

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
Non Owned Auto Liability**

Hired Automobile

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.



5000 00000 BBOP MAIN

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****



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 |
| Annual Premium Total | \$770.00 |

Optional Third-Party Products & Services

| | |
|---|-----------------|
| Comprehensive Cyber Liability Coverage | \$89.00 |
| Merchant Chargeback Service | \$20.00 |
| Optional Third-Party Products & Services Total | \$109.00 |

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 **\$89.00** Enterprise Cyber Liability coverage from North American Data Security™

I decline to purchase **\$20.00** Merchant Chargeback Service (Advocacy Program)

(please return no later than 30 days after your policy's effective date)

Policyholder/Applicants Signature

Date

Print Name

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;
- > excluding the optional third party product(s) amount from your payment.

Copy Sent To: Insured, Agent

