

## MARKEL AMERICAN INSURANCE COMPANY

## GLEN ALLEN, VIRGINIA

## WATERCRAFT DECLARATIONS PAGE

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| MTD00000772019   | <b>Agency</b> 1 10369 -                 | Number:<br>895263                               |  | 2023-10-26 New  |             |
|--|---|---|--|---|-------------|
|  |   |   |  | d Time at Your Mailing Address  |             |
| Policy Period: From 10/26/2023  Insured Name and Mailing Address                           |   | 10/20/2024 12:01                                | ·  | 954-678-2668  |             |
| DUTCHIES ICE CREAM BOAT LLC  |   |   | LAUDERDALE MARINE UNDERWRITERS INC       |   |             |
| DIRK V ONSELDER  |   |   | PO BOX 460275                            |   |             |
| 1100 SW 12TH ST APT 215  |   |   | FT LAUDERDALE, FL 33346                  |   |             |
| Ft Lauderdale, FL 33315  |   |   | I'I LAUDENI                              | DALE, PL 33340  |             |
| DECLARED USAGE   |   |   |  |   |             |
| Primary Usage and ID Owner/Open  | ator 1                                  |   |  |   |             |
| Usage Type As Described  |   |   |  |   |             |
| Additional Usage Description   | CONCE                                   | SSION SALES - IC                                |  |   |             |
| Hull Type Pontoon/Tritoon # of Vessels 1   |   |   | 1  |   |             |
| <b>Mooring Location</b> 1100 SW 12TH S   | T DOCK#                                 | C29 Fort Lauderda                               | ale Broward FL 33                        | 3315  |             |
|  |   |   |  |   |             |
| Navigation Limits Inland waters of I   | Florida.                                |   |  |   |             |
|  |   |   |  |   |             |
| Lay-Up None  |   | From  | To                                       |   |             |
| COVERAGE   |   | LI  | MIT*                                     | DEDUCTIBLE*   | PREMIUM     |
| Hull, Agreed Value/Actual Cash Value Pa  | rtial                                   | \$15,0  | 000 per occurrence                       | e 10% min \$2500 per vessel   | \$151       |
| Wind Excluded<br>Watercraft Liability  |   | \$50,000 per occurrence                         |  | 2   | \$471       |
| Jninsured Watercraft \$50  |   | \$50,0  | 000 per occurrence                       | 2   | \$7         |
|  |   |   | 000 per occurrence<br>eurrence/per vesse |   | \$7<br>\$43 |
| Emergency Towing and Assist Trailer  | ergency Towing and Assist \$1,000 per o |   | urrence/per vesse<br>See Schedule        | 1   | \$6<br>\$10 |
| Hanei  |   |   | see schedule                             | See Schedule  | \$10        |
|  |   |   |  |   |             |
|  |   |   |  |   |             |
|  | Hull Limi                               | t is the total value                            | for all insured vo                       | essels. See Vessel Schedule for the indivi  | dual vessel |
| limits and deductible amounts.   |   |   |  |   |             |
|  |   |   |  |   |             |
|  |   | Endorse   | mont                                     |   |             |
|  |   |   | Total \$0.00                             | Usage Premium   | \$695.00    |
|  |   |   |  |   |             |
| Non-Seasonal Rating: If you cancel the polic<br>pro-rata basis subject to our minimum earn | cy or if the<br>ed premiu               | policy is cancelled fo<br>m. If we cancel the p | or nonpayment of policy, any return p    | remium, any return premium will be comput<br>remium will be computed on a pro-rata basis. | ed on a 90% |
| Minimum Earned Premium \$500.00 Policy   |   | Policy Taxes                                    | s/Fees \$0.00                            | TOTAL ANNUAL PREMIUM  | \$695.00    |
|  |   |   | •  |   |             |
|  |   |   |  |   |             |
|  |   |   |  |   |             |
|  |   |   |  |   |             |
|  |   |   |  |   |             |
|  |   |   |  |   |             |
| Producer LAUDERDALE MARIN  | IE UNDE                                 | ERWRITERS INC                                   | Customer Re                              | e <b>f</b> #  |             |
|  |   | oack of this form.                              |  |   |             |
| <b>Signed on</b> 10/30/2023 <b>at</b> F  | ΓLAUDI                                  | ERDALE, FL                                      |  | John 14 cla   | le          |

MTD5000-0218 Insured 10/30/2023