



BANKERS INSURANCE COMPANY  
 PO BOX 33060  
 ST. PETERSBURG, FL 33733-8060  
 800-627-0000

BBOP99.001 0916 0411 05105000001395  
 4852008  
 8/18/20

5000 00000 BBOP MAIN AMENDED

EFFECTIVE: 8/14/20  
 Page 1 of 5  
 Date of Issue  
 8/18/20

**BUSINESSOWNERS POLICY  
 COMMON POLICY DECLARATIONS**

<b>Policy Number</b>
17 0004917800 9 09

Policy Period	Term	Inception Date	Agent	Agent's Phone
From: 4/24/20 To: 4/24/21 12:01 Standard Time	12 mos	4/24/11 12:01 AM	00-0083722	(985) 892-3101

Agent (985) 892-3101  
 AUBERT INSURANCE AGENCY  
 PO BOX 1360  
 COVINGTON LA 70434

DAMMON ENGINEERING INC  
 554 OLD SPANISH TRL  
 SLIDELL LA 70458-4054

FORM OF BUSINESS: Organization

In return for the payment of the premium, and subject to all terms of this policy, we agree with you to provide the insurance as stated in this policy.

**Policy Limits (Coverage provided only where limits are indicated)**

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM IS SUBJECT TO ADJUSTMENT.

COVERAGE SECTIONS

BUSINESSOWNERS PROPERTY COVERAGES	\$519.00
BUSINESSOWNERS LIABILITY COVERAGES	\$181.00
TERRORISM PREMIUM	\$ .00
ANNUAL PREMIUM SUBTOTAL	\$700.00

INSPECTION FEE \$55.00

2005 LA FAIR PLAN EMERGENCY ASSESSMENT \$15.00

TOTAL FEES \$70.00

TOTAL ANNUAL PREMIUM \$770.00

\* Please see additional insert for Third-Party Coverage/Services

This document forms a part of, completes, and executes the referenced policy. The declarations or information pages, together with the common policy conditions, coverage parts, forms and endorsements, if any, issued to form a part thereof, completes the policy. In witness thereof, the Company attests these documents as the entire contract of insurance; and executes same on behalf of the company.

This policy shall not be valid unless also countersigned by the duly authorized Agent of this company at the agency hereinbefore mentioned, if required by state law.

Deborah S Brcka

8/18/20

Countersigned by Authorized Representative

Date



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**BUSINESSOWNERS POLICY  
 PROPERTY DECLARATIONS**

**SECTION I - PROPERTY**

Coverage Provided - Insurance at the described premises applies only for coverage for which a limit of insurance and/or premium is shown.

DESCRIPTION OF BUSINESS

PREM. NO.	BLDG. NO.	CLASS CODE	CLASS DESCRIPTION	DESCRIPTION OF BUSINESS
1	1	65121	Offices - NOC	OFFICE FOR ARCHITECT ENGI NEER

DESCRIPTION OF LOCATION

PREM. NO.	BLDG. NO.	ADDRESS	OCCUPANCY	VALUATION	AUTOMATIC INCREASE
1		554 OLD SPANISH TRL SLIDELL, LA 70458-4054			
1	1	554 OLD SPANISH TRL SLIDELL, LA 70458-4054	Tenant	RC	NA

DEDUCTIBLES (APPLY PER LOCATION, PER OCCURRENCE)

PREM. NO.	ALL OTHER PERILS DEDUCTIBLE	WINDSTORM OR HAIL DEDUCTIBLE
1	\$2,500	3%

PROPERTY COVERAGE-LIMITS OF INSURANCE

PREM. NO.	BLDG. NO.	COVERAGE	LIMIT OF INSURANCE
1	1	Business Income and Extra Expense	Actual Loss Sustained 12 Month
1	1	Business Personal Property	\$35,000





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**BUSINESSOWNERS POLICY  
 LIABILITY DECLARATIONS**

**SECTION II - LIABILITY AND MEDICAL EXPENSES**

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

COVERAGE	LIMIT OF INSURANCE
General Liability	
General Aggregate Limit (Other Than Products-Completed Oper	\$2,000,000
Products-Completed Operations Aggregate Limit	\$1,000,000
Personal And Advertising Injury Limit	INCLUDED
Each Occurrence Limit	\$1,000,000
Medical Expenses Limit	\$5,000 (Per Person)

**POLICY LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS**

COVERAGE	LIMIT OF INSURANCE
Hired Automobile	\$1,000,000
Non Owned Auto Liability	\$1,000,000
Uninsured Motorist Bodily Inj	Excluded

**LOCATION LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS PREM.**

NO.	COVERAGE	LIMIT OF INSURANCE
***	NONE	***

**BUILDING LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS PREM. BLDG.**

NO.	NO.	COVERAGE	LIMIT OF INSURANCE
***		NONE	***





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**BUSINESSOWNERS POLICY  
 SUMMARY OF ENDORSEMENTS**

<b>Policy Number</b>
17 0004917800 9 09

POLICY LEVEL ENDORSEMENTS

BBOP99.369 0909	Abuse, Battery and Sexual Abuse Excl
BP 04 03 0187	Accounts Receivable
BBOP99.371 0909	Additional Insured - Designate
BP 00 06 0689	Bus Liability
BBOP99.104 0608	BOP Extensions
BBOP17.316 0706	Businessowners Special Property Coverage
BP 00 09 0689	Common Pol Cond
BP 10 04 0498	Exclusion of Computer Related Losses
BBOP99.106 1102	Designated Premises
BP 04 17 0689	Employee Relations Excl
BGL99.300 0395	Excl Asbestos
BBOP99.188 0608	Fine Arts Coverage
BBOP17.118 0907	Fungi and Bact Cov Lmt Excl - Louisiana
BP 01 30 0111	LA Changes
BBOP17.340 1218	LA Hired & Non-Owned Auto Liability
BGL99.306 0596	Lead Contamination
BBOP99.345 0808	LA Loss Payment Provision
BXXX99.206 1207	Privacy Statement
BP 00 02 0689	Special Property Cov
BO 176 0187	Special Quick Ref
BP 04 05 0689	Valuable Papers/Record
BP 05 15 0115	Disclo.Pursuant to Terror Risk Ins. Act
BP 05 23 0115	Cap On Losses From Cert. Acts of Terror

LOCATION LEVEL ENDORSEMENTS

PREM.

1	BBOP99.370 0909	Windstorm or Hail Percentage Deductibles
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BUILDING LEVEL ENDORSEMENTS

PREM. BLDG.

1	1	BBOP99.304 0197	Burglary/Robbery Prot Syst
1	1	BBOP99.430 0113	Waiver of Transfer of Rights of Recovery





17 0004917800 9 09  
 5000 00000 BBOP MAIN  
 Business Owners Policy

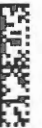
8/18/20

**BUSINESSOWNERS  
 LIABILITY AND PROPERTY COVERAGES  
 AUTOMATICALLY INCLUDED IN YOUR POLICY**

Below is a list of additional coverages and coverage extensions that are automatically included in your policy. Increased limits are available for some coverages (at a premium charge) and if purchased, those coverages and their total limits would be reflected on the declarations page of your policy.

Subject to coverage limitations described in associated forms attached to the policy declarations.

Coverage Feature	Limits
Accounts Receivable	\$25,000 at premises/\$2,500 off premises
Automatic Increase In Insurance-Building	At renewal the limit of Insurance will automatically increase by 4%
Business Income and Extra Expense - Buildings	5% for Condominium Associations and 25% for all other classes.
Business Income and Extra Expense - Tenant Occupied Only	12 Months Actual Loss Sustained
Business Personal Property	Within 1000 ft of Premises
Business Personal Property- Seasonal Increase	The policy limit on business personal property will also automatically increase by 25% to provide for seasonal variations.
Tenant Fire Legal	\$50,000
Debris Removal	25% of the loss up to a maximum of \$10,000
Electronic Media and Records	\$10,000
Employee Dishonesty	\$10,000 per occurrence
Fine Arts	\$10,000, with \$500 per item limit (without appraisal)
Fire Department Service Charge	\$10,000
Fire Extinguisher System Recharge	Included
Forgery and Alteration	\$5,000 per occurrence
Fungi and Bacteria Coverage-Property	\$15,000
Glass Expense	\$10,000
Medical Payments	\$5,000
Money and Securities. Does not apply to Standard Form unless optional coverage Burglary and Robbery has been added.	\$10,000 Inside / \$2,500 Outside
Money Orders and Counterfeit Paper	\$1,000
Newly Acquired Property Coverage Extension	BPP at \$250,000. Coverage period – 180 days
On Premises Swimming Pool	\$20,000
Outdoor Property-Named perils only: Fire, Lightning, Riot and Civil Commotion, Explosion, and Aircraft.	\$10,000, but not more than: \$2,500 for fences or walls \$500 for any one tree, shrub or plant \$1,000 for antenna and satellites \$5,000 for signs (unattached)
Personal Property Off Premises (Including Transit)	\$25,000
Pollutant Clean Up and Removal	\$10,000



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Preservation of Property	10 Days
Reward Coverage	\$5,000
Signs - Attached	\$5,000
Supplementary Payments	Includes cost of bail bonds, attorney fees, loss of earnings up to \$100 a day.
Valuable Papers and Records	\$10,000 at premises/\$2,500 off premises
Wind and Hail-Added as Covered Causes of Loss for Outdoor Property	Included

ROBERT L AUBERT COMPANY INC  
AUBERT INSURANCE AGENCY  
PO BOX 1360  
COVINGTON LA 70434

001395



DAMMON ENGINEERING INC  
554 OLD SPANISH TRL  
SLIDELL LA 70458-4054





**Policy Number**  
17 0004917800 9 09  
5000 00000 BBOP MAIN  
Business Owners Policy

**Date**  
8/18/20

**IMPORTANT INFORMATION REQUIRED BY THE  
LOUISIANA DEPARTMENT OF INSURANCE**

**Commercial Insurance Policy Coverage Disclosure Summary**

This form was promulgated pursuant to LSA-R.S. 22:1319.

**THIS IS ONLY A SUMMARY OF YOUR COVERAGE AND DOES NOT AMEND,  
EXTEND, OR ALTER THE COVERAGES OR ANY OTHER PROVISIONS  
CONTAINED IN YOUR POLICY. INSURANCE IS A CONTRACT. THE  
LANGUAGE IN YOUR POLICY CONTROLS YOUR LEGAL RIGHTS AND  
OBLIGATIONS.**

**\*\*READ YOUR INSURANCE POLICY FOR COMPLETE  
POLICY TERMS AND CONDITIONS\*\***

**COVERAGE(S) FOR WHICH PREMIUM WAS PAID**

**Business Personal Property                      Hired Automobile  
Non Owned Auto Liability**

**DEDUCTIBLES**

**This policy sets forth certain deductibles that will be applied to claims for  
damages. When applicable, a deductible will be subtracted from your total  
claim and you will be paid the balance subject to applicable coverage limits.**

- You may be able to reduce your premium by increasing your deductible.  
Contact your insurance producer (agent) or insurer for details.**

**NOTICE: This policy does set forth a separate deductible for covered losses  
caused by windstorm or hail as defined in the policy.**



**LIMITATIONS OR EXCLUSIONS UNDER THIS POLICY**

**FLOOD** - Flood damage is not covered, regardless of how caused, when flood is the peril that causes the loss. Flood water includes, but is not limited to, storm surge, waves, tidal water, overflow of a body of water, whether driven by wind or not.

**Flood Insurance** may be available through the National Flood Insurance Program (NFIP). NFIP flood insurance may provide coverage for damage to your dwelling or building and/or contents subject to the coverage limits and terms of the policy.

**Excess Flood Insurance** may be available under a separate policy from this or another insurer if the amount of the primary flood insurance is not enough to cover the value of your property.

- You may contact your producer (agent) or insurer for more information on the NFIP and excess flood insurance.

**MOLD** - Damage caused solely by mold is covered under this policy. Please see endorsement BBOP17.118 09/07 for additional information.

**\*\*FOR ALL OTHER LIMITATIONS OR EXCLUSIONS REFER TO YOUR POLICY FOR COMPLETE DETAILS ON TERMS AND PROVISIONS\*\***





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 PO BOX 33060  
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BBOP99.725 U32U U32U  
 4852008  
 8/18/20

041050303001395

Policy Number:  
 17 0004917800 9 09  
 5000 00000 BBOP MAIN

Agent Number:  
 0083722

Name Insured:  
 DAMMON ENGINEERING INC

Effective Date:  
 4/24/20

**Insurance Products**

Businessowners Annual Policy Premium	\$700.00
Policy Fees	\$70.00
<b>Annual Premium Total</b>	<b>\$770.00</b>

**Optional Third-Party Products & Services**

Comprehensive Cyber Liability Coverage	\$89.00
Merchant Chargeback Service	\$20.00
<b>Optional Third-Party Products &amp; Services Total</b>	<b>\$109.00</b>

**Total Due:** \$879.00

\*\*\*\*\*  
**\*Opt-Out Options:** Optional products and services are not insurance products and are provided by a third party. Bankers Insurance Company/First Community Insurance Company does not provide, and has no liability with respect to, these products and services. To learn more about Third-Party Products & Services please go to <https://bigidinfo.com/>

	I decline to purchase <b>\$89.00</b> Enterprise Cyber Liability coverage from North American Data Security™
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	I decline to purchase <b>\$20.00</b> Merchant Chargeback Service (Advocacy Program)
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(please return no later than 30 days after your policy's effective date)

	<i>Policyholder/Applicants Signature</i>
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	<i>Date</i>
--	-------------

	<i>Print Name</i>
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**You may opt out of the optional products and services within 30 days of the effective date of the policy by doing any of the following.**

- contacting our customer service department at 1-800-627-0000 ext. 4035;
- completing, signing and emailing this form to [Commercial@bankersinsurance.com](mailto:Commercial@bankersinsurance.com);
- excluding the optional third party product(s) amount from your payment.

Copy Sent To: Insured, Agent

