 Y	Υ Υ	N	Y	Y Y	\$ -	\$ -		
246	UWF	2020	FREIGHTLINER MC (See UWF MAC Units Tab for SPECs)	SERVICE	4UZACMFC1LCMG2470	167	Escambia	\$ 330,000.00	314990 Y	Y Y	N	Y	Y Y	\$ -	\$ -		
247	FPU (Bus. Svcs)	2020	FORD TRANSIT-350 (11 seater; wheelchair access)	SERVICE	1FBVU4X82LKA46181	110	Polk	\$ 54,575.00	739800 Y	Y Y	N	Ŷ	Y Y	\$ -	\$ -	Loss Payee and Additional Insured : FORD MOTOR CREDIT COMPANY, LLCI, their successors and assigned	
248	UWF	2021	LINCOLN AVIATOR		3LM5J7XC3MGL03338		Hillsborough	\$ 43,000.00		Υ Υ		Y	Y Y	\$ -		Loss Payee: NORTHGATE LINCOLN MERCURY INC. DBA PARKS LINCOLN TAMPA, 10505 NORTH FLORIDA AVE, TAMPA, FL 33612	
249	UF		CHEVY SILVERADO	SERVICE	3GCPYAEH2MG207986		St. Lucie	\$ 30,000.00	014990 Y				Y Y	\$ -	<u>s</u> -	Loss Payee: THE BANCORP, PO BOX 4307, TIMONIUM, MD. 21094	
250	UNF		MERCEDES BENZ SPRINTER 9 PASSENGER VAN		W1X5EDHY4LP228829		Duval	\$ 95,000.00	560900 Y				Y Y	\$ -	\$ -		
251	FSDB		FORD TRANSIT 8 PASSENGER VAN		IFMZKIY87LK00828		St. Johns	\$ 29,995.00	620300 Y				Y Y	\$-	\$ -		
252	FSDB	2020	FORD TRANSIT 8 PASSENGER VAN		IFMZKIY89LK00829	138	St. Johns	\$ 29,995.00	620300 Y			Y	Y Y	\$ -	\$ -		
253	FSDB		FORD TRANSIT 8 PASSENGER VAN		IFMZKIY80LB74625	138	St. Johns	\$ 29,995.00	620300 Y			Y	Y Y	\$ -	\$ -		
254	FSDB		BLUEBIRD VISION 71 PASSENGER SCHOOL BUS		IBAKGCSA5MF375875	138	St. Johns	\$ 119,316.41	620300 Y			Y	Y Y	\$ -	\$ -		
255	FSDB		BLUEBIRD 84 PASSENGER REAR ENGINE SCHOOL BUS		IBABNB6A3NF381105		St. Johns	\$ 29,995.00	620300 Y				Y Y	\$ -	\$ -		
256	FSDB		BLUEBIRD 84 PASSENGER REAR ENGINE SCHOOL BUS		IBABNB6A3NF381106		St. Johns	\$ 29,995.00	620300 Y				Y Y	<u>\$</u>	<u>s</u> -		
257	FAU		MOKE		5YNWAHBGXKS102528	-	Palm Beach County	\$ 25,000.00	739800 Y			Y	Y Y	\$ -		Loss Payee: DOERING LEASING CO., 15300 W. Capitol Drive, Brookfield, WI 53005	
	FAU	2021	TOYOTA SEQUOIA SR5 4 x 2		5TDAY5A14MS076244	-	Palm Beach County	\$ 49,594.00	739800 Y			Y	Y Y	<u>\$</u>		Loss Payee:	
	UNF		GMC SIERRA		3GTP9EED6LG101895		Duval	\$ 71,000.00	739800 Y				Y Y	<u>\$</u>		Loss Payee:	
	DFS	2021	HYUNDAI SONATA HYBRID		KMHL24JJ3MA030594		Leon Leon	\$ 36,000.00 \$ 36,000.00	739800 Y 739800 Y				Y Y Y Y	ş -		Loss Payee: GSA (Tom Effective 7/6)	
	DFS		HYUNDAI SONATA HYBRID		KMHL24JJ5MA030564											Loss Payee: GSA (Matt Effective 7/8)	

			Policy Period 1		Policy Period 2
		10	0/20/2021-10/20/2022	1	10/20/2022-10/20/2023
			Assessments or Fees		Assessments or Fees
	Assessment (insert name of Assessment & Authorizing Statute)	\$ -	\$-	\$ -	\$
	Assessment (insert name of Assessment & Authorizing Statute)	\$ -	\$-	\$ -	\$
Statutory	Assessment (insert name of Assessment & Authorizing Statute)	\$ -	\$-	\$ -	\$
issessments or Fees	Fee (insert name of Fee)		\$-		\$
	Fee (insert name of Fee)		\$ -		\$
	Fee (insert name of Fee)		\$ -		\$
	TOTAL ANNUAL ASSESSMENTS A	ND EEES	Policy Period 1		Policy Period 2
	TOTAL ANNOAL ASSESSIVENTS A	ND FEES	ş -		\$
			Policy Period 1		Policy Period 2
	TOTAL PREMI	UM (TP)	\$ -		\$
			Policy Period 1		Policy Period 2
	DISCOUNTED PREMI	UM (DP)	\$ -		NO BID
				-	
	CALCULATED PREMI	UM (CP)	NO BID		

PREMIUM SUB-TOTAL \$ - \$ -



1. Department Insurance Program

The State of Florida has statutorily established the following two methods for state agencies and other governmental entities to obtain insurance coverage: (1) from the State Risk Management Trust Fund (SRMTF) administered by the Department of Financial Services, Division of Risk Management, for property, general liability, automotive liability, federal civil rights, court-awarded attorney's fees in certain other proceedings against the state, and workers compensation, as established by Chapter 284, Florida Statutes; and (2) from commercial insurance purchased by the Division of State Purchasing pursuant to sections 287.022 and 287.042, Florida Statutes, as further specified in Rule 60A-1.015, Florida Administrative Code, for risks not eligible for coverage through the SRMTF.

Section 287.022(1), Florida Statutes, provides:

Insurance, while not a commodity, nevertheless shall be purchased for all agencies by the department, except that agencies may purchase title insurance for land acquisition and may make emergency purchases of insurance pursuant to s. 287.057(3)(a), Florida Statutes. The procedures for purchasing insurance, whether the purchase is made by the department or by the agencies, shall be the same as those set forth herein for the purchase of commodities.

State Purchasing operates the Department's Insurance Program, which is responsible for the purchase and management of insurance for state agencies and Eligible Users, at their own choosing and based upon funding allocations.

The purpose and goal of the Department's Insurance Program is to provide coverage at the best premium rates possible for Florida's State Agencies.

2. Purpose

The Contractor shall market and secure an Insurance Policy on behalf of the State of Florida and the current Named Insureds that shall, at a minimum, include coverage that is the same or better coverage set forth in ITB Attachments G, Commercial Automobile Insurance, Expiring Policy GPNU-AU-0024153-00/010, incorporated herein by reference, and the coverage set forth in section 5, Coverage Requirements.

The Insurance Policy secured on behalf of the State of Florida and the Named Insureds shall be provided at the pricing specified in the Bid, provided in accordance with Florida Statutes, and conform with the terms and conditions specified in the Contract.

3. Definitions

Definitions contained in section 287.012, Florida Statutes (F.S.); and Rule 60A-1.001, Florida Administrative Code (F.A.C.); are incorporated by reference. In the event of a conflict, the definitions listed in this section supersede the incorporated definitions for the purposes of this document. All definitions apply in both their singular and plural sense.



Broker – An insurance intermediary that holds current and valid Florida resident or nonresident insurance license(s) in the appropriate line of business described in this SOW.

Business Day – Monday through Friday, inclusive, except for those holidays specified in section 110.117, F.S., from 8:00 a.m. to 5:00 p.m. Eastern Time.

Claim – A demand for recovery for loss or damages resulting from a covered cause of loss.

Confidential Information – Information that is trade secret or otherwise confidential or exempt from disclosure under Florida or federal law.

Contract -

The written agreement between the Department and the awarded Bidder(s) resulting from ITB No. 21-84131503.

Contractor – A Broker that enters into a Contract with the Department as a result of ITB No. 21-84131503.

Customer – A state agency or Eligible User included in the Insurance Policy.

Department – The Department of Management Services, a state agency.

Eligible User – For the purposes of this Contract Eligible Users are state universities, as described by section 1000.21(6), Florida Statutes.

Insurance Policy or Policy – Has the same meaning as defined in section 627.402(3), F.S.

The parties to the Insurance Policy will be the Department, the Named Insured, the Broker, and the Insurer.

Insurer – Has the same meaning as defined in section 624.80(1), F.S. The insurance company selected by the Broker to provide insurance coverage described in this SOW. The term 'Underwriter' is synonymous with 'Insurer' in this procurement.

Named Insured - Those entities listed in the Scope of Work and those added during the Policy Period.

Policy Inception - The effective date of the Insurance Policy.



Policy Period – The time between the exact hour and date of Policy Inception and the hour and date of expiration.

Premium – Has the same meaning as defined in section 627.041(2), F.S.

State – The State of Florida.

4. Named Insured

The master policyholder is the State of Florida, c/o the Department of Management Services, Division of State Purchasing, 4050 Esplanade Way, Suite 360, Tallahassee, FL 32399-0950.

The following entities are the current Named Insureds for whom coverage is being sought:

DCF	Department of Children and Families
DFS	Department of Financial Services
DHSMV	Department of Highway Safety and Motor Vehicles
FAMU	Florida Agricultural and Mechanical University
FAU	Florida Atlantic University
FIU	Florida International University
FPU	Florida Polytechnic University
FSDB	Florida School for the Deaf and Blind
FSU	Florida State University
FWC	Florida Fish and Wildlife Commission
JAC	Justice Administration Commission
NCF	New College of Florida
UF	University of Florida
UNF	University of North Florida
USF	University of South Florida
UWF	University of West Florida

NOTE: Named Insured may be requested to be added or removed during the Policy Period as outlined in this SOW.

5. Coverage Requirements

The State's current program provides for commercial automobile insurance for eligible users.

Insurance Policy coverage procured through this solicitation shall be the same or better as provided in Attachment G, Expiring Commercial Auto Policy No. GPNU-AU-0024153-00 and as set forth in this SOW. Key coverage requirements are provided in the sections below; however, the full Policy requirements are located in the expiring Policies.



The Department reserves the right to request additions to or deletions from existing coverages or exposures stated in the Insurance Policy on behalf of the Named Insured when deemed to be in the State's best interest in accordance with Section 7.8, Additions/Deletions.

5.1 Locations of Covered Property

Locations of the vehicles operated by Named Insured vary throughout the State of Florida. Coverage may be modified by the State throughout the Policy Period as required by each Named Insured throughout the Policy term, but the Named Insured remain responsible for any Premium payment assessed while participating in the Policy coverage.

5.2. Commercial Automobile Coverage

Coverage will include combined single limit liability, personal injury property (PIP), medical payments, Collision and Other than Collision, as indicated in Attachment E, Price Sheet, and as provided by Attachment G, Expiring Policy GPNU-AU-0024153-00, auto coverage declarations page.

No Uninsured Motorist coverage is required.

5.3 Valuation

Policy valuation is actual cash value of the vehicle.

5.4 Historical Premium and Loss Information.

The historical premium and loss information for Attachment G, Expiring Commercial Auto Policy No. GPNU-AU-0024153-00 is included in ITB Attachment J, Historical Premium and Loss Information.

6. Premium Pricing

The Contractor shall adhere to the prices listed in the Price Sheet as submitted, which are incorporated by reference into the Contract. All coverage premiums assessed at Policy inception are to be fixed for the full Policy period.

6.1 Premium and Deductible Adjustments

Premium and deductible decreases issued by the Contractor are permissible at any time during the initial Policy Period and any additional Policy Periods.

For additional Policy Periods, the Broker should have identified in its insurer quotation the % loss ratio threshold which, if met or exceeded by the Named Insured during any Policy Period, will prompt the Insurer to reevaluate premium and/or deductible pricing for the next Policy Period. Any reevaluation of premiums and/or deductibles are subject to DMS written approval, must be adjusted equitably, and shall be based upon specific exposure risks and individual loss experience to the extent market conditions allow. If Contractor anticipates adjustments to premium pricing, deductibles, or Policy terms and



conditions, Contractor shall provide the Department with written notice four (4) months prior to the Policy Period expiration to the Department's Contract Manager

Notwithstanding Paragraph II of the Contract and Section 6.9 of the Special Contract Conditions included in ITB Attachment A, Draft Contract, adjustments in premiums and/or deductibles do not constitute a change to the Contract requiring an amendment executed by both Parties. After the Department provides written approval of any premium and/or deductible adjustments, the Department will incorporate such changes directly into the Contract documents.

7. Broker /Underwriter Responsibilities

The Broker will market and secure a commercial automobile insurance policy on behalf of the State of Florida and the Named Insureds, c/o the Department of Management Services, Division of State Purchasing, 4050 Esplanade Way, Suite 360, Tallahassee, FL 32399-0950.

7.1 Customer Service and Administration

The Contractor shall provide Customers all services during Business Days. State agencies observe holidays in accordance with section 110.117, Florida Statutes.

The Contractor shall have a single point of contact to serve as Contract Manager as provided on Attachment I, Broker Information. The Contract Manager may support multiple Customers and must respond to Customer calls and/or emails within one (1) Business Day. The Contract Manager must be able to provide or arrange for all aspects of Customer support and problem resolutions. Back-up coverage must be provided by an equally knowledgeable person.

In addition to a dedicated Contract Manager, the Contractor shall provide toll-free Customer service phone support from 8:00 a.m. Eastern Time to 5:00 p.m. Eastern Time, Monday through Friday, except for National and State-recognized holidays. TDD (Telecommunication Device for the Deaf) access must be made available during the above-named Customer service operating hours.

7.2 Policy Administration

The Broker must aide in the fulfillment of all obligations to the Department and its Named Insureds as provided for under the Insurance Policy. The Broker will, at a minimum: communicate with the Insurer on all changes to the Policy requested by the Department; provide endorsements for changes to the Policy schedule; forward premium payments to the Insurer, as appropriate; and assist in the filing of claims and claim settlement payments. Any failure by the Broker to provide Policy administration to the Department will constitute a breach of Contract.

7.3 Routine Communications

All routine communications and reports related to the Contract shall be sent to the Department's Contract Manager. If any information listed on the Broker Information Form



attachment changes during the life of the Contract, then the Contractor shall update the attachments and submit to the Department's Contract Manager. Routine communications may be by e-mail, regular mail, or telephone.

7.4 Broker License

The Broker, for the duration of the Contract term, must hold current and valid Florida resident or non-resident insurance license in the appropriate line of business for the insurance coverage provided under the Contract.

7.5 Insurance Policy Conditions

After Contract award, the Contractor must provide the Department an original and complete copy of the Insurance Policy, including declarations, insuring agreements, conditions, exclusions, schedule of coverage, and all necessary endorsements at Policy inception, or an insurance binder until such Insurance Policy is received. The Insurance Policy must include a manuscript endorsement, must conform to the requirements stated in the SOW, and may not take exception to terms in the SOW. Failure to submit a complete Insurance Policy will constitute sufficient grounds for termination.

7.6 Underwriting Information

- 7.6.1 The Department will coordinate all coverage requests on behalf of the Named Insureds.
- 7.6.2 Each Named Insured operates under its internal policies and procedures and must abide by and enforce all policies, State of Florida rules and statutes, and federal guidelines, as applicable.
- 7.6.3 DL provided by request only

7.7 Invoices for Insurance Premiums

In addition to the terms in Special Contract Conditions subsection 3.3, Payment Invoicing, the following applies to Contractor invoicing:

- 7.7.1 Premiums will be invoiced annually at Policy Inception for the Named Insured.
- 7.7.2 Premiums for additions added via Policy endorsement to either Policy shall be invoiced upon binding of the requested additional coverage.
- 7.7.3 Invoices are to contain enough detail for pre- and post-audit. Invoices must include an invoice number, the insurance company name, Federal Employer Identification Number, the Policy number, effective dates of coverage, a description of the coverage, payment due date, and a remittance address.
- 7.7.4 Invoices are to be issued in the name of the Named Insured and must be provided in writing to the Named Insured and to the Department's Contract Manager.
- 7.7.5 The Department's Contract Manager may, but is not obligated to, assist the Broker in securing these payments to the best of its ability.



Solicitation No: 21-84131503-ITB Commercial Automobile Insurance Attachment F Scope of Work (SOW)

7.8 Additions/Deletions

The Department reserves the right to request additions to or deletions from existing coverages or exposures stated in the Insurance Policy on behalf of the Named Insured when deemed to be in the State's best interest. All requests for additions to or deletions from coverage will be made by the Department.

Additions in coverage or exposure must be consistent with current Contract Insurance Policy terms and conditions. However, the Insurer is not required to accept the State's addition if it can document that such addition results in an exposure change warranting a change in the Insurance Policy conditions or terms.

The Broker and Underwriter have 30 days from receipt of the Department's request to add coverage to the State Policy and receipt of all applicable previous and current coverage information to accept or reject the addition of a coverage under the Policy.

Upon acceptance by the Contactor and Underwriter, the Broker will invoice the Named Insured as indicated above.

The Broker or Underwriter will provide premium refund checks to the Named Insured, as appropriate, when changes are made to individual Named Insured's schedules. Refund checks may be provided directly to the Named Insured. The Broker will provide a copy of all refund checks to the Department's Contract Manager for the contract file.

7.9 Claims Settlement

Claims must be submitted by the Named Insured to the Broker as outlined in the Insurance Policy that results from this Contract. The Broker or Underwriter must notify the Department in writing at the time the Claim is submitted by a Named Insured during the Policy Period. The Broker must coordinate with the Named Insured filing the Claim on any details required by the Broker to ensure proper settlement.

The Broker is to track all Claims submitted and identify which Named Insured filed the Claim. Any settlement checks must be issued in the name of the Named Insured that filed the Claim, c/o State of Florida - Department of Management Services. Settlement checks are to include Policy name and number; the Named Insured who filed the Claim; date of loss; total Claim filed, deductible, check number, and check amount.

The Broker will provide Claim settlement checks directly to the Named Insured filing the Claim whenever possible, and the Broker will provide a copy of the settlement check to the Department's Contract Manager.

7.10 Historical Premium and Loss Information

The Broker must submit a Claim and loss summary report annually to the Department's Contract Manager. The Department reserves the right to request loss runs at any time during the Policy Period, and the Broker shall comply with such requests. The historical premium and loss information for the past five years is included in ITB Attachment J.



Solicitation No: 21-84131503-ITB Commercial Automobile Insurance Attachment F Scope of Work (SOW)

This information is for informational purposes only and should not be construed as representing actual losses under a new Contract.

7.11 Broker Commission

The Broker will comply with section 287.022, Florida Statutes, which requires an insurer or agent that pays a commission or any portion thereof to any person, on insurance purchased by the Department, to report such payment to the Department in writing and under oath within 30 days thereafter.

7.12 Independent Broker

The Broker and its employees, agents, representatives, and subcontractors are not employees or agents of the Department and are not entitled to the benefits of State employees. The Department will not be bound by any acts or conduct of the Broker or its employees, agents, representatives, or subcontractors. The Broker agrees to include this provision in all of its subcontracts under the Contract.

7.13 Insurer Serviceability

The Broker will notify the Department's Contract Manager of any concerns regarding the ability to provide ongoing services, claims settlement, or any diminished actions including, but not limited to, the reduction in the financial rating of the Insurer providing coverage subsequent to Contract award. Failure to notify the Department of concerns may, at the Department's option result in termination of the Insurance Policy.

7.14 Insurance Policy Cancellation

In addition to the requirements of Special Contract Conditions subsection 3.9, Return of Funds, the following applies to cancellation of the Insurance Policy:

All cancellations must be calculated on a pro-rata basis and must adhere to the requirements of Florida law. For the purpose of this clause, pro-rata means, in the case of cancellation of an Insurance Policy, the return of the Premium for the unexpired term of the Policy, without penalty for interim cancellation. The Department reserves the right to cancel the Insurance Policy at any time by providing written notice to the Broker. Such cancellation request will be mailed to the Broker's Contract Manager. Cancellation notices from the Insurer will be as provided for in the Insurance Policy and must be mailed to the Department's Contract Manager.

8. Payments

Payments by Named Insured shall be made in accordance with sections 215.422 and 287.0585, F.S.

9. Ad-hoc Report

The Department reserves the right to require additional information pertaining to the Contract.



Solicitation No: 21-84131503-ITB Commercial Automobile Insurance Attachment F Scope of Work (SOW)

10. Contract Transition

Upon Contract expiration or termination, the Contractor shall ensure a seamless transfer of Contract responsibilities with any subsequent broker/insurer necessary to transition the products and services of the Contract. The Contractor and subsequent broker/insurer assume all expenses related to the Contract transition.

11. Other Fees and Charges

The State requires additional assessments for specific insurance coverage types including, but not limited to, property and casualty insurance premiums except for those exempted by statute (workers' compensation, medical malpractice, and national flood insurance).

Brokers and/or Insurers shall not include surplus line tax fees in the cost of this coverage, in accordance with section 626.932(4), Florida Statutes.

Fees or charges not indicated on Attachment E, Price Sheet, unless provided by law, are prohibited.



Solicitation No. 21-84131503-ITB Commercial Automobile Insurance Attachment H Certification of Drug Free Workplace

In the event there is no multiple award contemplated in the ITB, and the Department receives equal Bids eligible for award, the Department will comply with Florida Statutes in accordance with the 'Equal Bids' section of the ITB. When the Department receives Equal Bids eligible for award, with respect to price, quality and service, the Department will apply a preference in accordance with section 287.087, F.S., to the Bidder that has signed and submitted this form with its Bid certifying it has implemented a drug-free workforce program in accordance with the provisions below.

I certify that the Bidder has implemented a drug-free workplace program that includes the following:

- (1) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace and specifies the actions that will be taken against employees for violations of such prohibition.
- (2) Informing employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- (3) Giving each employee engaged in providing the commodities or contractual services that are provided under the Bid a copy of the statement specified in (1) above.
- (4) In the statement specified in (1), above, notifying the employees that, as a condition of working on the commodities or contractual services that are under Bid, the employees will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any State, for a violation occurring in the workplace no later than five days after such conviction.
- (5) Imposing a sanction on or requiring the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- (6) Making a good faith effort to continuing to maintain a drug-free workplace through implementation of these provisions.

As the person authorized by the Bidder to sign the attachment, I certify that the Bidder complies fully with the above requirements. False statements are punishable under law.

Date



Solicitation No. 21-84131503-ITB Commercial Automobile Insurance Attachment I Broker Information

Bidder: _____

FEIN: _____

Bid/Insurance Policy Administration

Please identify the person who is to be responsible for administering the Insurance Policy on your behalf if award is made and include an emergency contact phone number.

Name:_____

Title:_____

Street Address:

E-mail Address: _____

Phone Number(s):

Fax Number:

Emergency Number: _____

If the person responsible for answering questions about the Bidder's Bid is different from the person identified above, please provide the same information for the person responsible for answering questions about the Bidder's Bid.

Name:
Title:
Street Address:
E-mail Address:
Phone Number(s):
Fax Number:

Solicitation No. 21-84131503-ITB Commerical Automobile Insurance Attachment J Historical Loss Information

		@ policy	inception					
Insurer Policy Yr.		Premium	# of vehicles	Avg premium	# of Claims		Total Incurred	Loss Ratio
				per Vehicle	REPORTED	OPEN		
Glatfelters	2020-2021	\$ 293,389.00	241	\$ 1,217.38	16	4	\$ 47,251.00	16%
Glatfelters	2019-2020	\$ 303,246.00	247	\$ 1,227.72	18	1	\$ 38,669.00	13%
Glatfelters	2018-2019	\$ 243,919.00	196	\$ 1,244.48	24	0	\$ 17,102.00	7%
Glatfelters	2017-2018	\$ 177,714.00	142	\$ 1,251.51	27	0	\$ 29,051.00	16%
Auto Owners	2016-2017	\$ 286,637.02	226	\$ 1,268.31			\$ 157,646.87	55%
	5 yr. average	\$ 260,981.00	210				\$ 57,943.97	21%

Policy Yr.	DCF # o	f Claims
Folicy II.	Auto Liab.	Phy. Damage
2020-2021	2	6
2019-2020	2	9
2018-2019	2	15
2017-2018	4	9

Policy Yr.	FAMU # of Claims		
Policy II.	Auto Liab.	Phy. Damage	
2020-2021	1	0	
2019-2020	0	0	
2018-2019	0	1	
2017-2018	1	2	

Policy Yr.	FSDB # of Claims		
Folicy fr.	Auto Liab.	Phy. Damage	
2020-2021	0	0	
2019-2020	0	0	
2018-2019	0	1	
2017-2018	0	0	

Policy Yr.	JAC # of Claims		
Folicy II.	Auto Liab.	Phy. Damage	
2020-2021	1	1	
2019-2020	2	2	
2018-2019	0	1	
2017-2018	1	2	

Policy Yr.	UNF # of Claims		
Policy II.	Auto Liab.	Phy. Damage	
2020-2021	0	0	
2019-2020	0	0	
2018-2019	0	0	
2017-2018	1	3	

Policy Yr.	FPU # of Claims		
Folicy II.	Auto Liab.	Phy. Damage	
2020-2021	1	1	
2019-2020	0	0	

Policy Yr.	DOH # of Claims		
Folicy II.	Auto Liab.	Phy. Damage	
2020-2021	1	4	
2019-2020	0	0	
2018-2019	0	2	
2017-2018	0	1	

Policy Yr.	FAU # of	Claims
Policy II.	Auto Liab.	Phy. Damage
2020-2021	0	0
2019-2020	1	1
2018-2019	0	1
2017-2018	0	3

Policy Yr.	FSU # of Claims		
Folicy II.	Auto Liab.	Phy. Damage	
2020-2021	0	0	
2019-2020	0	0	
2018-2019	1	0	
2017-2018	0	2	

Policy Yr.	UF # of Claims		
Folicy II.	Auto Liab.	Phy. Damage	
2020-2021	0	1	
2019-2020	0	0	
2018-2019	0	1	
2017-2018	0	0	

Policy Yr.	USF # of	f Claims
Folicy II.	Auto Liab.	Phy. Damage
2020-2021	0	0
2019-2020	0	0
2018-2019	0	0
2017-2018	0	0

For policy years 2017-2021 refer to Glatfelter Claims Valued as of May 14, 2021 For FAU policy years 2017-2019 refer to Auto Owners Loss Run dated June 27, 2019. FAU loss experience, if any, for policy year 2020 is included in the Glatfelters loss run nor Detailed loss runs are provided on the following pages.

Page 1 C73827

	Customer	Summary Sorted by Poli	ісу Туре									PC-LE02-E
	Claims Va	lued as of Friday, May 14	l, 2021									
Policy Type	Carrier	Policy Number	Effective Date	Expiration Date	Claims Reported	Claims Open	Loss Reserve	Expense Reserve	Paid Losses	Paid Expenses	Recoveries	Total Incurred
Auto	AAIC	GPPAAU4050065-00	10/20/2017	10/20/2018	27	0	0	0	43,224	1,191	(15,364)	29,051
	AAIC	GPPAAU4050065-01	10/20/2018	10/20/2019	24	0	0	0	35,943	154	(18,995)	17,102
	AAIC	GPPAAU4050065-02	10/20/2019	10/20/2020	18	1	20,000	0	48,832	157	(30,320)	38,669
	NUFIC	GPNUAU0024153-00	10/20/2020	10/20/2021	16	4	9,445	0	37,312	494	0	47,251
	Auto Tota	ls:			85	5	29,445	0	165,311	1,997	(64,679)	132,074
	Grand Tot	als:			85	5	29,445	0	165,311	1,997	(64,679)	132,074

AAIC American Alternative Insurance Corporation

NUFIC National Union Fire Insurance Company of Pittsburgh, Pa.

	Customer Detail So	rted By Policy & Co	overage Type							PC-LE09-
	Claims Valued as o	f Friday, May 14, 20	21							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries	Total Incurred
GPNUAU0024153-00	AUTO LIABILITY									
10/20/2020 10/20/2021	10/29/2020	10/29/2020	FLAU20101056	11/09/2020	0	0	0	0	0	(
NUFIC	FOL: Claimant	vehicle making a left	t turn across three lanes o	f traffic, second veh	let CV go. IV trav	eling in opposi	te direction stru	ck CV.		
	ACCIDENT LO	CATION: TALLAHAS	SEE, FL		L	Department of	Children and	Families - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		V	IN: 1N4AL3AP5	5JC251062 IN	SURED DRIVER:		
	01/15/2021	01/21/2021	FLAU21010750	01/29/2021	0	0	1,476	0	0	1,47
	Insured vehicle	backing struck parke	ed claimant vehicle							
	ACCIDENT LO	CATION: Lake City,	FL		D	epartment of	Health - DOH			
	AUTO: 2018 DO	DDGE GRAND CAR	AVAN SE (Class: 7398)		V	IN: 2C4RDGBG	8JR311908 IN	ISURED DRIVER	:	
	02/08/2021	02/09/2021	FLAU21020348	Open	8,500	0	3,011	0	0	11,51
	Insured vehicle	went through stop si	gn and struck claimant ve	hicle						
	ACCIDENT LO	CATION: Auburndale	e, FL		F	- Iorida Polyted	chnic Universit	y - FPU		
	AUTO: 2016 FC	ORD E-SERIES BUS	(Class: 5892)		V	IN: 1FDEE3FL50	GDC23496 IN			
	03/25/2021	04/06/2021	FLAU21040240	Open	0	0	3,517	281	0	3,79
	Insured vehicle	backing struck claim	ant vehicle							
	ACCIDENT LOO	CATION: TALLAHAS	SSEE, FL		Ľ	Department of	Children and I	Families - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		V	IN: 1N4AL3AP1	IJC251091 IN	SURED DRIVER:		
	AUTO PHYSICAL DAM	MAGE								
	10/29/2020	10/30/2020	FLAU20101056	11/11/2020	0	0	11,101	0	0	11,10 [°]
	FOL: Claimant	vehicle making a left	t turn across three lanes o	f traffic, second veh	let CV go. IV trav	eling in opposi	te direction stru	ck CV.		
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		L	Department of	F Children and	Families - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		V	IN: 1N4AL3AP5	5JC251062 II	NSURED DRIVE	ર :	
	11/10/2020	12/15/2020	FLAU20120627	12/23/2020	0	0	945	214	0	1,159
	Unknown struck	cinsured vehicle whi	le parked and unattended							

TALLAHASSEE, FL 32399-0950

	Customer Detail So	rted By Policy & C	overage Type							PC-LE09-E
	Claims Valued as o	f Friday, May 14, 20)21							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries To	tal Incurred
GPNUAU0024153-00	ACCIDENT LO	CATION: Hernando,	FL		D	epartment of	Children and Fa	amilies - DCF		
10/20/2020 10/20/2021	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)		V	IN: 1N4AL3AP)JC251034 IN	SURED DRIVER:		
NUFIC	12/16/2020	12/23/2020	FLAU20120961	01/12/2021	0	0	1,432	0	0	1,432
	Insured vehicle	vandalized and cata	lytic converter stolen							
	ACCIDENT LO	CATION: Marianna,	FL		D	epartment of	Health - DOH			
	AUTO: 2020 TC	DYOTA SIENNA 8 P	ASSENGER VAN (Class:	7398)	V	IN: 5TDKZ3DC	2LS028419			
	12/28/2020	02/04/2021	FLAU21020222	02/26/2021	0	0	752	0	0	752
	Glass damage t	to insured vehicle								
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		J	ustice Admini	stration Comm	ission - JAC		
	AUTO: 2019 FC	ORD FLEX (Class: 7	398)		V	IN: 2FMGK5B8	8KBA17893			
	01/15/2021	01/21/2021	FLAU21010750	01/29/2021	0	0	813	0	0	813
	Insured vehicle	backing struck park	ed claimant vehicle							
	ACCIDENT LO	CATION: Lake City,	FL		Ľ	Department of	Health - DOH			
	AUTO: 2018 D0	DDGE GRAND CAR	AVAN SE (Class: 7398)		V	'IN: 2C4RDGBG	8JR311908 IN	ISURED DRIVER	:	
	02/08/2021	02/09/2021	FLAU21020348	03/05/2021	0	0	0	0	0	0
	Insured vehicle	went through stop s	ign and struck claimant ve	hicle						
	ACCIDENT LO	CATION: Auburndal	e, FL		F	lorida Polytec	hnic University	- FPU		
	AUTO: 2016 FC	ORD E-SERIES BUS	6 (Class: 5892)		V	IN: 1FDEE3FL5	GDC23496 IN	SURED DRIVER:		
	02/22/2021	03/02/2021	FLAU21030188	04/06/2021	0	0	1,121	0	0	1,121
	Comp / Glass L	oss								
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		L	Department of	Children and F	Families - DCF		
	AUTO: 2018 NI	SSAN SENTRA (Cla	ass: 7398)		V	'IN: 3N1AB7AP	1JY305472 IN	SURED DRIVER:		
	02/26/2021	03/03/2021	FLAU21030205	03/15/2021	0	0	1,962	0	0	1,962
	Insured vehicle	struck deer								
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		L	Iniversity of Fl	orida - UF			
	AUTO: 2021 TC	OYOTA RAV 4 HYBI	RID LE AWD SE (Class: 7	398)	V	'IN: 4T3L6RFVX	MU017277 IN	ISURED DRIVER		
	02/28/2021	03/02/2021	FLAU21030182	03/08/2021	0	0	7,530	0	0	7,530
	Insured vehicle	struck by claimant v	ehicle in intersection							
	ACCIDENT LO	CATION: TALLAHA	SSEE, FL		Ľ	Department of	Children and F	amilies - DCF		

SUITE 315

TALLAHASSEE, FL 32399-0950

	Customer Detail So	rted By Policy & Co	overage Type							PC-LE09-E
	Claims Valued as o	f Friday, May 14, 20	121							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries	Total Incurred
GPNUAU0024153-00	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		V	/IN: 1N4AL3AP	7JC247286 IN	SURED DRIVER:		
0/20/2020 0/20/2021	03/25/2021	04/06/2021	FLAU21040240	04/13/2021	0	0	2,798	0	0	2,798
IUFIC	Insured vehicle	backing struck claim	ant vehicle							
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL			Department of	Children and I	Families - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		V	/IN: 1N4AL3AP	IJC251091 IN	SURED DRIVER:		
	04/13/2021	04/15/2021	FLAU21040628	04/20/2021	945	0	0	0	0	945
	Insured vehicle	struck a raccoon								
	ACCIDENT LO	CATION: Frostproof,	FL		1	Department of	Children and	Families - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		v	/IN: 1N4AL3AP8	3JC248849 IN	SURED DRIVER:		l i
	04/23/2021	04/28/2021	FLAU21041160	05/06/2021	0	0	853	0	0	- 853
	Insured vehicle	struck parked insure	d vehicle							
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		L	Department of	Health - DOH			
	AUTO: 2018 DC	DDGE GRAND CAR	AVAN SE (Class: 7398)		V	/IN: 2C4RDGBG	1JR310342 IN	ISURED DRIVER	:	
	04/23/2021	04/28/2021	FLAU21041160	05/05/2021	0	0	0	0	0	C
	Insured vehicle	struck parked insure	ed vehicle							
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		L	Department of	Health - DOH			
	AUTO: 2018 DC	DDGE GRAND CAR	AVAN SE (Class: 7398)		V	/IN: 2C4RDGBG	8JR311908 IN	ISURED DRIVER	:	
	GPNUAU0024153-0	0 Totals:			9,445	0	37,312	494	0	47,251
PPAAU4050065-00	AUTO LIABILITY									
0/20/2017 0/20/2018	11/01/2017	11/08/2017	FLAU217110580	04/19/2018	0	0	2,000	1,060	0	3,060
AIC		ICLE TURNING LEF ICLES IMPACTED	T, CLAIMANT VEHICLE T	URNING RIGHT						
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		1	Florida Agricu	ltural and Mec	hanical Univers	sity - FAMU	
	AUTO: 2017 FC	ORD SUPER DUTY I	E450 (Class: 21499)		V	IN: 1FDFE4FS9	HDC31975			
	04/12/2018	04/13/2018	FLAU218040910	05/16/2018	0	0	1,391	131	0	1,522
	WHILE BACKIN VEHICLE	IG, THE INSURED \	/EHICLE STRUCK THE C	LAIMANT'S						
	ACCIDENT LO	CATION: JACKSON	VILLE, FL		L	Iniversity of	North Florida	- UNF		
	AUTO: 2016 GM	MC YUKON DENALI	(Class: 7398)		V	/IN: 1GKS1CKJO	R337755 INS	URED DRIVER:		
	07/24/2018	07/30/2018	FLAU18071288	08/06/2018	0	0	1,264	0	0	1,264

	Customer Detail So	rted By Policy & Co	overage Type							PC-LE09-E
	Claims Valued as of	Friday, May 14, 20	21							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries	Total Incurred
GPPAAU4050065-00	Insured backing	out of parking space	e and struck parked vehicl	e.						
10/20/2017 10/20/2018	ACCIDENT LOC	CATION: St Petersbu	ırg, FL			Justice Admin	istration Con	nmission - JAC	5	
AAIC	AUTO: 2012 FO	RD FUSION (Class	7398)			VIN: 3FAHP0GA	6CR418893 II	NSURED DRIVER	R:	
	07/29/2018	08/07/2018	FLAU18080315	09/07/2018	0	0	506	0	0	506
	The insured bac	ked into the claimar	t vehicle while parking							
	ACCIDENT LOC	CATION: Titusville, F	Ľ			Department	of Children aı	n <mark>d Fa</mark> milies - L	DCF	
	AUTO: 2018 NIS	SSAN ALTIMA (Clas	s: 7398)			VIN: 1N4AL3AP	1JC251091 IN	ISURED DRIVER:		
	09/07/2018	09/10/2018	FLAU18090398	10/01/2018	0	0	0	0	0	0
	Insured vehicle,	while traveling on m	ain roadway, was struck b	by claimant vehicle	who failed to yield	d right of way at	a stop sign.			
	ACCIDENT LOC	CATION: TALLAHAS	SEE, FL			Department o	f Children an	d Families - D	CF	
	AUTO: 2018 NIS	SSAN ALTIMA (Clas	s: 7398)			VIN: 1N4AL3AP	1JC247459 IN	ISURED DRIVER:		
	09/10/2018	09/13/2018	FLAU18090601	09/21/2018	0	0	0	0	0	0
	Clmt veh rear-er	nded insd veh								
	ACCIDENT LOC	CATION: Ocala, FL				Department	of Children ai	n <mark>d Fam</mark> ilies - I	DCF	
	AUTO: 2018 NIS	SSAN SENTRA (Cla	ss: 7398)		VIN: 3N1AB7AP2JY304105 INSURED DRIVER:					
	09/13/2018	09/13/2018	FLAU18090596	10/02/2018	0	0	0	0	0	0
	The insured's ve	hicle was struck by	the claimant's vehicle as t	he claimant attempt	ted to change lan	nes.				
	ACCIDENT LOC	CATION: Lakeland, I	۶L			Department of	of Children an	d Families - D	CF	
	AUTO: 2018 NIS	SSAN ALTIMA (Clas	s: 7398)			VIN: 1N4AL3AP	-			
	AUTO PHYSICAL DAM	IAGE								
	11/01/2017	11/08/2017	FLAU217110580	11/28/2017	0	0	1,099	0	0	1,099
		CLE TURNING LEF CLES IMPACTED	T, CLAIMANT VEHICLE 1	FURNING RIGHT						
	ACCIDENT LOC	CATION: TALLAHAS	SEE, FL			Florida Agricul	tural and Mech	hanical Univers	ity - FAMU	
	AUTO: 2017 FO	RD SUPER DUTY I	E450 (Class: 21499)			VIN: 1FDFE4FS9				
	04/12/2018	04/13/2018	FLAU218040910	04/23/2018	0	0	0	0	0	0
	WHILE BACKIN VEHICLE	G, THE INSURED \	EHICLE STRUCK THE C	LAIMANT'S						
	ACCIDENT LOC	CATION: JACKSON	/ILLE, FL			University of I	North Florida -	UNF		

SUITE 315 TALLAHASSEE, FL 32399-0950

Glatfelter Underwriting Services Customer Summary Loss Experience Including 5 Years of History from claim registration and policy inception

	Customer Detail So	rted By Policy & Co	overage Type							PC-LE09-
	Claims Valued as o	f Friday, May 14, 20	021							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries To	otal Incurre
GPPAAU4050065-00	AUTO: 2016 GM	MC YUKON DENALI	(Class: 7398)		VI	N: 1GKS1CKJO	R337755 INS	URED DRIVER:		
10/20/2017 10/20/2018	05/16/2018	06/20/2018	FLAU218061050	06/22/2018	0	0	2,107	0	0	2,10
AIC	DAMAGED FO	UND ON INSD VEH								
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		De	partment o	f Health - DOI	4		
	AUTO: 2013 TC	DYOTA SIENNA (Cla	ass: 7398)			N: 5TDZK3DC	-			
	06/01/2018	06/08/2018	FLAU218060564	07/17/2018	0	0	6,501	0	0	6,50
	INSD VEH STO	LEN, VEH RECOVE	ERED WITH DAMAGE							
	ACCIDENT LO	CATION: FORT MY	ERS, FL		Ju	stice Admin	istration Com	mission - JAC		
	AUTO: 2007 FC	ORD ECONOLINE E	250 SERVICE (Class: 01499)	1	VI	N: 1FTNE24W	27DA11649			
	07/29/2018	08/07/2018	FLAU18080315	08/22/2018	0	0	87	0	0	8
	The insured bac	cked into the claimar	nt vehicle while parking							
	ACCIDENT LO	CATION: Titusville, F	-L	D	epartment o	of Children an	d Families - D	OCF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)	VI	N: 1N4AL3AP	1JC251091 IN	SURED DRIVER:			
	08/14/2018	08/16/2018	FLAU18080725	09/04/2018	0	0	584	0	0	58
	Insd veh damag	jed								
	ACCIDENT LO	CATION: Fort Meade	e, FL		De	e <mark>partment</mark> o	f Children and	l Families - D	CF	
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		VI	N: 1N4AL3AP7	7JC247286 IN	SURED DRIVER:		
	08/16/2018	08/16/2018	FLAU18080757	11/19/2018	0	0	309	0	(309)	
	insured vehicle	damaged								
	ACCIDENT LO	CATION: Tallahasse	e, FL		D	<mark>epartment</mark> o	of Children an	d Families - D	CF	
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		VI	N: 1N4AL3AP()JC247291 IN	SURED DRIVER:		
	08/20/2018	08/21/2018	FLAU18080884	08/27/2018	0	0	64	0	0	6
	Glass damage t	to Insd veh								
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		Jı	ustice Admir	nistration Com	mission - JAC	:	
	AUTO: 2014 FC	ORD EXPORER (Cla	iss: 7398)		VI	N: 1FM5K8B87	7EGA92011 IN	ISURED DRIVER	:	
	08/27/2018	08/27/2018	FLAU18081154	08/31/2018	0	0	365	0	0	36
	Insd veh damag	ged								
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL		Fle	orida State	University - FS	U		
	AUTO: 2011 GM	MC SIERRA SERVIO	CE (Class: 01499)			N: 1GT12ZC84				

	Customer Detail So	rted By Policy & C	overage Type							PC-LE09-E
	Claims Valued as o	f Friday, May 14, 20)21							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries	Total Incurred
GPPAAU4050065-00	08/29/2018	08/30/2018	FLAU18090023	09/17/2018	0	0	1,268	0	0	1,268
10/20/2017 10/20/2018	Parked insd veh	damaged by clmt	reh							
AAIC	ACCIDENT LO	CATION: TALLAHA	SSEE, FL			University of	North Florida	ı - UNF		
	AUTO: 2018 GM	IC TERRAIN (Class	s: 7398)			VIN: GKALMEV1	JL208582 INS	URED DRIVER:		
	09/07/2018	09/10/2018	FLAU18090398	09/14/2018	0	0	6,962	0	0	6,962
	Insured vehicle,	while traveling on r	nain roadway, was struck b	by claimant vehicle w	vho failed to yield	d right of way at	a stop sign.			
	ACCIDENT LO	CATION: TALLAHA	SSEE, FL			Department of	Children and F	amilies - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)			VIN: 1N4AL3AP	1JC247459 IN	SURED DRIVER:		
	09/10/2018	09/13/2018	FLAU18090601	09/20/2018	0	0	2,381	0	0	2,381
	Clmt veh rear-e	nded insd veh								
	ACCIDENT LOO	CATION: Ocala, FL				Department of	of Children and	d Families - D	CF	
	AUTO: 2018 NI	SSAN SENTRA (Cla	ass: 7398)			VIN: 3N1AB7AP	2JY304105 IN		:	
	09/13/2018	09/13/2018	FLAU18090596	09/20/2018	0	0	6,452	0	(6,452)	0
	The insured's ve	ehicle was struck by	the claimant's vehicle as the	he claimant attempt	ed to change lan	ies.				
	ACCIDENT LO	CATION: Lakeland,	FL			Department	of Children ar	nd Families - I	DCF	
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)			VIN: 1N4AL3AP	7JC247272 IN	SURED DRIVER		
	09/15/2018	10/03/2018	FLAU18100284	04/19/2019	0	0	0	0	0	0
	Insd veh damag	ed								
	ACCIDENT LOO	CATION: Tallahasse	e, FL			Florida Agricu	iltural and Me	echanical Uni	versity - FAN	Л
	AUTO: 2015 G0	OSHEN COACH SE	RVICE (Class: 21499)			VIN: 1FDEE3FS3			-	
	09/30/2018	10/02/2018	FLAU18100168	10/12/2018	0	0	396	0	0	396
	Insd veh damag	ed running over rub	ber from blown tire of clmt	veh						
	ACCIDENT LOO	CATION: Macon, GA	A			University of	North Florida	- UNF		
	AUTO: 2018 MA	AZDA M3S GT A (C	lass: 7398)			VIN: 3MZBN1W	36JM187581	INSURED DRIVE	ER:	
	10/01/2018	10/17/2018	FLAU18101105	11/21/2018	0	0	380	0	0	380
	Insd veh damag	ed turning around in	n parking lot							
	ACCIDENT LO	CATION: Rockledge	, FL			Department of	f Children and I	Families - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)			VIN: 1N4AL3AP				

SUITE 315

Glatfelter Underwriting Services Customer Summary Loss Experience Including 5 Years of History from claim registration and policy inception

TALLAHASSEE, FL 32399-0950

	Customer Detail So	orted By Policy & C	overage Type							PC-LE09-E
	Claims Valued as o	f Friday, May 14, 2	021							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries	Total Incurred
GPPAAU4050065-00	10/04/2018	10/10/2018	FLAU18100610	12/19/2018	0	0	507	0	0	507
10/20/2017 10/20/2018 AAIC	Insd veh damag	ged			D	enertment of	Children and F	amilias - DCE		
-	ACCIDENT LO	CATION: TALLAHA	SSEE, FL							
	AUTO: 2018 NI 10/08/2018	SSAN ALTIMA (Cla 10/11/2018	SS: 7398) FLAU18100578	10/19/2018	0	IN: 1N4AL3AP 0	0 IJC251091	SURED DRIVER: 0	0	0
		lized by unknowns	1 240 10100370	10/19/2010	0	0	0	0	0	0
		CATION: TALLAHA	SSEE EI		Ľ	epartment (of Children an	d Families - D)CF	
		SSAN SENTRA (CI					- 0JY303552 IN			-
	10/18/2018	10/25/2018	FLAU18101208	10/31/2018	0	0	8,603	JORED DRIVER.	(8,603)	•
		ed at intersection		10/01/2010	0	Ŭ	0,000	Ũ	(0,000)	0
		CATION: Tallahass	e. Fl		F	lorida State	University - F	su		
		DYOTA PRIUS (Cla					(E1081385 IN			
	NO FAULT	(,		•			SORED DRIVER.		
	09/07/2018	10/15/2018	FLAU18100672	10/18/2018	0	0	0	0	0	0
	Insured vehicle,	, while traveling on r	nain roadway, was struck	by claimant vehicle	who failed to yield r	ight of way at	a stop sign.			
	ACCIDENT LO	CATION: TALLAHA	SSEE, FL		Ľ	Department	of Children ar	nd Families - L	DCF	
	GPPAAU4050065-0	0 Totals:			0	0	43,224	1,191	(15,364)	29,051
GPPAAU4050065-01	AUTO LIABILITY									
10/20/2018 10/20/2019	04/23/2019	04/24/2019	FLAU19041010	05/06/2019	0	0	0	0	0	0
AAIC	The insured veh	hicle was rear ended	d by claimant vehicle one	and pushed into clair			6.01.11.1			
	ACCIDENT LO	CATION: Orlando, F	L		4	Department	of Children a	na Families - I	DCF	
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)		V	N: 1N4AL3AP	XJC250800 IN	SURED DRIVER:		
	07/23/2019	07/25/2019	FLAU19071336	08/27/2019	0	0	0	0	0	0
	Insured parked	vehicle struck by cla	aimant vehicle							
	ACCIDENT LO	CATION: Wildwood	, FL		D	epartment o	of Children an	d Families - D	CF	
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)			N: 1N4AL3AP	-			
	08/19/2019	08/21/2019	FLAU19080851	08/30/2019	0	0	1,476	154	0	1,631
	Insured vehicle	backing struck park	ed claimant vehicle							
	ACCIDENT LO	CATION: Crystal Ri	ver, FL		F	lorida State L	Iniversity - FSU			

SUITE 315

TALLAHASSEE, FL 32399-0950

	Customer Detail So	rted By Policy & Co	overage Type							PC-LE09-E	
	Claims Valued as o	f Friday, May 14, 20	21								
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries	Total Incurred	
GPPAAU4050065-01	AUTO: 2011 GM	MC SIERRA SERVIC	E (Class: 01499)		V	'IN: 1GT12ZC84	BF142324 IN	SURED DRIVER:			
10/20/2018 10/20/2019	AUTO PHYSICAL DAM	MAGE									
AAIC	10/29/2018	10/29/2018	FLAU18101363	11/02/2018	0	0	1,274	0	0	1,274	
	Insd vehicle var	ndalized in parking lo	t								
	ACCIDENT LO	CATION: TALLAHAS	SEE, FL			Department of	f Health - DOH				
	AUTO: 2018 DC	DDGE GRAND CAR	AVAN SE (Class: 7398)		V	IN: 2C4RDGBG	1JR310342				
	11/24/2018	11/26/2018	FLAU18111063	01/15/2019	0	0	571	0	0	571	
	Glass damage t	to Insd veh									
	ACCIDENT LO	CATION: Merritt Islar	nd, FL		Ľ	Department o	of Children an	d Families - D	CF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		V	IN: 1N4AL3AP8	BJC248690 IN	SURED DRIVER:			
	12/14/2018	02/06/2019	FLAU19020243	05/08/2019	0	0	560	0	0	560	
	Insd veh damag	jed									
	ACCIDENT LO	CATION: TALLAHAS	SEE, FL		Ľ	Department o	of Children an	d Families - D	CF		
	AUTO: 2018 NI	SSAN SENTRA (Cla	ss: 7398)		VIN: 3N1AB7AP5JY302929 INSURED DRIVER:						
	12/15/2018	01/02/2019	FLAU19010073	01/18/2019	0	0	610	0	0	610	
	Glass cracked of	on I/V									
	ACCIDENT LO	CATION: Gainesville	, FL		University of Florida - UF						
	AUTO: 2016 FC	ORD F-150 SERVICE	(Class: 01499)		V	IN: 1FTEW1EG2	2GKD82434 IN	SURED DRIVER	:		
	12/24/2018	12/27/2018	FLAU18120935	01/28/2019	0	0	564	0	0	564	
	Gravel rock from	n road damaged glas	s on I/V								
	ACCIDENT LO	CATION: Ocala, FL			D	epartment o	f Children and	d Families - D	CF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		V	IN: 1N4AL3AP7	JC248857 IN	SURED DRIVER:			
	12/27/2018	12/27/2018	FLAU18120956	02/01/2019	0	0	809	0	(564)	245	
	Insured vehicle	struck by rock									
	ACCIDENT LO	CATION: Kissimmee	, FL		D	epartment o	f Children and	d Families - D	CF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		V	IN: 1N4AL3AP5	5JC251062 IN	SURED DRIVER:			
	12/28/2018	01/07/2019	FLAU19010241	01/18/2019	0	0	64	0	0	64	
	Insured vehicle	damaged by rock									
	ACCIDENT LOO	CATION: Tallahasse	e, FL		Ľ	Department o	of Health - DO	н			

TALLAHASSEE, FL 32399-0950

	Customer Detail So	rted By Policy & C	overage Type							PC-LE09-E	
	Claims Valued as of	f Friday, May 14, 2	021								
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries Tot	al Incurred	
GPPAAU4050065-01	AUTO: 2018 DC	DDGE GRAND CAR	AVAN SE (Class: 7398)		V	IN: 2C4RDGBG	8JR311908				
10/20/2018 10/20/2019	01/17/2019	01/21/2019	FLAU19010801	03/22/2019	0	0	468	0	0	468	
AAIC	Insd veh damag	jed									
	ACCIDENT LOO	CATION: Tallahasse	ee, FL		F	lorida Agricu	ltural and Me	chanical Uni	iversity - FAMU		
	AUTO: 2016 FC	ORD TRANSIT T-35	0 SERVICE (Class: 01499)		V	IN: 1FBZX2CM	1GKB57343				
	01/28/2019	01/30/2019	FLAU19011285	02/08/2019	0	0	0	0	0	0	
	Insd veh ran ove	er object in road da	maging vehicle.								
	ACCIDENT LOO	CATION: Homosass	sa, FL		D	epartment o	f Children and	<mark>l Families</mark> - D	CF		
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)		V	IN: 1N4AL3AP6	5JC248722 IN				
	04/10/2019	04/11/2019	FLAU19040531	04/22/2019	0	0	77	0	0	77	
	Insd veh struck	clmt property									
	ACCIDENT LOO	CATION: TALLAHA	SSEE, FL		D	epartment o	of Children an	d Families - D)CF		
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)		V	IN: 1N4AL3APS	JC250450 IN				
	04/23/2019	04/24/2019	FLAU19041010	05/03/2019	0	0	19,350	0	(18,431)	918	
	The insured veh	nicle was rear endeo	by claimant vehicle one and	I pushed into clair	nant vehicle two.						
	ACCIDENT LOO	CATION: Orlando, F	Ľ		Department of Children and Families - DCF						
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)		V	IN: 1N4AL3AP	KJC250800 IN	SURED DRIVER	:		
	05/17/2019	05/17/2019	FLAU19050718	05/29/2019	0	0	0	0	0	0	
	Insd veh rear er	nded by clmt veh at	intersection								
	ACCIDENT LOO	CATION: Orlando, F	Ľ		D	epartment o	of Children and	l Families - D	OCF		
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)		V	IN: 1N4AL3AP8	BJC249855				
	07/09/2019	07/11/2019	FLAU19070501	09/09/2019	0	0	584	0	0	584	
	Insd veh damag	jed									
	ACCIDENT LOO	CATION: Mount Do	a, FL		D	epartment o	of Children an	d Families - L	DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)		V	IN: 1N4AL3AP	KJC249226 IN	SURED DRIVER	:		
	07/12/2019	07/12/2019	FLAU19070543	08/08/2019	0	0	584	0	0	584	
	Insured vehicle	damaged									
	ACCIDENT LOO	CATION: TALLAHA	SSEE, FL		D	epartment o	of Children and	d Families - D	OCF		
	AUTO: 2018 NI	SSAN ALTIMA (Cla	ss: 7398)		V	IN: 1N4AL3AP	JC250450 IN				

	Customer Detail So	rted By Policy & C	overage Type							PC-LE09-E
	Claims Valued as of	f Friday, May 14, 20	021							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries To	otal Incurred
GPPAAU4050065-01	07/23/2019	07/25/2019	FLAU19071336	08/20/2019	0	0	247	0	0	247
0/20/2018 0/20/2019	Insured parked	vehicle struck by cla	imant vehicle							
AIC	ACCIDENT LOO	CATION: Wildwood,	FL		D	epartment o	of Children and	d Families -DC	CF	
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		VI	IN: 1N4AL3AP	XJC247198			
	07/26/2019	07/30/2019	FLAU19071302	08/14/2019	0	0	4,208	0	0	4,208
	Insured vehicle	backing struck conc	rete pole							
	ACCIDENT LOO	CATION: Fort Laude	rdale, FL		Ju	istice Admin	istration Com	mission - JAC		
	AUTO: 2016 FC	ORD EXPLORER (C	lass: 7398)		VI	IN: 1FM5K8B8	5GGB97570 IN	SURED DRIVER		
	08/07/2019	08/19/2019	FLAU19080761	08/23/2019	0		0 56	4 (0 0	564
	Insured vehicle	parked and struck b	y claimant vehicle							
	ACCIDENT LOO	CATION: TALLAHAS	SSEE, FL		D	epartment o	of Children and	d Families - D	CF	
	AUTO: 2018 NI	SSAN SENTRA (Cla	ass: 7398)		VI	IN: 3N1AB7AP	2JY304105			
	08/15/2019	08/19/2019	FLAU19080742	10/02/2019	0	0	27	0	0	27
	Insured vehicle	rear ended by claim	ant vehicle at intersection							
	ACCIDENT LOO	CATION: Orlando, F	L		De	epartment o	f Children and	l Families - DC	CF	
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		VIN: 1N4AL3AP8JC248690 INSURED DRIVER:					
	09/10/2019	10/16/2019	FLAU19100649	10/22/2019	0	0	599	0	0	599
	Damage to insu	red vehicle of unkno	own origin							
	ACCIDENT LOO	CATION: TALLAHAS	SSEE, FL		Fl	orida School	for the Deaf an	d Blind - FSDB		
	AUTO: 2019 DC	DDGE CARAVAN (C	Class: 7398)		VI	IN: 2C4RDGBG	3KR665000 IN	SURED DRIVER		I
	09/29/2019	10/01/2019	FLAU19100054	10/17/2019	0	0	529	0	0	529
	Insured vehicle	damaged								
	ACCIDENT LOO	CATION: Mount Dor	a, FL		D	epartment o	of Children and	d Families - D	CF	
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		VI	IN: 1N4AL3AP	XJC249226			
	10/03/2019	10/03/2019	FLAU19100199	10/11/2019	0	0	2,780	0	0	2,780
	Insured damage	ed after striking racc	oon							
	ACCIDENT LOCATION: TALLAHASSEE, FL					Department of Children and Families - DCF				
	AUTO: 2018 NISSAN ALTIMA (Class: 7398)					VIN: 1N4AL3AP0JC247291 INSURED DRIVER:				
	GPPAAU4050065-0 ⁻	1 Totals:			0	0	35,943	154	(18,995)	17,102

TALLAHASSEE, FL 32399-0950

	Customer Detail So	rted By Policy & C	overage Type							PC-LE09-E
	Claims Valued as o	f Friday, May 14, 2	021							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries To	otal Incurred
GPPAAU4050065-02	AUTO LIABILITY									
10/20/2019 10/20/2020 AAIC	12/06/2019 Other vehicle st	12/12/2019 truck insured vehicle	FLAU19120530 e at intersection	01/07/2020	0	0	0	0	0	0
	ACCIDENTIO	CATION: Vero Bead	ch Fl			lustice Admin	istration Comn	nission - JAC		
		ORD FUSION (Class	,			IN: 1FA6POH7		ISURED DRIVER		
	12/19/2019	02/12/2020	FLAU20020423	02/14/2020	0	0	0	0	0	0
	Stopped insured	d vehicle was rear e	ended by claimant vehicle#	1 and pushed into cl	aimant vehicle#2					
	ACCIDENT LOCATION: TALLAHASSEE, FL					Florida Atlar	ntic University	- FAU		
	AUTO: 2017 TOYOTA CAMRY LE/XLE/SE/XSE (Class: 7398)						HU442263 IN			
	02/10/2020	03/04/2020	FLAU20030160	03/18/2020	0	0	2,864	0	0	2,864
	Insured vehicle opening door struck claimant vehicle									
	ACCIDENT LOCATION: Fort Pierce, FL Justice Administration Commission - JAC									
	AUTO: 2016 FC	ORD TAURUS SE (VIN: 1FAHP2D86GG100413 INSURED DRIVER:							
	03/18/2020	03/19/2020	FLAU20030664	06/08/2020	0	0	1,725	0	0	1,725
	Insured vehicle backed into claimant vehicle									
	ACCIDENT LOCATION: Inverness, FL Department of Children and Families - DCF									
	AUTO: 2018 NI	SSAN ALTIMA (Cla		VIN: 1N4AL3AP0JC251034 INSURED DRIVER:						
	05/01/2020	05/05/2020	FLAU20050128	Open	20,000	0	1,784	157	0	21,941
	The insured improperly merged into a lane where the claimant was proceeding with the right-of-way and sideswiped the passenger side rear of the claimant vehicle.									le.
	ACCIDENT LO	CATION: TALLAHA			Department o	f Children and	Families - DCF			
	AUTO: 2018 NISSAN ALTIMA (Class: 7398) VIN: 1N4AL3AP8JC249208 INSURED DRIVER:									
	AUTO PHYSICAL DAM	MAGE								
	12/06/2019	12/12/2019	FLAU19120530	01/10/2020	0	0	10,926	0	(10,926)	0
	Other vehicle st	ruck insured vehicle	e at intersection							
	ACCIDENT LOCATION: Vero Beach, FL Justice Administration Commission - JAC							ssion - JAC		
	AUTO: 2014 FC	ORD FUSION (Class	s: 7398)		V	IN: 1FA6POH7	2E5406434 IN	ISURED DRIVER	:	
	12/09/2019	12/10/2019	FLAU19120413	01/03/2020	0	0	683	0	0	683
	comp/glass dan	nage								
	ACCIDENT LO	CATION: TALLAHA	SSEE, FL		Ľ	Department o	of Children an	d Families - D	OCF	

SUITE 315

TALLAHASSEE, FL 32399-0950

	Customer Detail So	rted By Policy & Co	overage Type							PC-LE09-E
	Claims Valued as of	f Friday, May 14, 20	21							
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries T	otal Incurred
GPPAAU4050065-02	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		١	VIN: 1N4AL3AP8	3JC249208 IN	SURED DRIVER:		
10/20/2019 10/20/2020	12/19/2019	02/12/2020	FLAU20020423	05/08/2020	0	0	18,657	0	(16,575)	2,082
AAIC	Stopped insured	d vehicle was rear er	nded by claimant vehicle#1 a	and pushed into c	aimant vehicle#2					
	ACCIDENT LOO	CATION: TALLAHAS	SSEE, FL							
	AUTO: 2017 TC	DYOTA CAMRY LE/	KLE/SE/XSE (Class: 7398)		١	VIN: 4T1BF1FK7	HU442263 IN	SURED DRIVER:		
	01/21/2020	01/24/2020	FLAU20011863	01/28/2020	0	0	819	0	0	819
	Insured vehicle	damaged hitting a p	ot hole							
	ACCIDENT LOCATION: TALLAHASSEE, FL				L	Department o	of Children an	d Families - D	CF	
	AUTO: 2018 NI		١	/IN: 1N4AL3AP>	KJC249100 IN	SURED DRIVER:				
	02/10/2020	03/04/2020	FLAU20030160	03/17/2020	0	0	0	0	0	C
	Insured vehicle									
	ACCIDENT LOO	Justice Administration Commission - JAC								
	AUTO: 2016 FC	ORD TAURUS SE (C	lass: 7398)		١	VIN: 1FAHP2D86	5GG100413 IN	NSURED DRIVER		
	03/02/2020	03/04/2020	FLAU20030156	03/31/2020	0	0	403	0	0	403
	Insured vehicle	struck curb								
	ACCIDENT LOO	Department of Children and Families - DCF								
	AUTO: 2018 NI		١	VIN: 1N4AL3AP7	7JC247286 IN	SURED DRIVER:				
	03/15/2020	03/17/2020	FLAU20030613	03/18/2020	0	0	769	0	0	769
	Insured vehicle	Insured vehicle went into ditch at clients home								
	ACCIDENT LOO		Department of	f Children and	Families - DCF					
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		١	VIN: 1N4AL3AP7	7JC248857 IN	SURED DRIVER:		
	03/18/2020	03/19/2020	FLAU20030664	03/25/2020	0	0	0	0	0	(
	Insured vehicle									
	ACCIDENT LOCATION: Inverness, FL					Department o	f Children and	Families - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		١	VIN: 1N4AL3AP()JC251034 IN	SURED DRIVER:		
	04/03/2020	04/06/2020	FLAU20040193	04/30/2020	0	0	3,009	0	(2,819)	190
	Wood from othe	er vehicle struck insu	red vehicle							
	ACCIDENT LOO	CATION: TALLAHAS	SSEE, FL		L	Department of	Children and F	amilies - DCF		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	s: 7398)		١	VIN: 1N4AL3AP1	IJC251091 IN	SURED DRIVER		

TALLAHASSEE, FL 32399-0950

	Customer Detail So	orted By Policy & Co	overage Type							PC-LE09-E	
	Claims Valued as of Friday, May 14, 2021										
Policy Number Effective Date Expiration Date Carrier	Coverage Loss Date Description of Accident/Loss	Loss Reported Date	Claim Number	Closed Date	Loss Reserve	Expense Reserve	Paid Loses	Paid Expenses	Recoveries To	tal Incurrec	
GPPAAU4050065-02	04/10/2020	04/13/2020	FLAU20040326	04/17/2020	0	0	4,973	0	0	4,973	
10/20/2019 10/20/2020	Insured vehicle	struck claimant prop	erty								
AAIC	ACCIDENT LO	CATION: Cocoa, FL				Department o	of Children and	Families - DC	F		
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		V	IN: 1N4AL3AP8	8JC248902 IN	SURED DRIVER			
	05/01/2020	05/05/2020	FLAU20050128	05/08/2020	0	0	1,410	0	0	1,410	
	The insured improperly merged into a lane where the claimant was proceeding with the right-of-way and sideswiped the passenger side rear of the claimant vehicle.										
	ACCIDENT LO	CATION: TALLAHAS	SSEE, FL	Department of Children and Families - DCF							
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)		V	IN: 1N4AL3AP8	8JC249208 IN	SURED DRIVER			
	09/11/2020	09/14/2020	FLAU20090536	09/17/2020	0	0	809	0	0	809	
	Insured vehicle struck claimant property										
	ACCIDENT LO	Department of Children and Families - DCF									
	AUTO: 2018 NI	SSAN ALTIMA (Clas	ss: 7398)	V	IN: 1N4AL3AP	5JC251062 IN	SURED DRIVER				
	NO FAULT										
	12/06/2019	12/16/2019	FLAU19120693	01/06/2020	0	0	0	0	0	C	
	Other vehicle st		Justice Admi	inistration Col	mmission - JA	C					
	ACCIDENT LO	CATION: Vero Beac	h, FL								
	GPPAAU4050065-0	2 Totals:			20,000	0	48,832	157	(30,320)	38,669	
	Grand Totals:				29,445	0	165,311	1,997	(64,679)	132,074	

AAIC American Alternative Insurance Corporation

NUFIC National Union Fire Insurance Company of Pittsburgh, Pa.



Agency: 22044700 HALL INSURANCE Policy Branch: TALLAHASSEE - 078

Policy Number: 49-635664-07

Policy Prefix: 130212

Original Effective Date: 10/20/2013

PolicyType: COMMERCIAL AUTO

Named Insured: FLORIDA ATLANTIC UNIVERSITY

Address: 13510 HUTCHISON BLVD # A PANAMA CITY BEACH, FL 32407-3174

Term 10/20/2018 to 10/20/2019

Claim Numb	ber: 300-00384	01-2019		Policy Term: 10/20/2018 to 10/20/2019 Pending Recovery				
Loss Date	Close Date	Coverage	Allocated Expense	Reserve Amount	Amount	Paid Amount *		
01/30/2019	2/6/2019	PROPERTY DAMAGE	\$90.00		\$0.00	\$1,576.60		
01/30/2019	3/11/2019	COLLISION	\$0.00		\$0.00	\$0.00		

Fault:At-Fault and Rated

Description: I was leaving an FAU dinner in Mizner Park on 1/30/19. It was approximately 9:00pm. I was turning right onto federal and there was a car also turning right in front of me. I was looking left to make sure there was no oncoming traffic (there was no-one on the road) and I mistakenly assumed the car in front of me had turned since there were no cars. I then moved up and hit their back bumper. I was going approximately 5 mph upon impact. I got out of the car and the woman I hit indicated that she was an insurance agent and did not want to get a police report. I complied and sent her a picture of my license and insurance card. My car was barely effected except for a little scrape on the front bumper.

Vehicle Description: 2017 TOYOTA CAMRY LE/XLE/SE/XSE

Driver: JENNIFER WEIS

		Total:	\$90.00	\$0.00	\$0.00	\$1,576.60				
Term 10/20/2	2017 to 10/20/	2018								
Claim Numb	er: 300-026772	22-2018		Policy Term: 10/20/201	7 to 10/20/2018 Recovery					
Loss Date	Close Date	Coverage	Allocated Expense	Pending Reserve Amount	Amount	Paid Amount [*]				
08/31/2018	9/17/2018	COLLISION	\$95.55		-\$4,094.34	\$4,094.34				
Fault:	Not At-Fault	and Rated								
Description:		HAND TURNING LA		ONTO GLADE WHEN OV	SIDE SWIPED I	V THAT WAS				
Vehicle Desc	ription: 2017	TOYOTA CAMRY L	E/XLE/SE/XSE							
Driver: ARIA	NNE LYNN JO	DHNSON								
Claim Numb	er: 050-00761	51-2018		Policy Term: 10/20/201	7 to 10/20/2018					
Loss Date	Close Date	Coverage	Allocated Expense	Pending Reserve Amount	Recovery Amount	Paid Amount [*]				
05/03/2018	8/21/2018	COMPREHENSIVE	\$17.50		\$0.00	\$855.18				
Fault:	Not At-Fault	and Not Rated								
Description:	Description: W/S 0616339693800818 ROCK FROM ROAD LOSS PART: FW									
Vehicle Desc	ription: 2017	TOYT CAMRY LE/X	LE/SE/XSE							
Driver:										

Claim Numbe	er: 300-00513	53-2018		Policy Term: 10/20/20 Pending	017 to 10/20/2018 Recovery	
Loss Date	Close Date	Coverage	Allocated Expense	Reserve Amount	Amount	Paid Amount [*]
02/17/2018	3/2/2018	COMPREHENSIVE	\$90.00		\$0.00	\$454.26
Fault:	Not At-Fault	and Rated				
Description:		AS ENTERING ON I		WHEN AN OPOSSUM	RAN IN FRONT	OF VEHICLE
Vehicle Desc	ription: 2017	TOYOTA CAMRY L	E/XLE/SE/XSE			
Driver: ARRI	ANE JOHNSC	DN				
		Total:	\$203.05	\$0.00	-\$4,094.34	\$5,403.78
Term 10/20/2	2016 to 10/20/	2017				
Claim Numbe	er: 300-02885	88-2017		Policy Term: 10/20/20 Pending	016 to 10/20/2017 Recovery	
Loss Date	Close Date	Coverage	Allocated Expense	Reserve Amount	Amount	Paid Amount
10/09/2017	10/19/2017	COLLISION	\$46.05		\$0.00	\$425.05
Fault:	Not At-Fault	and Rated				
Description:	MORNING H	HE NOTICED THAT S		IOUSE. WHEN HE WE KED INTO HIM. DAMA REPORT		
Vehicle Desc	ription: 2017	TOYOTA CAMRY L	E/XLE/SE/XSE			
Driver: PARk	ED VEHICLE					
		Total:	\$46.05	\$0.00	\$0.00	\$425.05
Term 10/20/2	2015 to 10/20/	2016				
Claim Numbe	er: 300-01051	42-2015		Policy Term: 10/20/20	015_to 10/20/2016	
Loss Date	Close Date	Coverage	Allocated Expense	Pending Reserve Amount	Recovery Amount	Paid Amount
11/14/2015	12/15/2015	COLLISION	\$0.00		\$0.00	\$417.22
Fault:	At-Fault and	Rated				
Description:	INSURED W	AS TRYING TO AVO	DID THE CAR PARKE	NG GARAGE NEXT TO D NEXT TO HIM WHIL T AND BECAME PART	E BACKING OUT	AND DID NOT
Vehicle Desc	ription: 2014	TOYOTA CAMRY L	/SE/LE/XLE			
Driver: JARE	D ALLEN					
Claim Numbe	er: 093-00021	75-2015		Policy Term: 10/20/20		
Loss Date	Close Date	Coverage	Allocated Expense	Pending Reserve Amount	Recovery Amount	Paid Amount
11/09/2015	1/5/2016	PROPERTY DAMAGE	\$85.00		\$0.00	\$386.80
11/09/2015	11/16/2015	COLLISION	\$85.00		\$0.00	\$1,977.80
Fault:	At-Fault and	Rated				
Description:	IV STRUCK	MR. RANCATORE				
Vehicle Desc	ription: 2015	TOYT SIENNA XLE	LIMITED			

Claim Numb	er: 300-00040	51-2016		Policy Term: 10/20/20)15_to 10/20/2016	
Loss Date	Close Date	Coverage	Allocated Expense	Pending Reserve Amount	Recovery Amount	Paid Amount [*]
10/22/2015	1/6/2016	COLLISION	\$0.00		-\$1,817.54	\$1,817.54
Fault:	Not At-Fault	and Rated				
Description:			M BEHIND WHILE TRA	FFIC WAS SLOWING. ANGED INFO.	OTHER DRIVER	LEFT THE
Vehicle Desc	ription: 2013	TOYOTA CAMRY	L/SE/LE/XLE			
Driver: BRO	OKLYN KOHL	HEIM				
		Total:	\$170.00	\$0.00	-\$1,817.54	\$4,599.36
Term 10/20/2	2014 to 10/20/	2015				
Claim Numb	er: 038-00018	69-2015		Policy Term: 10/20/20)14 to 10/20/2015	
Loss Date	Close Date	Coverage	Allocated Expense	Pending Reserve Amount	Recovery Amount	Paid Amount *
10/13/2015	7/13/2016	PROPERTY DAMAGE	\$0.00		\$0.00	\$0.00
10/13/2015	10/18/2016	COLLISION	\$0.00		\$0.00	\$0.00
Fault:	Not At-Fault	and Not Rated				
			RIVER (HENRY SLY P	,		
Vehicle Desc	SPOT IN AN BETWEEN T DOOR AND ATTACHED POLICE REI	IOTHER ROW. THE FHEM). AT WHICH PART OF THE BAG	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO	H: 727-348-0477) WAS ACH OTHER (ROAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CAI	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE	NG LOT SIDE SLIDING ASE SEE
Vehicle Desc Driver: DEVI	SPOT IN AN BETWEEN 1 DOOR AND ATTACHED POLICE REI cription: 2015	IOTHER ROW. THE FHEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED.	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO	ACH OTHER (ROAD WA BUMPED INTO TO EA WERE SCRATCHED O	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE	NG LOT SIDE SLIDING ASE SEE
Driver: DEVI	SPOT IN AN BETWEEN 1 DOOR AND ATTACHED POLICE REI cription: 2015	IOTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Policy Term: 10/20/20	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE	NG LOT SIDE SLIDING ASE SEE
Driver: DEVI	SPOT IN AN BETWEEN T DOOR AND ATTACHED POLICE REI cription: 2015	IOTHER ROW. THE FHEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THEI	NG LOT SIDE SLIDING ASE SEE
Driver: DEVI	SPOT IN AN BETWEEN T DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763	IOTHER ROW. THE FHEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO E/LIMITED	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Policy Term: 10/20/20 Pending	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery	NG LOT SIDE SLIDING ASE SEE RE WAS NO
Driver: DEVI Claim Numbe Loss Date	SPOT IN AN BETWEEN T DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763 Close Date 10/29/2015	OTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 Coverage	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO E/LIMITED	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Policy Term: 10/20/20 Pending	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount	NG LOT SIDE SLIDING ASE SEE RE WAS NO
Driver: DEVI Claim Number Loss Date 08/07/2015 Fault:	SPOT IN AN BETWEEN T DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault	IOTHER ROW. THE FHEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 Coverage COMPREHENSIV and Not Rated	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO E/LIMITED	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Policy Term: 10/20/20 Pending Reserve Amount	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount	NG LOT SIDE SLIDING ASE SEE RE WAS NO
Driver: DEVI Claim Number Loss Date 08/07/2015 Fault: Description:	SPOT IN AN BETWEEN 1 DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault W/S 090550	IOTHER ROW. THE FHEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 Coverage COMPREHENSIV and Not Rated	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO E/LIMITED Allocated Expense E \$0.00 R - UNSURE LOSS PA	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Policy Term: 10/20/20 Pending Reserve Amount	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount	NG LOT SIDE SLIDING ASE SEE RE WAS NO
Driver: DEVI Claim Number Loss Date 08/07/2015 Fault: Description:	SPOT IN AN BETWEEN 1 DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault W/S 090550	IOTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 COVERAGE COMPREHENSIV and Not Rated 0990601015 OTHER	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO E/LIMITED Allocated Expense E \$0.00 R - UNSURE LOSS PA	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Policy Term: 10/20/20 Pending Reserve Amount	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount	NG LOT SIDE SLIDING ASE SEE RE WAS NO
Driver: DEVI Claim Number Loss Date 08/07/2015 Fault: Description: Vehicle Desc Driver:	SPOT IN AN BETWEEN 1 DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault W/S 090550	IOTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 COVERAGE COMPREHENSIV and Not Rated 0990601015 OTHEL TOYT CAMRY/SE/	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO E/LIMITED Allocated Expense E \$0.00 R - UNSURE LOSS PA	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Pending Reserve Amount	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount \$0.00	NG LOT SIDE SLIDING ASE SEE RE WAS NO Paid Amount [*] \$82.50
Driver: DEVI Claim Number Loss Date 08/07/2015 Fault: Description: Vehicle Desc Driver:	SPOT IN AN BETWEEN T DOOR AND ATTACHED POLICE REI ription: 2015 NWYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault W/S 090550 cription: 2014	IOTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 COVERAGE COMPREHENSIV and Not Rated 0990601015 OTHEN TOYT CAMRY/SE/ 46-2015	EY WERE BACK TO EA TIME THE TWO CARS CK QUARTER PANEL EDED I CAN GET A PIO E/LIMITED Allocated Expense E \$0.00 R - UNSURE LOSS PA	ACH OTHER (RÓAD W/ 5 BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Policy Term: 10/20/20 Pending Reserve Amount	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount \$0.00	NG LOT SIDE SLIDING ASE SEE RE WAS NO Paid Amount [*] \$82.50
Driver: DEVI Claim Number Loss Date 08/07/2015 Fault: Description: Vehicle Desc Driver: Claim Number Loss Date	SPOT IN AN BETWEEN 1 DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault W/S 090550 cription: 2014 er: 093-00014	IOTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 COVERAGE COMPREHENSIV and Not Rated 0990601015 OTHEN TOYT CAMRY/SE/ 46-2015	Allocated Expense E SUBURE LOSS PA	ACH OTHER (RÓAD W/ BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Pending Reserve Amount RT: RP Policy Term: 10/20/20 Pending	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount \$0.00	NG LOT SIDE SLIDING ASE SEE RE WAS NO Paid Amount [*] \$82.50
Driver: DEVI Claim Number Loss Date 08/07/2015 Fault: Description: Vehicle Desc Driver: Claim Number Loss Date	SPOT IN AN BETWEEN T DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault W/S 090550 cription: 2014 er: 093-00014 Close Date 8/24/2015	IOTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 COMPREHENSIV and Not Rated 0990601015 OTHEN TOYT CAMRY/SE/ 46-2015 COVERAGE	Allocated Expense E SUBURE LOSS PA	ACH OTHER (RÓAD W/ BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Pending Reserve Amount RT: RP Policy Term: 10/20/20 Pending	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount \$0.00	NG LOT SIDE SLIDING ASE SEE RE WAS NO Paid Amount [*] \$82.50 Paid Amount [*]
Driver: DEVI Claim Number Loss Date 08/07/2015 Fault: Description: Vehicle Desc Driver: Claim Number Loss Date 07/20/2015 Fault:	SPOT IN AN BETWEEN 1 DOOR AND ATTACHED POLICE REI cription: 2015 N WYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault W/S 090550 cription: 2014 er: 093-00014 Close Date 8/24/2015 Not At-Fault	IOTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 COVERAGE COMPREHENSIV and Not Rated 0990601015 OTHEN TOYT CAMRY/SE/ 46-2015 COVERAGE COMPREHENSIV and Not Rated	Allocated Expense E \$0.00 R - UNSURE LOSS PA LE/XLE Allocated Expense E \$92.92	ACH OTHER (RÓAD W/ BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Pending Reserve Amount RT: RP Policy Term: 10/20/20 Pending	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount \$0.00	NG LOT SIDE SLIDING ASE SEE RE WAS NO Paid Amount [*] \$82.50 Paid Amount [*] \$3,502.73
Driver: DEVI Claim Number 08/07/2015 Fault: Description: Vehicle Desc Driver: Claim Number Loss Date 07/20/2015 Fault: Description:	SPOT IN AN BETWEEN T DOOR AND ATTACHED POLICE REI ription: 2015 NWYSS er: 050-00763 Close Date 10/29/2015 Not At-Fault W/S 090550 cription: 2014 er: 093-00014 Close Date 8/24/2015 Not At-Fault INSURED'S	IOTHER ROW. THE THEM). AT WHICH PART OF THE BAG PICTURES. IF NEE PORT FILED. TOYT SIENNA XLE 18-2015 COVERAGE COMPREHENSIV and Not Rated 0990601015 OTHEN TOYT CAMRY/SE/ 46-2015 COVERAGE COMPREHENSIV and Not Rated	Allocated Expense E Solution E Allocated Expense E Solution Allocated Expense E Solution Allocated Expense E Solution E S	ACH OTHER (RÓAD W/ BUMPED INTO TO EA WERE SCRATCHED O C OF HENRY'S CA Policy Term: 10/20/20 Reserve Amount RT: RP Policy Term: 10/20/20 Pending Reserve Amount	AY IN THE PARKI CH OTHER. THE N OUR CAR. PLE R AS WELL. THE 014 to 10/20/2015 Recovery Amount \$0.00	NG LOT SIDE SLIDING ASE SEE RE WAS NO Paid Amount [*] \$82.50 Paid Amount [*] \$3,502.73

Claim Numb	Claim Number: 093-0000679-2015 Policy Term: 10/20/2014 to 10/20/2015 Pending Recovery									
Loss Date	Close Date	Coverage	Allocated Expense	Reserve Amount	Amount	Paid Amount [*]				
04/06/2015	1/31/2017	PROPERTY DAMAGE	\$0.00		\$0.00	\$10,132.30				
04/06/2015	4/15/2015	COLLISION	\$99.75		\$0.00	\$3,495.81				
04/06/2015	1/31/2017	RESIDUAL BODILY INJURY	\$9,524.42		\$0.00	\$6,000.00				
Fault:	Not At-Fault	and Not Rated								
Description:		/AS LEAVING APAF /AS BACKING UP	RTMENT COMPLEX, T	URNING RIGHT AT T	HE SAME TIME TH	E OTHER				
Vehicle Desc	cription: 2013	TOYT CAMRY/SE/	LE/XLE							
Driver: MICH	IAEL CRANE									
		Total:	\$9,717.09	\$0.00	\$0.00	\$23,213.34				
Term 10/20/2	Term 10/20/2013 to 10/20/2014									
No Claims Found for this Policy Term.										
Fotals for Policy 49-635664-07 from 08/20/2014 to 08/20/2019										
	.y +9-055004-(57 110111 00/20/2014	\$10,226.19	\$0.00	-\$5,911.88	\$35,218.13				

Total number of claims for this requested report period: 12