

Instrument Prepared By:

Name: Carolyn Kasler

Address: 153 NW 16th Ave
Boca Raton, FL 33432

PERMIT NUMBER: _____

NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. **DESCRIPTION OF PROPERTY** (Legal description of the property & street address, if available) **TAX FOLIO NO (PCN):** _____

Legal Description _____

2. **GENERAL DESCRIPTION OF IMPROVEMENT:** _____

3. **OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:**

a. Name and address: _____

b. Interest in property: _____

c. Name and address of fee simple titleholder (if different from Owner listed above): _____

4. a. **CONTRACTOR'S NAME:** Rack Electric Rack Solar

Contractor's address: 153 NW 16th Street Boca Raton FL 33432 b. Phone number: 561-391-3550

5. **SURETY** (if applicable, a copy of the payment bond is attached): a. Amount of bond: _____ b. Phone number: _____

c. Name and address: _____

6. a. **LENDER'S NAME:** _____

Lender's address: _____ b. Phone number: _____

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:

a. Name and address: _____

b. Phone numbers of designated persons: _____

8. a. In addition to himself or herself, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

b. Phone number of person or entity designated by Owner: _____

9. Expiration date of notice of commencement (the expiration date will be 1 year from the date of recording unless a different date is specified): _____, 20____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

(Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager)

(Print Name and Provide Signatory's Title/Office)

State of _____ County of _____

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization,

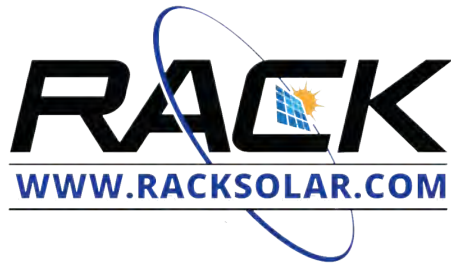
this _____ day of _____, 20_____ by _____,
(name of person)

as _____ for _____
(name of party on behalf of whom instrument was executed) (type of authority...e.g. officer, trustee, attorney in fact)

Personally Known ☐ or Produced Identification ☐ Type of Identification Produced _____

Notary

(Signature of Notary Public)
(Print, Type, or Stamp Commissioned Name of Notary Public)



153 NW 16th Street
Boca Raton, FL 33432
(561) 391-3550

www.racksolar.com

FL License: EC13011015
EC13002600 EC13012784
CVC57285

PERMITTING, HOA, AND NET METERING AUTHORIZATION FORM

AS THE OWNER OR AUTHORIZED AGENT OF THE SOLAR PROJECT PROPERTY (ADDRESS LISTED ON PAGE 1 ABOVE), I HEREBY AUTHORIZE RACK ELECTRIC TO SIGN AND APPLY FOR A BUILDING PERMIT ON MY BEHALF AS WELL AS TO SIGN, APPLY FOR HOA APPROVALS FOR MY SOLAR PROJECT, WHEN APPLICABLE, AND SIGN NET METERING WITH THE UTILITY. THIS AUTHORIZATION IS VALID ONLY FOR THE PURPOSE OF OBTAINING A PERMIT AND HOA AUTHORIZATION TO PERFORM THE SOLAR INSTALLATION WORK CONTRACTED FOR BY AND BETWEEN THE CLIENT AND RACK ELECTRIC. THE ONLY PERMIT(S) THAT MAY BE APPLIED FOR UNDER THE TERMS OF THIS LETTER ARE THOSE THAT THE GOVERNMENT AUTHORITY HAVING JURISDICTION (CITY OR COUNTY) DEEM(S) NECESSARY UNDER THE CURRENT FLORIDA BUILDING CODE, GIVEN THE SCOPE OF WORK. I WILL EXECUTE AND THE CONTRACTOR SHALL RECORD A NOTICE OF COMMENCEMENT FOR THE WORK. RACK ELECTRIC WILL BE RESPONSIBLE FOR ANY AND ALL FEES ASSOCIATED WITH THIS PERMIT APPLICATION AND HOA AUTHORIZATION. I HEREBY GRANT RACK ELECTRIC PERMISSION TO USE ANY PHOTOS TAKEN OF MY PROPERTY DURING THE COURSE OF THE SOLAR PANEL INSTALLATION OR RELATED ACTIVITIES FOR MARKETING PURPOSES, INCLUDING BUT NOT LIMITED TO SOCIAL MEDIA PLATFORMS AND THE COMPANY WEBSITE. THIS AUTHORIZATION WILL REMAIN VALID UNTIL SUCH PERMIT(S) IS/ARE ISSUED BY THE RESPECTIVE BUILDING DEPARTMENT, ALL NECESSARY INSPECTIONS HAVE BEEN PERFORMED, ALL ISSUED PERMITS HAVE BEEN CLOSED, AND THE SOLAR SYSTEM IS ACTIVATED.

HOMEOWNER (CLIENT) SIGNATURE

DATE

HOMEOWNER'S PRINTED NAME



153 NW 16TH St.
BOCA RATON, FL. 33432
(561) 391-3550
www.racksolar.com
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COMMUNICATIONS FROM OUR TEAM

As part of our standard practices to deliver the best experience for our clients during their project, our Solar Team will send you important communications via text messages. These communications include updates as your project progresses, weekly updates, and reminders to check your emails for any actionable items necessary to move forward.

Want to stay up to date on your project?

Please provide your preferred cell phone number to receive project updates:

Number:	
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- ☐ **I agree to receive text messages from Rack Electric's Solar Division at the phone number provided above and consent to allow pictures of my home and property to be featured on your social media pages. I understand I will receive text messages for the duration of my project as message frequency will vary, data rates may apply, and I can reply STOP to opt out at any time. Text messaging services are provided by Twilio.**

HOMEOWNER (CLIENT) SIGNATURE

DATE

HOMEOWNER'S PRINTED NAME

1-800-334-5579

Fax 336-584-8880

Post Office Box 286
Burlington, NC 27216-0286

GoTAPCO.com



Tapco

**PREMISES
PERSONAL
LIABILITY
APPLICATION**

ACCT ID: _____

Applicant's Name: _____

Mailing Address: _____

Proposed Effective Date: From _____ To _____

LIMIT OF LIABILITY REQUESTED: \$ 1,000,000

LOCATION #1

Located at _____

☒ 1 Family

☒ Owner ☐ Tenant (**not rented to others**) ☐

☐ Vacant ☐ Seasonal ☐ Builder's Risk (**not eligible**)

Year of Construction: _____

Updated: ☐ Yes ☐ No

If yes, confirm the date the following items were updated:

Roof: _____

Wiring: _____

Plumbing: _____

Heating & Air Conditioning: _____

Physical condition of property: GOOD

LOCATION #2

Located at NA

☐ 1 Family

☐ Owner ☐ Tenant (**not rented to others**) ☐

☐ Vacant ☐ Seasonal ☐ Builder's Risk (**not eligible**)

Year of Construction: _____

Updated: ☐ Yes ☐ No

If yes, confirm the date the following items were updated:

Roof: _____

Wiring: _____

Plumbing: _____

Heating & Air Conditioning: _____

Physical condition of property: _____

Please answer all questions:

- | | | |
|---|---|--|
| 1. Swimming pool..... | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Diving board or slide..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Fenced and self-locking gate | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Any other water exposure; i.e.: ponds, lakes, jacuzzi/hot tubs | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 3. Any animals? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, any bite history? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| If yes, is the animal with the bite history still on premises?..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 4. Smoke detectors | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

Please answer all questions:

5. Trampolines ☐ Yes ☒ No
6. Trip and fall hazards ☐ Yes ☒ No
7. Steps greater than three have secure handrails [] N/A ☐ Yes ☒ No
8. Daycare on premises ☐ Yes ☒ No
9. Number of children _____
10. Any business on premises ☐ Yes ☐ No
11. Applicant's Occupation _____
12. If under minor renovation, who is the contractor? (Provide certificate of insurance)
NA
13. Adjacent structures, other than a garage? ☐ Yes ☒ No
If yes, what are they used for: NA
14. Number of acres _____
What is it used for? NA
15. Has any company cancelled, nonrenewed or refused coverage to
the applicant? (Not applicable to Missouri applicants) ☐ Yes ☒ No
16. Explain all "yes" answers NA

PREVIOUS INSURER AND PRIOR LOSS INFORMATION

Has the insured or applicant had 3 years of prior coverage? ☐ Yes ☒ No

If yes, please complete the **Prior Insurer** information for the past 3 years below (Year, Insurance Company, Policy # and Premium).

Has the insured or applicant had any prior claims or losses in the last 3 years? ☐ Yes ☒ No

If yes, please complete the **Loss** information below (Date of Loss, Loss \$ Amount Paid, Loss \$ Amount Reserved and Description).

Year	Insurance Company	Pol.#	Premium	Date of Loss	Loss \$ Amount Paid	Losses \$ Amount Reserved	Description of Losses
NA							

APPLICANT'S STATEMENT: I hereby certify the information contained in this application is true and I agree that a misrepresentation of any of the facts by me will constitute reason for the Company to void or cancel any policy issued on the basis of this application, and I will hold the Company harmless for the action taken. I also agree that if a policy is issued pursuant to this application, the application shall become part of the policy and any renewal or rewrite thereof. I understand that coverage is not in force until bound with a Company Underwriter at TAPCO Underwriters, Inc.

Applicant's Name (Please Print) _____ Date _____

Applicant's Signature _____ Applicant's Phone # _____

Agency Southern Guard Insurance Inc

Agency Address 10000 Stirling Road, Cooper City, FL 33024

Agent's Signature _____ Agent's License Number P230779

Agent's Phone # (888) 875-0028 Agent's Fax # (954) 488-2736

Agent's Email Address DIAMOND@SOUTHERNGUARDINSURANCE.COM

FLORIDA FRAUD STATEMENT:

Section 817.234 (1)(b) "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."

TENNESSEE / VIRGINIA FRAUD STATEMENT:

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Upon requesting quotes and/or placement for the coverage listed herein, the producing retail broker hereby confirms that he/she has performed any and all diligent searches, as may be required by statute, for coverage through licensed carriers or other means of placement. Where allowed by governing statutes, "diligent effort" may not require an actual physical search and declination on each risk, but may be based on the retail producing broker's own experience, opinion and overall knowledge of acceptability in the admitted marketplace.



153 NW 16th Street | Boca Raton, FL 33432
o 561-391-3550 | f 561.892.3801
EC13002600 EC13011015 EC13012784 CVC57285

\$1M Liability Policy FAQs

What is this application?

This is an application for Excess Liability of \$1,000,000 with a carrier called TAPCO Underwriters, Inc.

Why do I need to hold \$1M in Liability?

When a solar panel system is categorized as a Tier 2 (11.745 kW or more) the utility company requires homeowners to hold at least \$1,000,000 in liability insurance on the property. This is to protect the homeowner and the utility workers in case there are any incidents associated with the operation of the privately owned solar PV system. Without proof of \$1m liability coverage, the utility will not allow the homeowner to operate the system.

Who is paying for this policy?

Rack Solar will pay for the first year of this specific policy.

What is the annual cost for this policy?

TAPCO's Excess Liability is \$592.52 (Policy \$577.50 Fees \$15.02)

Will this policy affect my current homeowner insurance?

No. This policy is specifically for EXCESS liability. It is extra insurance that provides protection beyond existing limits and coverages of other policies, including the homeowner's insurance. It is a stand-alone policy.

Will I receive a copy of the policy?

Yes. After the policy is bound, you will receive a copy of the full policy binder via email when your solar system is activated.

How can I renew this policy after 1 year?

This specific policy can be renewed with the underwriter;

Southern Guard Insurance Inc

1000 Stirling Road, Cooper City, FL 33024

954-488-2736

<https://southernguardinsurance.com/>

Can I change carriers after 1 year?

Yes. \$1M Excess Liability can be purchased from other insurance companies.

Do I need to renew this specific policy?

No. Homeowners are welcome to shop for a policy that is right for them.