







**MARINHA DO BRASIL**  
**COMISSÃO NAVAL BRASILEIRA EM WASHINGTON**

**AUTUAÇÃO**

Documento Circunstanciado, NUP: 63150.002698/2022-18, autuado na data de 29 de setembro de 2022, destinado à contratação da empresa Nationwide Insurance para a prestação de serviço de seguridade das instalações e dos funcionários (Auxiliares Locais) desta Comissão Naval, contendo xx folhas:

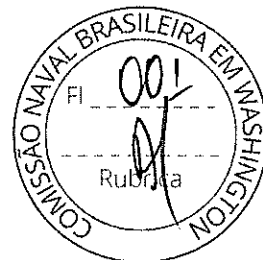
- a) Documento Circunstanciado 005/2022 às Fls. 001 a 002;
- b) Mapa Comparativo de Preços às Fls. 003;
- c) Pesquisa de Preços às Fls. 004 a 005; e
- d) Proposta Comercial e anexos às Fls. 006 a 021.

Washington DC, 29 de setembro de 2022.

Assinatura manuscrita de Antonio Luiz do Nascimento Abreu.

**ANTONIO LUIZ DO NASCIMENTO ABREU**  
Capitão de Corveta (AA)  
Encarregado da Divisão de Material e Serviços Gerais





**MARINHA DO BRASIL  
COMISSÃO NAVAL BRASILEIRA EM WASHINGTON**

**DOCUMENTO CIRCUNSTANCIADO Nº 005/2022**

**NUP: 63150.002698/2022-18**

**1. OBJETO**

Prestação de serviços de seguridade obrigatória para as instalações e funcionários (Auxiliares Locais) da CNBW de forma a garantir a infraestrutura necessária para o desenvolvimento das atividades e funcionamento da referida Organização Militar.

**2. CARACTERIZAÇÃO DA NECESSIDADE QUE JUSTIFICOU A AQUISIÇÃO DO SERVIÇO**

A CNBW localiza-se em edifício próprio com 3 pavimentos, sendo um basement e outros dois com os escritórios e demais facilidades. O edifício foi adquirido em 1997, sendo patrimônio imobiliário da Marinha do Brasil. No seu interior, existe material móvel, em sua maioria mobiliário de escritório, também patrimônio da Marinha do Brasil.

Além disso, possui funcionários civis, Auxiliares Locais, contratados anualmente mediante processo seletivo e renovação contratual, para auxiliar os militares na execução das tarefas da Comissão.

Tanto o seguro predial quanto dos funcionários é requisito da legislação local, sendo portanto despesas obrigatórias e fundamentais para desenvolvimento das atividades e funcionamento da CNBW.

A aquisição do serviço enquadra-se como dispensa de licitação, cujo objeto a ser contratado encontra-se disposto no inciso I do artigo 27 da Portaria GM-MD 5.175/2021.

**3. PLANEJAMENTO DA CONTRATAÇÃO**

A contratação encontra-se prevista no Programa de Aplicação de Recursos da CNBW (evento PAR 3969.2) aprovado em reunião do Conselho de Gestão, estando, dessa forma, alinhada com o planejamento realizado.



#### **4. DETERMINAÇÃO DE UNIDADES E QUANTIDADES A SEREM ADQUIRIDAS**

O serviço prestado engloba o seguro predial e do mobiliário em seu interior, bem como o *workers compensation* para os Auxiliares Locais que trabalham nas instalações. A CNBW informará anualmente à seguradora dados relativos ao valor predial e do material existente no seu interior, bem como a quantidade de Auxiliares Locais com as respectivas folhas salariais, que servirão de base para o cálculo preciso da despesa a ser efetuada. O detalhamento específico da cobertura do serviço de seguridade encontra-se na apólice.

#### **5. ESTIMATIVA DA DESPESA**

A despesa estimada de acordo com a oferta da Nationwide Insurance está compatível com o valor de mercado, sendo garantida a vantajosidade para a Administração Pública, conforme detalhado no Mapa Comparativo de Preços e demais documentos em anexo. Observa-se nos referidos documentos a dificuldade em encontrar fornecedores para o serviço face às características de instalação de cunho diplomático situada em Washington DC.

#### **6. VALOR UNITÁRIO E/OU GLOBAL**

USD 8.725,00 (oito mil e setecentos e vinte e cinco dólares) anuais, sendo corrigido conforme auditoria da empresa sobre o valor das instalações e material, bem como a quantidade e salário dos Auxiliares Locais.

#### **7. PRAZO DE ENTREGA OU CONCLUSÃO DO OBJETO**

O prazo de vigência do contrato é de 1 ano, podendo ser prorrogado até o limite de 60 (sessenta) meses, com base no inciso II, do art. 55 da Portaria GM-MD n° 5.175, de 15 de dezembro de 2021.

#### **8. EVENTUAL PRESTAÇÃO DE ASSISTÊNCIA TÉCNICA NO PERÍODO E GARANTIA DO OBJETO**

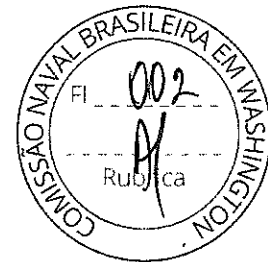
Conforme previsão contratual, mediante contato com respectivo *broker*.

#### **9. CONDIÇÕES DE GUARDA E ARMAZENAMENTO**

Nada consta, por se tratar de prestação de serviço.

#### **10. PRAZOS PARA LIQUIDAÇÃO E PAGAMENTO**

Mensalmente, mediante emissão de *invoice* pelo fornecedor.



### 11. DEMONSTRAÇÃO DA COMPATIBILIDADE DA PREVISÃO DE RECURSOS ORÇAMENTÁRIOS COM O COMPROMISSO A SER ASSUMIDO

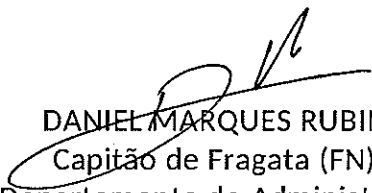
- a) Gestão/Unidade: 0001 / 70200 - CNBW
- b) AO: 2000 Administração da unidade
- c) Ação Interna: G483MN1
- d) Elemento de despesa: 33903969

### 12. CONCLUSÃO

Em face do exposto e da documentação apresentada, sugere-se que o objeto seja contratado, com base no art. 1º, § 2º, da Lei nº 14.133, de 1º de abril de 2021, combinado com o Art. nº 27, inciso I da Portaria GM-MD nº 5.175, de 15 de dezembro de 2021.

Elaborado por:

Washington, DC, 29 de setembro de 2022.

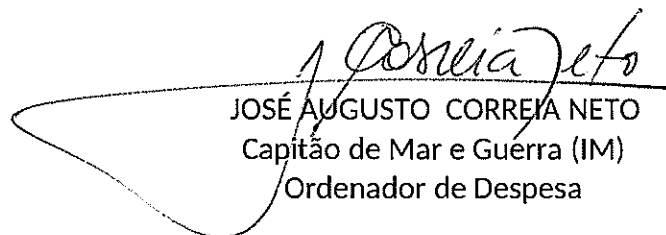
  
DANIEL MARQUES RUBIN  
Capitão de Fragata (FN)

Chefe do Departamento de Administração e Apoio

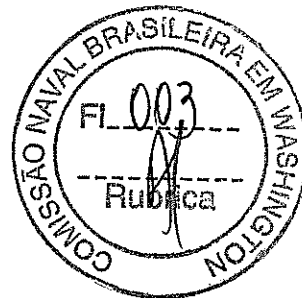
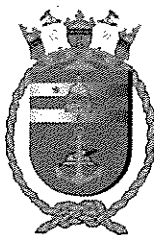
### 13. ATO DE AUTORIZAÇÃO DA CONTRATAÇÃO DIRETA:

Aprovo a contratação prevista neste Documento Circunstanciado, sendo entendido como viável e razoável à luz das justificativas apresentadas.

Washington DC, 29 de setembro de 2022.

  
JOSÉ AUGUSTO CORREIA NETO  
Capitão de Mar e Guerra (IM)  
Ordenador de Despesa

EM BRANCO

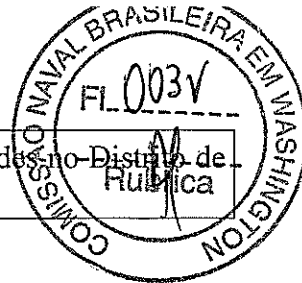


## MAPA COMPARATIVO

### COTAÇÃO PARA O SEGURO DA CNBW 2022

<b>EMPRESAS</b>	
<b>RAZÃO SOCIAL</b>	<b>VALOR (USD)</b>
<b>Nationwide Insurance</b>	8,725.00
<b>The Hartford Insurance</b>	Não enviou cotação
<b>Travelers Insurance Company</b>	Não enviou cotação
<b>Selective Insurance Company</b>	Não enviou cotação

<b>OBSERVAÇÕES</b>	
<b>Nationwide Insurance</b>	<p>Commercial Property - \$3,706.00 Commercial General Liability - \$1,597.00 Workers Compensation and Employers Liability - 3,442.00</p> <p><u>Total Account Premiun - 8,725.00</u></p> <p><b>Obs:</b> O documentos referentes aos valores dos serviços do seguro cobrados pela empresa seguem em anexo.</p>
<b>The Hartford Insurance</b>	<p>A empresa não enviou a cotação devido ao motivo:</p> <p>Recusou-se a oferecer proposta, classe de negócio (propriedades diplomáticas). A empresa informou que o valor de orçamento da CNBW está abaixo dos valores cobrados para propriedades no Distrito de Columbia e não interessado em cotar a linha de Compensação de Trabalhadores (Lei Federal).</p>
<b>Travelers Insurance Company</b>	<p>A empresa não enviou a cotação devido ao motivo:</p> <p>Apenas dispostos a cotar através de seus mercados de Excesso e Excedente em papel não admitido, ou seja, a empresa informou que o valor de orçamento da CNBW está abaixo dos valores cobrados para propriedades no Distrito de Columbia.</p>
<b>Selective Insurance Company</b>	<p>A empresa não enviou a cotação devido ao motivo:</p> <p>Apenas dispostos a oferecer cotações na linha da propriedade. Não está interessado na compensação dos trabalhadores do Distrito de Columbia (Federal WC Act) ou exposições ao risco de Responsabilidade Geral Comercial, ou seja, a empresa informou que o valor de orçamento da</p>

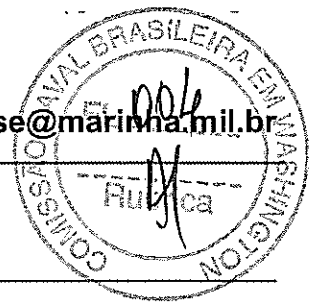


	CNBW está abaixo dos valores cobrados para propriedades no Distrito de Columbia.
--	--

<b>CONTATOS</b>	
<b>Nationwide Insurance</b>	Larry Altmann / 410-647-7333 x113 / larry@bayareains.com
<b>The Hartford Insurance</b>	Larry Altmann / 410-647-7333 x113 / larry@bayareains.com
<b>Travelers Insurance Company</b>	Larry Altmann / 410-647-7333 x113 / larry@bayareains.com
<b>Selective Insurance Company</b>	Larry Altmann / 410-647-7333 x113 / larry@bayareains.com

Zimbra

moura.jose@marinha.mil.br



---

**Nationwide Insurance Renewal**

---

**De :** Larry Altmann <larry@bayareains.com>

qua, 13 de abr de 2022 10:34

**Assunto :** Nationwide Insurance Renewal

📎 12 anexos

**Para :** moura.jose <moura.jose@marinha.mil.br>

**Cc :** CNBW.SERVICES  
<CNBW.Services@Marinha.Mil.br>

Our records confirm that we've contacted the following insurance companies and they've declined to quote.

The Hartford: Declined to offer proposal, class of business (diplomatic properties). Tight underwriting for properties in the District of Columbia and not interested in quoting the Workers Compensation line (Federal Act).

Travelers Insurance Company: Only willing to quote through their Excess and Surplus markets on non-admitted paper.

Selective Insurance Company: Only willing to offer quotes on the property line. Not interested in District of Columbia workers compensation (Federal WC Act) or Commercial General Liability risk exposures in this class.



**LARRY ALTMANN, CIC**  
Bay Area Insurance Group, LLC

Tel: 410-647-7333 x113

Fax: 410-647-6649



---

*Please be aware that coverage on your insurance policy is not considered to be added, deleted or bound by voicemail, email, fax or contact form from our website without receiving confirmation from one of our registered insurance representatives.*

**From:** moura.jose@marinha.mil.br <moura.jose@marinha.mil.br>

**Sent:** Wednesday, April 13, 2022 7:51 AM

**To:** Larry Altmann <larry@bayareains.com>

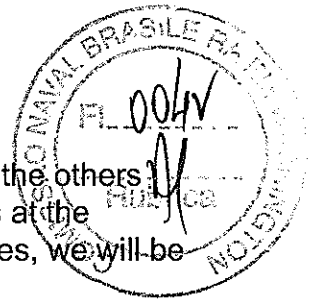
**Cc:** CNBW.SERVICES <CNBW.Services@Marinha.Mil.br>

**Subject:** Re: Nationwide Insurance Renewal

Good Morning Larry. How are you doing?

My name is Augusto Moura. I really appreciate your help!

We are happy to renew with the current company.



Could you send the other quotes, please? We understand that the amount of the others companies is above our budget, but we need to document it for audit reasons at the Brazilian Naval Commission. If you can send from at least two more companies, we will be pleased.

Please do not hesitate to contact myself if you have any questions or concerns. Have a great day!

Best Regards,  
Augusto Moura

BRAZILIAN NAVAL COMMISSION | office: 202.244.3950 ext. 184 |  
[cnbw.services@marinha.mil.br](mailto:cnbw.services@marinha.mil.br) | 5130 MacArthur Blvd, Washington DC 20016

---

**De:** "Larry Altmann" <[larry@bayareains.com](mailto:larry@bayareains.com)>  
**Para:** "CNBW.SERVICES" <[CNBW.Services@Marinha.Mil.br](mailto:CNBW.Services@Marinha.Mil.br)>  
**Cc:** "Rubin" <[Rubin@marinha.mil.br](mailto:Rubin@marinha.mil.br)>  
**Enviadas:** Terça-feira, 12 de abril de 2022 15:48:17  
**Assunto:** Nationwide Insurance Renewal

Please find attached, documents reflecting Nationwide's renewal package. The expiring annual premium had been \$8,306 making this renewal very competitively priced. We received declinations to offer quotations from several carriers (The Hartford, Travelers Insurance, Liberty Mutual Insurance Companies) noting that they were unable to competitively price coverages in this class (diplomatic properties within Washington, DC). Please let me know if I can be of further assistance.

Best regards, Larry



**LARRY ALTMANN, CIC**  
Bay Area Insurance Group, LLC

Tel: 410-647-7333 x113  
Fax: 410-647-6649



---

*Please be aware that coverage on your insurance policy is not considered to be added, deleted or bound by voicemail, email, fax or contact form from our website without receiving confirmation from one of our registered insurance representatives.*

--  
Atenciosamente,  
Augusto Moura

BRAZILIAN NAVAL COMMISSION | office: 202.244.3950 ext. 184 |  
[moura.jose@marinha.mil.br](mailto:moura.jose@marinha.mil.br) | 5130 MacArthur Blvd, Washington DC 20016

---



**EM BRANCO**

Zimbra

moura.jose@marinha.mil.br



---

**Nationwide Insurance Renewal**

---

**De :** Larry Altmann <larry@bayareains.com>

ter, 12 de abr de 2022 15:48

**Assunto :** Nationwide Insurance Renewal

📎 10 anexos

**Para :** CNBW Services <CNBW.Services@Marinha.Mil.br>

**Cc :** Rubin@marinha.mil.br

Please find attached, documents reflecting Nationwide's renewal package. The expiring annual premium had been \$8,306 making this renewal very competitively priced. We received declinations to offer quotations from several carriers (The Hartford, Travelers Insurance, Liberty Mutual Insurance Companies) noting that they were unable to competitively price coverages in this class (diplomatic properties within Washington, DC). Please let me know if I can be of further assistance.

Best regards, Larry



**LARRY ALTMANN, CIC**  
Bay Area Insurance Group, LLC

Tel: 410-647-7333 x113

Fax: 410-647-6649



---

*Please be aware that coverage on your insurance policy is not considered to be added, deleted or bound by voicemail, email, fax or contact form from our website without receiving confirmation from one of our registered insurance representatives.*

---

📎 **22-23 Pckg Declarations Page.pdf**

1 MB

📎 **22-23 Property Section.pdf**

2 MB

📎 **22-23 General Liability Section.pdf**

1 MB

📎 **22-23 WC & Emp. Liab. Section.pdf**

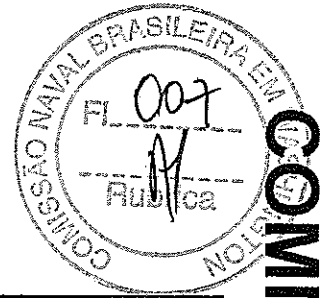
1 MB

---

**EMBRANCO**



NATIONWIDE  
 ONE WEST NATIONWIDE BLVD  
 COLUMBUS, OH 43215-2220  
 1-877 On Your Side  
 1 (877) 669-6877



**Nationwide®**

**COMMERCIAL PORTFOLIO ACP 3008144099**

**ACCOUNT NUMBER**

ACP 3008144099

**BILLING ACCOUNT NUMBER**

211601064

BRAZILIAN NAVAL COMMISSION  
 5130 MACARTHUR BLVD NW  
 WASHINGTON, DC 20016-3316

**PLEASE KEEP THIS FOR YOUR RECORDS**

We are pleased to serve your business insurance needs. Our company is committed to providing you high quality insurance protection and superior service.

**IMPORTANT INFORMATION ABOUT YOUR POLICY**

Attached is a recent change to your policy. This change was initiated either by you, your agent or by Nationwide and does affect your coverage.

Please read the attached information carefully. It will provide you with all the detailed information regarding the change to your policy. Should you have an any additional questions regarding this communication, please contact your agent.

01080200057622



**Your Commercial Insurance Portfolio**

Courtesy of:

Agency: BAY AREA INSURANCE GROUP LLC  
 Agency Number: 17588  
 Region Code: 042  
 Agency Address: 1 ANNAPOLIS ST STE 100  
 ANNAPOLIS, MD 21401-1478  
 Agency Phone Number: (410) 647-7333

INSURED COPY

MD 17588

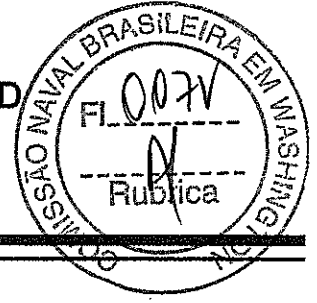
Nationwide Mutual Insurance Company and Affiliated Companies, One Nationwide Plaza, Columbus, Ohio 43215-2220  
 nationwide.com. Nationwide, the Nationwide N and Eagle and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. © 2017 Nationwide



Nationwide®

# STANDARD WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY

## CHANGE OF DECLARATIONS ENDORSEMENT



Issued By: NATIONWIDE MUTUAL INSURANCE COMPANY

Policy Number: ACP WC013058144099

Named Insured: BRAZILIAN NAVAL COMMISSION

Mailing Address: 5130 MACARTHUR BLVD NW  
WASHINGTON, DC 20016-3316

Agency: BAY AREA INSURANCE GROUP LLC

Agency Number: 17588

Region Code: 042

Agency Address: 1 ANNAPOLIS ST STE 100  
ANNAPOLIS, MD 21401-1478

Policy Period: Effective From 05-04-2022 To  
05-04-2023

Effective Date of Change: 05-04-2022  
12:01 AM Standard Time at your principal place of business



### Premiums/Fees

Total Additional Premium	\$68.00
--------------------------	---------

NOT A STATEMENT - YOUR BILLING WILL FOLLOW

PLEASE READ CAREFULLY.

37945000208029

This endorsement forms a part of the policy, issued by NATIONWIDE MUTUAL INSURANCE COMPANY, to which it is attached and takes effect as of the effective date above. Nothing herein contained shall be to vary, waive, alter or extend any of the terms, conditions, agreements, of declarations of the policy, other than herein stated. In consideration of **Total Additional Premium of \$68.00** it is hereby understood and agreed that the policy to which this endorsement is attached is amended to read as follows.

The following changes have been made:



INSURED COPY

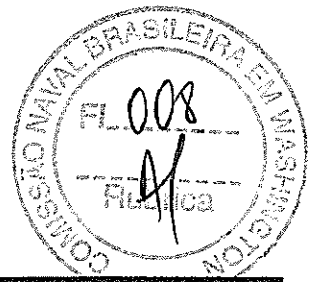
MD 17588



Nationwide®

# STANDARD WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY

## CHANGE OF DECLARATIONS ENDORSEMENT



After Change: DISTRICT OF COLUMBIA OPERATIONS

### Standard Premium

Premises	Code	Description	Basis	Rate	Amount
001	7380	Drivers, Chauffeurs, Messengers, And Their Helpers NOC - Commercial	26200.00	4.7100	\$1,234.00
001	8810	Clerical Office Employees Noc	806900.00	0.1100	\$888.00
001	9015	Building Or Property Management-All Other Employees		2.2400	-
		Total Manual Premium			\$2,122.00
		Total Subject Premium			\$2,122.00
		Total Modified Premium			\$2,122.00
		Total Standard Premium			\$2,122.00
001	0900	Expense constant	1.00	160.0000	\$160.00
	9740	Terrorism Risk Insurance Program Reauthorization Act Disclosure Endorsement	833100.00	0.1270	\$1,058.00
001	9741	Catastrophe (Other Than Certified Acts of Terrorism)	833100.00	0.0180	\$150.00
		Estimated Annual Premium			\$3,490.00

### Other Premium and Surcharges

		DC SPECIAL FUND SURCHARGE	3490.00		-
<b>Total Amount Due</b>					<b>\$3,490.00</b>

37945000208038



INSURED COPY

MD 17588



**WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY**

**PENDING RATE CHANGE ENDORSEMENT**

A rate change filing is being considered by the proper regulatory authority. The filing may result in rates different from the rates shown on the policy. If it does, we will issue an endorsement to show the new rates and their effective date.

If only one state is shown in item 3.A of the Information Page, this endorsement applies to that state. If more than one state is shown there, this endorsement applies only in the state shown in the Schedule.

**SCHEDULE**

State

DC

37945000208047

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective

Policy No.

Endorsement No.

Insured

Premium

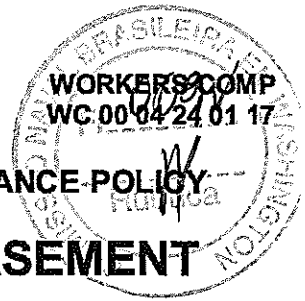
Countersigned By \_\_\_\_\_

INSURED COPY

MD 17588







# WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

## AUDIT NONCOMPLIANCE CHARGE ENDORSEMENT

Part Five—Premium, Section G. (Audit) of the Workers Compensation and Employers Liability Insurance Policy is revised by adding the following:

If you do not allow us to examine and audit all of your records that relate to this policy, and/or do not provide audit information as requested, we may apply an Audit Noncompliance Charge. The method for determining the Audit Noncompliance Charge by state, where applicable, is shown in the Schedule below.

If you allow us to examine and audit all of your records after we have applied an Audit Noncompliance Charge, we will revise your premium in accordance with our manuals and Part 5—Premium, E. (Final Premium) of this policy.

Failure to cooperate with this policy provision may result in the cancellation of your insurance coverage, as specified under the policy.

**Note:**

For coverage under state-approved workers compensation assigned risk plans, failure to cooperate with this policy provision may affect your eligibility for coverage.

### SCHEDULE

State(s)	Basis of Audit Noncompliance Charge	Maximum Audit Noncompliance Charge Multiplier
DC	Estimated State Premium	(2) Times

37945000208065



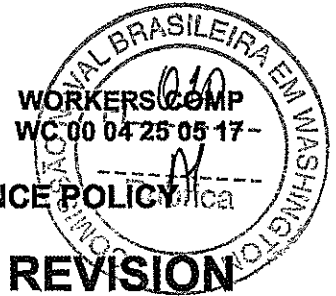
INSURED COPY

MD 17588

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective	Policy No.	Endorsement No.
Insured		Premium
Insurance Company	Countersigned By _____	



**WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY**

**EXPERIENCE RATING MODIFICATION FACTOR REVISION  
ENDORSEMENT**

This endorsement is added to Part Five—Premium of the policy.

The premium for the policy is adjusted by an experience rating modification factor. The factor shown on the Information Page may be revised and applied to the policy in accordance with our manuals and endorsements. We will issue an endorsement to show the revised factor, if different from the factor shown, when it is calculated.

37945000208074



INSURED COPY

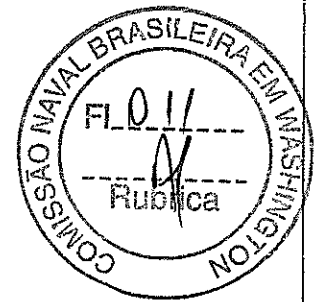
MD 17598

EM BRANCO



NATIONWIDE  
 ONE WEST NATIONWIDE BLVD  
 COLUMBUS, OH 43215-2220  
 1-877 On Your Side  
 1 (877) 669-6877

Nationwide®



**COMMERCIAL PACKAGE SUMMARY**

PRINTED 02-28-2022

Account Number: ACP 3008144099  
 Named Insured: BRAZILIAN NAVAL COMMISSION  
 Mailing Address: 5130 MACARTHUR BLVD NW  
 WASHINGTON, DC 20016-3316  
 Agency: BAY AREA INSURANCE GROUP LLC  
 Agency Number: 17588  
 Region Code: 042  
 Agency Address: 818 E COLLEGE PKWY  
 ANNAPOLIS, MD 21409-5629  
 Agency Phone Number: (410) 647-7333



**Premiums/Fees**

Total Account Premium \$8,725.00

Line of Business	Premium
Commercial Property	\$3,706.00
General Liability	\$1,597.00
Workers Compensation	\$3,422.00

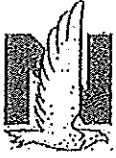
Not a bill. Your bill is sent separately.

This Commercial Package is a portfolio of individual policies which serves to combine various insurance coverages written under a group of separate contracts of insurance.

33211000040021

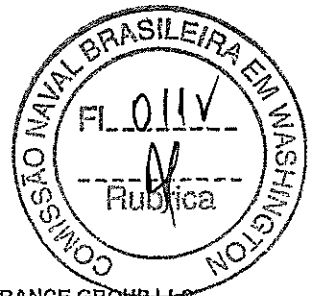
INSURED COPY

MD 17588



**Nationwide®**  
Is on your side

NATIONWIDE  
ONE WEST NATIONWIDE BLVD  
COLUMBUS, OH 43215-2220  
1-877 On Your Side  
1 (877) 669-6877



**ACCOUNT NUMBER**

ACP 3008144099

**BILLING ACCOUNT NUMBER**

211601064

**AGENCY**

BAY AREA INSURANCE GROUP LLC

**AGENCY NUMBER**

17588

BRAZILIAN NAVAL COMMISSION  
5130 MACARTHUR BLVD NW  
WASHINGTON, DC 20016-3316

**AGENCY ADDRESS**

818 E COLLEGE PKWY  
ANNAPOLIS, MD 21409-5629

**COMMERCIAL SERVICE CENTER PHONE NUMBER**

(888) 508-8622

**Important News About Your Policy**

**Good news! We're upgrading our policy system to serve you better**

You may be seeing some policy changes as a result of our systems upgrade. Details of these policy changes are included in this packet. Your billing documents and payment plans will not change. Any changes to your premium depend on your state and the type of policy you have.



You can contact your agent or call us at **1-888-508-8622** for more information.



Manage your policy and pay your bill online.

To view and print your policy, pay your bill, set up recurring bill payments, manage your online account and more, go to [www.NWsignup.com](http://www.NWsignup.com).

**As always, thanks for being a Nationwide customer.**

33211000040030



INSURED COPY

MD 17588

Nationwide Mutual Insurance Company and Affiliated Companies, One Nationwide Plaza, Columbus, Ohio 43215-2220 [nationwide.com](http://nationwide.com)  
Nationwide, the Nationwide N and Eagle and Nationwide Is on your side are service marks of Nationwide Mutual Insurance Company. © 2018 Nationwide



NATIONWIDE  
 ONE WEST NATIONWIDE BLVD  
 COLUMBUS, OH 43215-2220  
 1-877 On Your Side  
 1 (877) 669-6877

**Nationwide®**



**COMMERCIAL PORTFOLIO ACP 3008144099**

**ACCOUNT NUMBER**

ACP 3008144099

**BILLING ACCOUNT NUMBER**

211601064

BRAZILIAN NAVAL COMMISSION  
 5130 MACARTHUR BLVD NW  
 WASHINGTON, DC 20016-3316

**PLEASE KEEP THIS FOR YOUR RECORDS**

We are pleased to serve your business insurance needs. Our company is committed to providing you high quality insurance protection and superior service.

If you should have any questions about your insurance portfolio or if you wish to make a change to your policy, please contact your agent.

**IMPORTANT INFORMATION ABOUT YOUR POLICY**

Please spend a few minutes to read and understand your policy. Some items to which you should pay special attention are as follows:

- **Special Required State Notices.** These notices, when included, point out specific items concerning your policy. We urge you to read them.
- **Declarations Page.** This shows such information as your name, address, the coverages provided, the policy term, policy limits, list of coverages forms, premium amounts, and other individualized information.
- **Coverage and Endorsement Forms.** This is the section of your policy which provides policy and coverage information. Please read it carefully.

**Your Commercial Insurance Portfolio**

Courtesy of:

Agency: BAY AREA INSURANCE GROUP LLC  
 Agency Number: 17588  
 Region Code: 042  
 Agency Address: 818 E COLLEGE PKWY  
 ANNAPOLIS, MD 21409-5629  
 Agency Phone Number: (410) 647-7333

Nationwide Mutual Insurance Company and Affiliated Companies, One Nationwide Plaza, Columbus, Ohio 43215-2220  
 nationwide.com. Nationwide, the Nationwide N and Eagle and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. © 2017 Nationwide

33211000040012



INSURED COPY

MD 17588

**EM BRANCO**



NATIONWIDE AFFINITY INSURANCE COMPANY  
 ONE WEST NATIONWIDE BLVD  
 COLUMBUS, OH 43215-2220  
 1-877 On Your Side  
 1 (877) 669-6877



**Nationwide®**

**COMMERCIAL PROPERTY  
 COMMON DECLARATIONS**

Policy Number: ACP CP013058144099  
 Named Insured: BRAZILIAN NAVAL COMMISSION  
 Mailing Address: 5130 MACARTHUR BLVD NW  
 WASHINGTON, DC 20016-3316  
 Agency: BAY AREA INSURANCE GROUP LLC  
 Address: 818 E COLLEGE PKWY  
 ANNAPOLIS, MD 21409-5629  
 Agency Phone: (410) 647-7333  
 Policy Period: Effective From 05-04-2022 To 05-04-2023  
 12:01 AM Standard Time at the  
 insured's mailing address.  
 The Insured is a(n): Non-Profit Organization



**Premium/Fees**

Total Annual Premium	\$3,706.00
Total Policy Premium	\$3,706.00

33211000040569

You may access your policy and any applicable endorsements any time at [www.nationwide.com](http://www.nationwide.com).



INSURED COPY

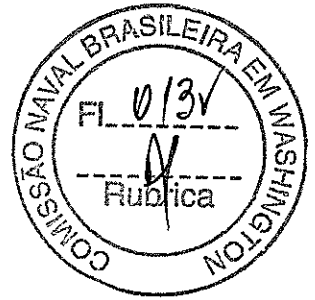
MD 17588



**Nationwide®**

# COMMERCIAL PROPERTY

## SCHEDULE(S)



Policy Number: ACP CP013058144099 Policy Period: From 05-04-2022 To 05-04-2023

### SCHEDULE OF NAMED INSUREDS

Named Insured	Type of Entity
BRAZILIAN NAVAL COMMISSION	Non-Profit Organization

### SCHEDULE OF LOCATIONS

Location	Location ID	Location Address
001		5130 MACARTHUR BLVD NW, WASHINGTON, DC 20016-3316

### Policy Summary

Coverage	Premium
Policywide Coverages	\$456.00
1:5130 MACARTHUR BLVD NW,WASHINGTON,DC	\$3,250.00
<b>Policy Summary Total</b>	<b>\$3,706.00</b>





Nationwide®

# COMMERCIAL PROPERTY

## SCHEDULE(S)



Policy Number: ACP CP013058144099

Policy Period: From 05-04-2022 To 05-04-2023

### FORMS AND ENDORSEMENTS SUMMARY

Form Number	Title
CPDS01 01 21	Commercial Property Declarations
IL 00 17 11 98	Common Policy Conditions
IL 02 78 09 08	District Of Columbia Changes - Cancellation And Nonrenewal
IL 09 35 07 02	Exclusion Of Certain Computer-Related Losses
IL 09 52 01 15	Cap On Losses From Certified Acts Of Terrorism
IL 09 95 01 07	Conditional Exclusion Of Terrorism (Relating To Disposition Of Federal Terrorism Risk Insurance Act)
CP 00 10 10 12	Building And Personal Property Coverage Form
CP 00 30 10 12	Business Income (And Extra Expense) Coverage Form
CP 00 90 07 88	Commercial Property Conditions
CP 01 40 07 06	Exclusion Of Loss Due To Virus Or Bacteria
CP 04 11 09 17	Protective Safeguards
CP 10 30 09 17	Causes Of Loss - Special Form
CP 10 35 06 95	Watercraft Exclusion
CP 12 11 09 17	Burglary And Robbery Protective Safeguards
CP 12 70 09 96	Joint Or Disputed Loss Agreement
CP 99 03 12 19	Cannabis Exclusion
NCP 71 04 07 07	Property Amendatory Endorsement
NCP 71 17 09 17	Equipment Breakdown Coverage (Including Electronic Circuitry Impairment)
NCP 71 33 01 21	Commercial Property Platinum Protection Plus Endorsement
NCP 71 78 06 13	Business Income (And Extra Expense) - Actual Loss Sustained Coverage Form
NCP 73 91 04 21	Named Insureds Endorsement

### IMPORTANT NOTICES

Form Number	Title
NI5034 01 22	Commercial Property Transfer of Your Policy within Nationwide Insurance
NI0062 01 21	Notice of Terrorism Insurance Coverage
NI0018 01 17	Flood Insurance Notice

33211000040578



INSURED COPY

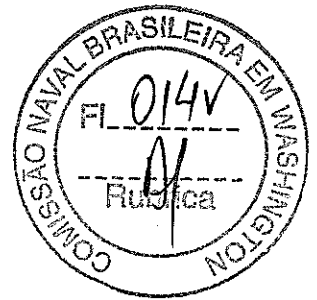
MD 17588



**Nationwide®**

# COMMERCIAL PROPERTY

## SCHEDULE(S)



Policy Number: ACP CP013058144099

Policy Period: From 05-04-2022 To 05-04-2023

### IMPORTANT NOTICES

Form Number	Title
NI0035 01 17	Data Breach & Identity Recovery Services
NI0082 07 17	Protective Safeguard Endorsement Advisory Notice To Policyholders
NI5033 02 20	Notice to Policyholders - Cannabis Exclusions





Nationwide®

COMMERCIAL PROPERTY

PROPERTY DECLARATIONS



Policy Number: ACP CP013058144099

Policy Period: From 05-04-2022 To 05-04-2023

Location 001:

Location Address: 5130 MACARTHUR BLVD NW  
WASHINGTON, DC 20016-3316

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "SELECTED".

Location 001/Building 001:

Unique ID: 001

Construction Type: Masonry Non-Combustible  
- Other Than Reinforced -  
Light Steel

Class Description: Offices - Non-Governmental

Property Coverage for this location is subject to the Structure Building Deductible shown below unless otherwise stated in the policy.

33211000040587

Building Coverages	Deductible	Limit	Premium
Structure Building	\$5,000	\$7,420,000	\$2,605.00
Windstorm or Hall Deductible	\$5,000		
Theft Deductible	\$5,000		
Valuation	Replacement Cost		
Cause of Loss	Special		
Coinsurance	80%		
Burglary And Robbery Protective Safeguards		See Endorsement	
Additional Requirements Description			
Joint Or Disputed Loss Agreement		Selected	
Protective Safeguards		See Endorsement	
Cannabis Exclusion	Selected		

Building 001 - Occupancy 001:

Class Description: Offices - Non-Governmental



INSURED COPY

MD 17588



Nationwide®

COMMERCIAL PROPERTY

PROPERTY DECLARATIONS



Policy Number: ACP CP013058144099

Policy Period: From 05-04-2022 To 05-04-2023

Personal Property - All Personal Property 001:

Personal Property Coverages	Deductible	Limit	Premium
Personal Property	\$5,000	\$500,200	\$514.00
Windstorm or Hail Deductible	\$5,000		
Theft Deductible	\$5,000		
Cause of Loss	Special		
Valuation	Replacement Cost		
Coinsurance	80%		
Cannabis Exclusion	Selected		



Building 001 - Business Income 001:

Business Income Coverages	Deductible	Limit	Premium
Business Income		\$100,000	\$58.00
Cause of Loss	Special		
Coinsurance	100%		
Business Income Actual Loss Sustained			\$73.00
Period of Restoration	12 Months		
Joint Or Disputed Loss Agreement		Selected	
Watercraft Exclusion	Selected		
Cannabis Exclusion	Selected		0



Nationwide®

COMMERCIAL PROPERTY

PROPERTY DECLARATIONS



Policy Number: ACP CP013058144099 Policy Period: From 05-04-2022 To 05-04-2023

Policywide Coverages: Coverages are applicable to all Locations

Policywide Coverages	Deductible	Limit	Premium
Equipment Breakdown Coverage		See Endorsement	\$256.00
Conditional Exclusion Of Terrorism (Relating To Disposition Of Federal Terrorism Risk Insurance Act)	Selected		
Expense Constant			\$200.00

IN WITNESS WHEREOF, the Company has caused this policy to be signed by its Secretary and President

*Dennis J. [Signature]*

Secretary

*Mark A. Bueren*

President

33211000040596



INSURED COPY

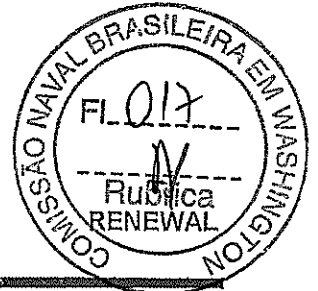
MD 17588

**JM BRANCO**



Nationwide®

NATIONWIDE ASSURANCE  
(A STOCK COMPANY)  
ONE WEST NATIONWIDE BLVD  
COLUMBUS, OH 43215-2220  
1-877 On Your Side  
1 (877) 869-6877



**COMMERCIAL GENERAL LIABILITY**

**COMMON DECLARATIONS**

Policy Number: ACP CG013058144099  
Named Insured: BRAZILIAN NAVAL COMMISSION  
Mailing Address: 5130 MACARTHUR BLVD NW  
WASHINGTON, DC 20016-3316  
Agency: BAY AREA INSURANCE GROUP LLC  
Address: 818 E COLLEGE PKWY  
ANNAPOLIS, MD 21409-5629  
Agency Phone: (410) 647-7333  
Policy Period: Effective From 05-04-2022 To 05-04-2023  
12:01 AM Standard Time at the  
insured's mailing address.  
The Insured Is a(n): Non-Profit Organization



**Premium/Fees**

Total Annual Premium	\$1,597.00
Total Policy Premium	\$1,597.00

Limits Of Insurance - Premises/Operations and Products/Completed Operations	Limit	Deductible
Each Occurrence Limit	Per Occurrence	\$1,000,000
Personal and Advertising Injury Limit	Per Person Or Organization	\$1,000,000
General Aggregate Limit	All Occurrences	\$2,000,000
Products/Completed Operations Aggregate Limit	All Occurrences	\$2,000,000
Damage To Premises Rented To You Limit	Per Occurrence	\$100,000
Medical Payments Limit	Per Person	\$10,000
Premises/Operations BI Deductible		No Deductible
Premises/Operations PD Deductible		No Deductible
Premises/Operations BI and PD Deductible		No Deductible
Products/Completed Operations BI Deductible		No Deductible
Products/Completed Operations PD Deductible		No Deductible
Products/Completed Operations BI and PD Deductible		No Deductible

33211000040212



INSURED COPY

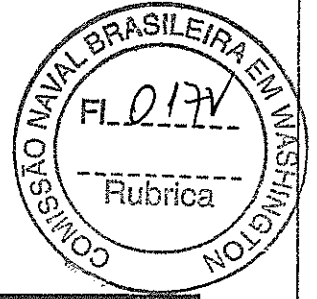
MD 17588



Nationwide®

# COMMERCIAL GENERAL LIABILITY

## SCHEDULE(S)



Policy Number: ACP CG013058144099

Policy Period: From 05-04-2022 To 05-04-2023

### SCHEDULE OF NAMED INSUREDS

Named Insured	Type of Entity
BRAZILIAN NAVAL COMMISSION	Non-Profit Organization

### SCHEDULE OF LOCATIONS

Location	Location ID	Location Address
	001	5130 MACARTHUR BLVD NW, WASHINGTON, DC 20016-3316

### Location Of Covered Operations

5130 MACARTHUR BLVD NW, WASHINGTON, DC 20016-3316





Nationwide®

# COMMERCIAL GENERAL LIABILITY

## SCHEDULE(S)



Policy Number: ACP CG013058144099

Policy Period: From 05-04-2022 To 05-04-2023

### FORMS AND ENDORSEMENTS SUMMARY

Form Number	Title
BR 99 55 06 15	Premium Audit Notice
GLDS01 01 18	Commercial General Liability Declarations
IL 00 17 11 98	Common Policy Conditions
IL 00 21 09 08	Nuclear Energy Liability Exclusion Endorsement
IL 02 78 09 08	District Of Columbia Changes - Cancellation And Nonrenewal
CG 00 01 04 13	Commercial General Liability Coverage Form
CG 21 06 05 14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-related Liability - With Limited BI Exception
CG 21 47 12 07	Employment-Related Practices Exclusion
CG 21 67 12 04	Fungi Or Bacteria Exclusion
CG 21 70 01 15	Cap On Losses From Certified Acts Of Terrorism
CG 21 87 01 15	Conditional Exclusion Of Terrorism (Relating To Disposition Of Federal Terrorism Risk Insurance Act)
NGC 71 05 12 10	Non-Pyramiding Of Limits
NGC 71 08 01 20	Exclusion - Asbestos, Electro-Magnetic Radiation, Lead, Radon, Silica, Or Talc

### IMPORTANT NOTICES

Form Number	Title
NI6023 01 22	General Liability Transfer of Your Policy within Nationwide Insurance
NI0062 01 21	Notice of Terrorism Insurance Coverage
NI0035 01 17	Data Breach & Identity Recovery Services
NI0075 01 17	Consumer Report Inquiry Notice

33211000040221



INSURED COPY

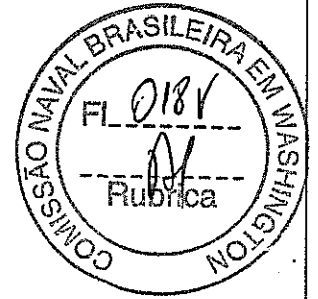
MID 17588



Nationwide®

COMMERCIAL GENERAL LIABILITY

SCHEDULE(S)



Policy Number: ACP CG013058144099

Policy Period: From 05-04-2022 To 05-04-2023

General Liability Coverages

Coverage	Limit	Deductible	Premium
Expense Constant Premium			\$260.00
<b>General Liability Subtotal</b>			<b>\$260.00</b>

Exposure

Location	Description of Hazards	Code No	Premium Basis	Premium Type	Rates		Advance Premium		
					Other	PR/CO	Other	PR/CO	
001	Buildings or Premises-office-premises occupied by emps of Insd-Not-FP only	61225	Area	22000	114.741			\$1,337.00	
<b>Exposure Subtotal</b>								<b>\$1,337.00</b>	



IN WITNESS WHEREOF, the Company has caused this policy to be signed by its Secretary and President

*Dennis J. [Signature]*

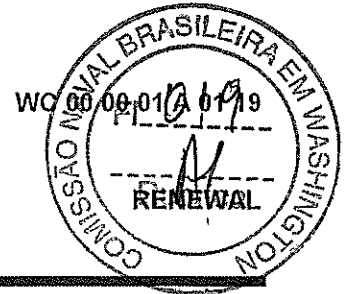
Secretary

*Mark A. Bueren*

President



Nationwide®



**STANDARD WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY**

**INFORMATION PAGE**

Insurer: NATIONWIDE MUTUAL INSURANCE COMPANY (A MUTUAL COMPANY)  
 ONE WEST NATIONWIDE BLVD  
 COLUMBUS, OH 43215-2220

Agency: BAY AREA INSURANCE GROUP LLC  
 Address: 818 E COLLEGE PKWY  
 ANNAPOLIS, MD 21409-5629

NCCI Carrier Code No: 16195  
 Agency Phone: (410) 647-7333

Policy Number: ACP WC013058144099

Prior Policy: ACP WC013058144099

**ITEM 1: INSURED**

Named Insured: BRAZILIAN NAVAL COMMISSION  
*Refer to Information Page Extension*

Mailing Address: 5130 MACARTHUR BLVD NW  
 WASHINGTON, DC 20016-3316

FEIN: *Refer to Information Page Extension*

Entity of Insured: Non-Profit Organization

Other workplaces not shown above: None

Interstate ID: None  
 Intrastate/Bureau ID: None  
 NAICS: 531120

**ITEM 2: POLICY PERIOD**

The policy period is from 05-04-2022 to 05-04-2023 12:01 AM standard time at the insured's mailing address.

**ITEM 3: COVERAGE**

- A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of the states listed here: District of Columbia
- B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in 3A. The limits of our liability under Part Two are:
 

Bodily Injury by Accident	\$100,000	each accident
Bodily Injury by Disease	\$500,000	policy limit
Bodily Injury by Disease	\$100,000	each employee
- C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here:  
 All states except North Dakota, Ohio, Washington, Wyoming and states designated in Item 3.A. of the Information Page.
- D. This policy includes these endorsements and schedules:  
*Refer to Information Page Extension*

33211000040096



INSURED COPY

MD 17588



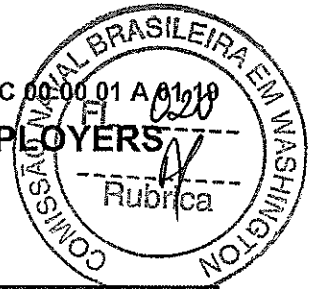


Nationwide®

STANDARD WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY

EXTENSION OF INFORMATION PAGE

WC 00-00-01 A 01 19



Policy Number: ACP WC013058144099

Policy Period: From 05-04-2022 To 05-04-2023

ITEM 1: SCHEDULE OF NAMED INSURED

Named Insured	Type of Entity	FEIN	State ID
BRAZILIAN NAVAL COMMISSION	Non-Profit Organization	52-1511420	

ITEM 1: SCHEDULE OF LOCATIONS

Location	Location ID	Location Address
	001	5130 MACARTHUR BLVD NW, WASHINGTON, DC 20016-3316

33211000040105



INSURED COPY

MD 17588



Nationwide®

# STANDARD WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY

## EXTENSION OF INFORMATION PAGE



Policy Number: ACP WC013058144099

Policy Period: From 05-04-2022 To 05-04-2023

### ITEM 3.D.: SCHEDULE OF FORMS AND ENDORSEMENTS

Form Number	Title
BR 99 55 06 15	Premium Audit Notice
WC 00 00 01 A 01 19	Information Page
WC 00 00 00 C 01 15	Workers Compensation and Employers Liability Policy
WC 00 04 04 04 84	Pending Rate Change Endorsement
WC 00 04 14 A 01 19	90-Day Reporting Requirement - Notification of Change in Ownership Endorsement
WC 00 04 19 01 01	Premium Due Date Endorsement
WC 00 04 21 E 01 21	Catastrophe (Other Than Certified Acts of Terrorism) Premium Endorsement
WC 00 04 22 C 01 21	Terrorism Risk Insurance Program Reauthorization Act Disclosure Endorsement
WC 00 04 24 01 17	Audit Noncompliance Charge Endorsement
WC 08 06 01 04 84	District Of Columbia Cancellation Endorsement



### IMPORTANT NOTICES

Form Number	Title
NI8055 03 20	Workers Compensation Transfer of Your Policy within Nationwide Insurance
NI0062 01 21	Notice of Terrorism Insurance Coverage
NI8012 04 21	Claims Policyholder Notice

### POSTING NOTICES

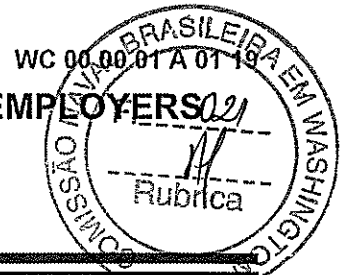
Form Number	Title
NP0801 03 17	Notice Of Compliance To Employees
NP0802 07 12	Employee's Rights And Obligations-District Of Columbia Workers Compensation Law



Nationwide®

STANDARD WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY

EXTENSION OF INFORMATION PAGE



Policy Number: ACP WC013058144099

Policy Period: From 05-04-2022 To 05-04-2023

ITEM 4: PREMIUM

DISTRICT OF COLUMBIA OPERATIONS

Location	Classifications	Code No.	Premium Basis Total Estimated Annual Remuneration	Rate Per \$100 of Remuneration	Estimated Annual Premium
001	Drivers, Chauffeurs, Messengers, And Their Helpers NOC - Commercial	7380	19400.00	4.7100	\$914.00
001	Clerical Office Employees Noc	8810	910000.00	0.1100	\$1,001.00
001	Building Or Property Management-All Other Employees	9015		2.2400	-
	Total Manual Premium				\$1,915.00
	Total Subject Premium				\$1,915.00
	Total Modified Premium				\$1,915.00
	Total Standard Premium				\$1,915.00
	Expense constant	0900	1.00	160.0000	\$160.00
	Terrorism Risk Insurance Program Reauthorization Act Disclosure Endorsement	9740	929400.00	0.1270	\$1,180.00
	Catastrophe (Other Than Certified Acts of Terrorism)	9741	929400.00	0.0180	\$167.00
	Estimated Annual Premium				\$3,422.00
	DC SPECIAL FUND SURCHARGE		3422.00		-
	<b>Total Estimated Annual Premium</b>				<b>\$3,422.00</b>

33211000040114



INSURED COPY

MID 17588

**EM BRANCO**