

# Request for Proposals:



## Property & Casualty Insurance Risk Management Program

Policy Term:

02/15/2025 - 02/15/2026

# Calendar of Events for receiving quotes

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Listed below are important dates and times by which actions must be completed. All dates are subject to change by GRANT COUNTY. If GRANT COUNTY finds it necessary to change any of these dates or times prior to the due date, the change will be accomplished by addendum

Action	Date Available or Date Needed
Issue Request for Quotes for Grant County P&C Program	Information available via HR Dept from 12/01/2024 through 01/30/2025
Last Day for questions	01/31/2025 by 5pm EST
Proposal Due Date	02/12/2025
Broker Interviews (if necessary)	2/10/2025 through 2/12/2025
Winning Bid Contract Award date	02/13/2025

## IMPORTANT NOTES:

- All information requests and /or coverage requests will be forwarded to Grant County HR Dept addressed to Justin Saathoff [jsaathoff@grantcounty.in.gov](mailto:jsaathoff@grantcounty.in.gov)

## Additional Attachments to be included with this bid document:

1. Statement of Property Values for Grant County
2. Excel List of all county vehicles
3. County Driver's List
4. List of Equipment (Inland Marine)
5. Five Years of Historical Claims Data (All Lines of Coverage)
6. Workers Compensation Experience Mod. Worksheet 2025
7. Supplemental Applications

## \*\*\*Note about company specific underwriting applications

Grant County is aware that many insurance carrier's have specific "supplemental" applications. To avoid duplicate work, Grant County will complete one set of supplemental applications (included in the additional attachments). Please attempt to use these applications. If additional information or an application is needed, please submit the request and Grant County will advise accordingly if appropriate. If upon broker selection we need to complete final applications for placement of coverage, Grant County will comply.

## Named Insured, Mailing Address, & Contacts

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### First Named Insured

Grant County

### Additional Named Insureds

N/A

### Mailing Address:

401 S. Adams Street Marion, IN 46952

### Authorized Individuals / Contacts

<i>Name</i>	<i>Title</i>	<i>Phone</i>	<i>Email</i>	<i>Preferred Method of Contact</i>
Justin Saathoff	HR Coordinator	765-651-2406	<a href="mailto:jsaathoff@grantcounty.net">jsaathoff@grantcounty.net</a>	Email
Nancy Bender			<a href="mailto:nbender@grantcounty.net">nbender@grantcounty.net</a>	Email

## Location Schedule

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<i>Location #</i>	<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
1	401 S Adams Street	Marion	IN	46952
2	101 E 4th St	Marion	IN	46953
3	34th & Meridian Street	Marion	IN	46953
4	3912 South Garthwaite Road	Gas City	IN	46953
5	503-521 South Adams Street (501 S Adams St.)	Marion	IN	46953
6	3939 Garthwaite Road	Gas City	IN	46933
7	302 S Washington St	Marion	IN	46952

## Basic Policy Information – Expiring –

<i>Line of Business</i>	<i>Policy #</i>	<i>Policy Period</i>	<i>Carrier</i>
Commercial Property, Inland Marine (C)	H6307X500943-TIL-24	02/15/2025-02/15/2026	Travelers
Crime	H6307X500943-TIL-24	02/15/2025-02/15/2026	Travelers
Employment Practices Liability	ZLP-51N77994-24-PB	02/15/2025-02/15/2026	Travelers
Umbrella(C)	ZUP-31N76584-24-PB	02/15/2025-02/15/2026	Travelers
General Liability/Employee Benefits Liability	ZLP-51N77994-24-PB	02/15/2025-02/15/2026	Travelers
Law Enforcement Liability	PPL905PPL0957283	02/15/2025-02/15/2026	Indiana Harbor
Public Officials Liability	ZLP-51N77994-24-PB	02/15/2025-02/15/2026	Travelers
Accident and Health	PRCO-86853-IN10477	02/15/2025-02/15/2026	Provident Agency Inc
Accidental Death & Dismemberment	EXAD-98758-IN10477	02/15/2025-02/15/2026	Provident Agency Inc
Business Auto	H-810-7X500943-IND-24	02/15/2025-02/15/2026	Liberty Mutual
Cyber	BSM0139883390	02/15/2025-02/15/2026	CFC
Workers Compensation	119455-6	02/15/2025-02/15/2026	IPEP

## Commercial Property Address's & Coverages

### Premise Information

Loc #	Bldg #	Description	Address	City	State	Zip
1	1	Jail / County Offices	401 S Adams Street	Marion	IN	46952
1	2	Radio Tower	401 S Adams Street	Marion	IN	46952
1	3	Storage Building #1 in rear	401 S Adams Street	Marion	IN	46952
1	4	Storage Building #2 in rear	401 S Adams Street	Marion	IN	46952
1	5	Storage Building	401 S Adams Street	Marion	IN	46952
1	6	County Office & Security Center	401 S Adams Street	Marion	IN	46952
1	7	Sheriff's Department Radio Tower	401 S Adams Street	Marion	IN	46952
1	8	Building	401 S Adams Street	Marion	IN	46952
1	9	Generator	401 S Adams Street	Marion	IN	46952
2	1	Court House w/Offices & Courts	101 E 4th St	Marion	IN	46953
3	1	Highway Dept. Radio Tower	34th & Meridian Street	Marion	IN	46953
3	2	Perimeter Fence-Highway Dept	34th & Meridian Street	Marion	IN	46953
4	1	Storage Building	3912 South Garthwaite Road	Gas City	IN	46953
4	2	Salt storage	3912 South Garthwaite Road	Gas City	IN	46953
5	1	Detention facility	503-521 South Adams Street	Marion	IN	46953
6	1	Highway Dept. Office, Garage, Welding Shop, Sign Shop	3939 Garthwaite Road	Gas City	IN	46933
6	2	Highway Dept. Barn	3939 Garthwaite Road	Gas City	IN	46933
6	3	Highway Dept. Storage Building/Salt	3939 Garthwaite Road	Gas City	IN	46933
7	1	Office	302 S Washington St	Marion	IN	46952

Loc #	Bldg #	Blanket	Subject of Insurance	Limit	Coins. %	Valuation	Cause of Loss	Deductible
ALL	ALL	YES	Blanket Real Property	\$74,398,546	90	Replacement Cost	Special (Including theft) - Detail	\$10,000
ALL	ALL	YES	Blanket Personal Property	\$5,840,593	90	Replacement Cost	Special (Including theft) - Detail	\$10,000
ALL	ALL	YES	Blanket Business Income	\$250,000				\$10,000
ALL	ALL	YES	Blanket Extra Expense	\$500,000				\$10,000

**STATEMENT OF VALUES PROVIDED VIA EXCEL SPREADSHEET SEPARATELY**

## Commercial Property Address's & Coverages

### ADDITIONAL COVERAGES INCLUDED:

Coverage	Limit	Deductible
Additional Property Coverages		
Earthquake	\$5,000,000	\$50,000
Flood	\$5,000,000	\$50,000
Water Backup	\$50,000	
Public Entity Property Extension	See attached	
Fences	\$8,552	\$10000
Builders Risk	\$500,000	\$10000
Course of Construction	\$500,000	\$10000

*Please provide your carrier's "enhancement" coverages separately*

## Commercial Inland Marine

Category	Coverage	Sched. Equipment – Limit	Deductible	Default Val.
Emergency Services Equipment	Special form	\$1,678,360	1,000	Actual Cash Value
Miscellaneous	Special form	\$17,250	\$1,000	Actual Cash Value
Highway Equipment	Special form	\$1,522,227	\$1,000	Actual Cash Value
Leased/Rented/Borrowed Equipment	Special form	\$50,000	\$1,000	Actual Cash Value

### INLAND MARINE SCHEDULE PROVIDED SEPARATELY VIS EXCL SPREADSHEET

Description	Max Item	Amt. of Insurance	% Coins
Leased/Rented/Borrowed Equipment		\$50,000	N/A

## Commercial Crime

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<i>Coverage Description</i>	<i>Limit</i>	<i>Deductible</i>
Form A - Employee Dishonesty	\$100,000	\$1,000
Form C - Theft Disappearance & Destruction - Inside the Premises	\$20,000	\$1,000
Form C - Theft Disappearance & Destruction - Outside the Premises	\$20,000	\$1,000



## Commercial General Liability

### Coverage Detail

<i>Description</i>	<i>Limit</i>	<i>Deductible</i>
General Aggregate	\$3,000,000	N/A
Products/Completed Ops Aggregate	\$3,000,000	N/A
Personal & Advertising Injury	\$1,000,000	N/A
Each Occurrence	\$1,000,000	N/A
Fire Damage	\$100,000	N/A
Medical Expense	Excluded	N/A
Employee Benefits Liability (Claims Made)	\$1,000,000	\$1000
Sexual Abuse & Molestation-Aggregate	\$1,000,000	\$10,000
Sexual Abuse & Molestation-Occurrence	\$1,000,000	\$10,000

### *Endorsements, Additional Coverages & Terms*

Employee Benefits – Retro Date 2/15/2019

Commercial General Liability Enhancement Endorsement (Please provide your carrier's enhancements)

Not auditable

## EPLI

<i>Coverage</i>	<i>Limit</i>	<i>Retention</i>
Each Wrongful Act	\$5,000,000	\$25,000
Aggregate Limit	\$5,000,000	
Occurrence Form		

#### LIMITS OF INSURANCE

Each Wrongful Employment Practices Act Limit           \$ 5,000,000  
 Aggregate Limit   \$ 5,000,000

#### DEDUCTIBLE

Each Wrongful Employment Practices Act Deductible       \$ 25,000

## Public Official

Coverage	Limit	Retention
Each Wrongful Act	\$3,000,000	\$10,000
Aggregate Limit	\$3,000,000	
Claims Made		

### Coverage Form

Public Officials Liability Coverage Form (Claims Made)

#### Coverages, Limits and Deductible

	Limits of Insurance
Each Wrongful Act Limit	\$ 3,000,000
Aggregate Limit	\$ 3,000,000
	Deductible
Each Wrongful Act Deductible	\$ 10,000

Supplementary Payments - Non-Monetary Relief

#### Coverages, Limits and Deductible

	Limits of Insurance
Aggregate Limit	\$ 100,000
	Deductible
Each Wrongful Act Deductible	\$ 10,000

Retroactive Date: This insurance does not apply to "wrongful acts" committed prior to the Retroactive Date shown here (Enter Date or "None" if no Retroactive Date Applies): Retroactive Date:

1/15/2005

## Law Enforcement

Coverage	Limit	Retention
Each Wrongful Act	\$1,000,000	\$50,000
Aggregate Limit	\$3,000,000	
Occurrence Form		

Item 3. LIMITS OF LIABILITY:

(a) Each **Law Enforcement Occurrence** Limit Of Liability

\$ 1,000,000 **Company's** maximum Limit of Liability for all **Loss**, each **Law Enforcement Occurrence**;

(b) Policy Aggregate Limit of Liability

\$ 3,000,000 **Company's** maximum aggregate Limit of Liability for all **Loss** from all **Claims**, all **Law Enforcement Occurrences**.

Item 4. RETENTION

\$ 50,000 each and every **Law Enforcement Occurrence**

## Commercial Cyber – CFC

Applications completed upon request

Coverage	Limit	Deductible
General Aggregate	\$1,000,000	
Each Occurrence	\$1,000,000	\$10,000



### THE FOLLOWING INSURING CLAUSES ARE SUBJECT TO AN AGGREGATE LIMIT INSURING CLAUSE 4: NETWORK SECURITY & PRIVACY LIABILITY

#### SECTION A: NETWORK SECURITY LIABILITY

Aggregate limit of liability:	USD1,000,000	in the aggregate, including costs and expenses
Deductible:	USD10,000	each and every claim, including costs and expenses

#### SECTION B: PRIVACY LIABILITY

Aggregate limit of liability:	USD1,000,000	in the aggregate, including costs and expenses
Deductible:	USD10,000	each and every claim, including costs and expenses

#### SECTION C: MANAGEMENT LIABILITY

Aggregate limit of liability:	USD1,000,000	in the aggregate, including costs and expenses
Deductible:	USD10,000	each and every claim, including costs and expenses

#### SECTION D: REGULATORY FINES

Aggregate limit of liability:	USD1,000,000	in the aggregate, including costs and expenses
Deductible:	USD10,000	each and every claim, including costs and expenses

#### SECTION E: PCI FINES, PENALTIES AND ASSESSMENTS

Aggregate limit of liability:	USD1,000,000	in the aggregate, including costs and expenses
Deductible:	USD10,000	each and every claim, including costs and expenses

### INSURING CLAUSE 5: MEDIA LIABILITY

#### SECTION A: DEFAMATION

Aggregate limit of liability:	USD1,000,000	in the aggregate, including costs and expenses
Deductible:	USD10,000	each and every claim, including costs and expenses

#### SECTION B: INTELLECTUAL PROPERTY RIGHTS INFRINGEMENT

Aggregate limit of liability:	USD1,000,000	in the aggregate, including costs and expenses
Deductible:	USD10,000	each and every claim, including costs and expenses

### INSURING CLAUSE 6: TECHNOLOGY ERRORS AND OMISSIONS

NO COVER GIVEN



## INSURING CLAUSE 2: CYBER CRIME

### SECTION A: FUNDS TRANSFER FRAUD

Limit of liability:	USD250,000	each and every claim
Deductible:	USD10,000	each and every claim

### SECTION B: THEFT OF FUNDS HELD IN ESCROW

Limit of liability:	USD250,000	each and every claim
Deductible:	USD10,000	each and every claim

### SECTION C: THEFT OF PERSONAL FUNDS

Limit of liability:	USD250,000	each and every claim
Deductible:	USD10,000	each and every claim

### SECTION D: EXTORTION

Limit of liability:	USD1,000,000	each and every claim
Deductible:	USD10,000	each and every claim

### SECTION E: CORPORATE IDENTITY THEFT

Limit of liability:	USD250,000	each and every claim
Deductible:	USD10,000	each and every claim

### SECTION F: TELEPHONE HACKING

Limit of liability:	USD250,000	each and every claim
Deductible:	USD10,000	each and every claim

### SECTION G: PUSH PAYMENT FRAUD

Limit of liability:	USD50,000	each and every claim
Deductible:	USD10,000	each and every claim

### SECTION H: UNAUTHORIZED USE OF COMPUTER RESOURCES

Limit of liability:	USD250,000	each and every claim
Deductible:	USD10,000	each and every claim



### INSURING CLAUSE 3: SYSTEM DAMAGE AND BUSINESS INTERRUPTION

#### SECTION A: SYSTEM DAMAGE AND RECTIFICATION COSTS

Limit of liability: USD1,000,000 each and every claim

Deductible: USD10,000 each and every claim

#### SECTION B: INCOME LOSS AND EXTRA EXPENSE

Limit of liability: USD1,000,000 each and every claim, sub-limited to USD1,000,000 in respect of **system failure**

Deductible: USD10,000 each and every claim

#### SECTION C: ADDITIONAL EXTRA EXPENSE

Limit of liability: USD100,000 each and every claim

Deductible: USD10,000 each and every claim

#### SECTION D: DEPENDENT BUSINESS INTERRUPTION

Limit of liability: USD1,000,000 each and every claim, sub-limited to USD1,000,000 in respect of **system failure**

Deductible: USD10,000 each and every claim

#### SECTION E: CONSEQUENTIAL REPUTATIONAL HARM

Limit of liability: USD1,000,000 each and every claim

Deductible: USD10,000 each and every claim

#### SECTION F: CLAIM PREPARATION COSTS

Limit of liability: USD25,000 each and every claim

Deductible: USD0 each and every claim

#### SECTION G: HARDWARE REPLACEMENT COSTS

Limit of liability: USD1,000,000 each and every claim

Deductible: USD10,000 each and every claim



**THE FOLLOWING INSURING CLAUSES ARE SUBJECT TO AN AGGREGATE LIMIT**  
**INSURING CLAUSE 4: NETWORK SECURITY & PRIVACY LIABILITY**

**SECTION A: NETWORK SECURITY LIABILITY**

<b>Aggregate limit of liability:</b>	<b>USD1,000,000</b>	<b>in the aggregate, including costs and expenses</b>
<b>Deductible:</b>	<b>USD10,000</b>	<b>each and every claim, including costs and expenses</b>

**SECTION B: PRIVACY LIABILITY**

<b>Aggregate limit of liability:</b>	<b>USD1,000,000</b>	<b>in the aggregate, including costs and expenses</b>
<b>Deductible:</b>	<b>USD10,000</b>	<b>each and every claim, including costs and expenses</b>

**SECTION C: MANAGEMENT LIABILITY**

<b>Aggregate limit of liability:</b>	<b>USD1,000,000</b>	<b>in the aggregate, including costs and expenses</b>
<b>Deductible:</b>	<b>USD10,000</b>	<b>each and every claim, including costs and expenses</b>

**SECTION D: REGULATORY FINES**

<b>Aggregate limit of liability:</b>	<b>USD1,000,000</b>	<b>in the aggregate, including costs and expenses</b>
<b>Deductible:</b>	<b>USD10,000</b>	<b>each and every claim, including costs and expenses</b>

**SECTION E: PCI FINES, PENALTIES AND ASSESSMENTS**

<b>Aggregate limit of liability:</b>	<b>USD1,000,000</b>	<b>in the aggregate, including costs and expenses</b>
<b>Deductible:</b>	<b>USD10,000</b>	<b>each and every claim, including costs and expenses</b>

**INSURING CLAUSE 5: MEDIA LIABILITY**

**SECTION A: DEFAMATION**

<b>Aggregate limit of liability:</b>	<b>USD1,000,000</b>	<b>in the aggregate, including costs and expenses</b>
<b>Deductible:</b>	<b>USD10,000</b>	<b>each and every claim, including costs and expenses</b>

**SECTION B: INTELLECTUAL PROPERTY RIGHTS INFRINGEMENT**

<b>Aggregate limit of liability:</b>	<b>USD1,000,000</b>	<b>in the aggregate, including costs and expenses</b>
<b>Deductible:</b>	<b>USD10,000</b>	<b>each and every claim, including costs and expenses</b>

**INSURING CLAUSE 6: TECHNOLOGY ERRORS AND OMISSIONS**

**NO COVER GIVEN**



**INSURING CLAUSE 7: COURT ATTENDANCE COSTS**

Aggregate limit of liability: USD100,000 in the aggregate

Deductible: USD0 each and every claim



# AD&D- Volunteer

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**Covered Class:**

Class A: All Active Volunteer Members of the Policyholder  
 Class B: All Active Volunteer Members of the Policyholder

**Type of Coverage:**

24-Hour Coverage  
 Line-of-Duty Coverage

**Number of Insured Persons (Active Members): 60**

Quote Options:	<u>Present Plan</u>	<u>Plan 1</u>	<u>Plan 2</u>
<b>AD&amp;D Principal Sum:</b>	Class A: \$10,000 Class B: \$20,000	Class A: \$20,000 Class B: \$40,000	Class A: \$30,000 Class B: \$60,000
<b>Premium Option for Class A &amp; B Coverage:</b>			
Annual	\$572.00	\$1,129.00	\$1,685.00
3-year Prepaid	\$1,544.00	\$3,046.00	\$4,548.00

Premium is due on the chosen effective date.

## Accident & Health – Year 3

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### SECTION I: DEATH BENEFITS

	<u>Class I</u>
<b>I.A. COVERED INJURY DEATH BENEFIT</b> Principal Sum	\$150,000
<b>I.B. COVERED ILLNESS DEATH BENEFIT</b> Principal Sum	\$150,000
<b>I.C. HIV POSITIVE DIAGNOSIS LUMP SUM BENEFIT</b> Benefit Amount	\$150,000
<b>I.D. BEREAVEMENT BENEFIT</b> Maximum Benefit Amount	\$10,000
<b>I.E. DEPENDENT CHILD BENEFIT</b> Benefit Amount (for each Dependent Child)	\$30,000
<b>I.F. SEATBELT AND AIRBAG BENEFIT</b> Seatbelt Benefit Amount Airbag Benefit Amount	\$37,500 \$37,500
<b>I.G. FINAL EXPENSES BENEFIT</b> Maximum Benefit Amount <i>(includes repatriation to the funeral home as well as other locations, cremation, burial services, grave marker/headstone)</i>	\$10,000
<b>I.H. SPOUSAL BENEFIT</b> Benefit Amount	\$15,000
<b>I.I. SURVIVING SPOUSE EDUCATION BENEFIT</b> Maximum Benefit Amount Maximum Benefit Period	\$10,000 4 years
<b>I.J. DEPENDENT CHILD EDUCATION BENEFIT</b> Maximum Benefit Amount Maximum Benefit Period	\$10,000 4 years

**SECTION II: IMPAIRMENT BENEFITS**

	<u>Class I</u>
<b>II.A. DISMEMBERMENT, LOSS OF SPEECH OR HEARING BENEFIT</b> Impairment Principal Sum	\$150,000
<b>II.B. VISION IMPAIRMENT BENEFIT</b> Vision Impairment Principal Sum	\$150,000
<b>II.C. COSMETIC DISFIGUREMENT FROM BURNS BENEFIT</b> Cosmetic Disfigurement from Burns Principal Sum	\$150,000
<b>II.D. PERMANENT PHYSICAL IMPAIRMENT BENEFIT</b> Permanent Physical Impairment Principal Sum	\$150,000
<b>II.E. FELONIOUS ASSAULT BENEFIT</b> Benefit Amount	50% of the total amount payable under the following benefits: Covered Injury Death Benefit, Dismemberment, Loss of Speech or Hearing Benefit, Vision Impairment Benefit, Cosmetic Disfigurement from Burns Benefit, Permanent Physical Impairment Benefit, Paralysis Benefit, or Weekly Total or Partial Disability Benefits, subject to an overall maximum benefit of \$75,000
<b>II.F. IMPAIRMENT MODIFICATION BENEFIT</b> Maximum Benefit Amount	actual expenses up to \$50,000
<b>II.G. PARALYSIS BENEFIT</b> Paralysis Benefit Principal Sum Paralysis must occur within	\$150,000 365 days of the Covered Injury or onset of Covered Illness

## Commercial Automobile

<b>Symbols</b>		
1-Any Auto	2-All Owned Autos	3-Owned Private Passenger Autos
4-Owned-other than Private Passenger	5-Owned Requires No-Fault Coverage	6-Owned Subj. to Compulsory UM Law
7-Autos Specified on Schedule	8-Hired Autos	9-Non-Owned Autos

### Coverage Detail

<b>Description</b>	<b>Symbol</b>	<b>Limit</b>	<b>Deductible</b>
Combined single limit	1	\$1,000,000	
Medical payments	2	\$5,000	
Uninsured motorist combined single limit	2	\$1,000,000	
Underinsured motorist combined single limit	2	\$1,000,000	
Comprehensive	8,10		\$1,000
Collision	8,10		\$1,000

<b>Hired Auto Coverage</b>	<b>Limit</b>	<b>Deductible</b>
Hired/borrowed	\$1,000,000	
Comprehensive		\$1,000
Collision		\$1,000

### **Endorsements, Forms, Conditions—Included But Not Limited To**

Auto Enhancement included and must be similar to incumbent carrier. Please provide with your quotes

AUTO LISTING Provided Separately via excel worksheet

## Workers Compensation

Coverage	Each Accident	Policy Limit	Each Employee
WC & Employer's liability	\$1,000,000	\$1,000,000	\$1,000,000
Increased employer's liability	\$1,000,000	\$1,000,000	\$1,000,000

Current Modification Factor	Renewal Modification Factor
1.27	1.21

### Rating Basis

Location	State	Class Code	Classification	Payroll Exposure
1	IN	5506	Streets	\$1,239,666
1	IN	5606	Contractor	0
1	IN	7698	Rostered Volunteers	20
1	IN	7705	Ambulance	\$508,218
1	IN	7720	Police	\$7,801,838
1	IN	7732	Police Reserves	20
1	IN	8264	Bottle Dealer	\$60,807
1	IN	8810	Clerical	\$4,185,123
1	IN	8820	Attorney	\$1,618,100
1	IN	8832	Physicians	\$416,380
1	IN	9015	Building NOC	\$130,421
1	IN	9410	Municipal Employees	\$4457,955


[www.ipep.com](http://www.ipep.com)

## Accidental Death and Dismemberment Coverage

### Are your Employees Covered 24/7 in the Event of an Accident?

Serious injuries can have a devastating impact on individuals and the family members that survive them. This is why IPEP offers accident insurance for its members and participants - helping provide the critical financial security and resources necessary to deal with loss caused by an accident.

### Who's eligible for coverage?

This plan provides coverage to all full-time, part-time and seasonal employees of Member Municipalities of IPEP.

### Accidental Death & Dismemberment Benefits

If, within 365 days of a covered accident, injury results in any one of the losses shown below, the benefit amount shown opposite the loss will be paid. If multiple losses occur, only one benefit amount—the largest—will be paid for all losses due to the same accident.

### Included Coverage:

Covered Loss	Benefit Amount
Life, Speech and Hearing, Speech or Hearing and Hand, Foot, or Sight of One Eye; Hands, Feet; Sight; any two of Hand, Foot, or Sight of One Eye; Quadriplegia	100% of Principal Sum
Paraplegia	75% of Principal Sum
Hand; Foot; Sight of One Eye; Speech; Hearing; Hemiplegia	50% of Principal Sum
Thumb & Index Finger of the Same Hand; Uniplegia	25% of Principal Sum

Principal Sum is \$10,000

### Additional Benefits:

- Alternate Fuel Private Passenger Vehicle
- Bicycling Commutation
- Carpool or Vanpool Commutation
- Carjacking
- Coma
- Home Alteration or Vehicle Modification
- Home Health Care
- Natural Disaster Evacuation Expense
- Rehabilitation Expense
- Seat Belt and Occupant Protection Device
- Walking Commutation

# Commercial Umbrella

## Coverage Detail

<i>Description</i>	<i>Limit - Each Occurrence</i>	<i>Limit - Aggregate</i>	<i>Retained Limit</i>
Umbrella(C)	\$4,000,000	\$4,000,000	\$0

- First Dollar Defense
- Current Retroactive Date -
- Proposed Retroactive Date -

## Underlying Schedule of Insurance

- The Underlying Schedule of Insurance shows the policies and limits in that this umbrella Policy extends over.

## Underlying Policies

<i>Underlying Liability</i>	<i>Policy #</i>	<i>Company</i>	<i>Effective Date</i>	<i>Expiration Date</i>
Public Officials Liability	TB5-Z51-292390-031	Travelers	02/15/2025	02/15/2026
Sexual Abuse & Molestation	RO5-Z51-292390-061	Travelers	02/15/2025	02/15/2026
Professional Liability	R55-Z51-292390-051	Travelers	02/15/2025	02/15/2026
Auto Liability	AS5-Z51-292390-021	Travelers	02/15/2025	02/15/2026
General Liability Occurrence	TB5-Z51-292390-031	Travelers	02/15/2025	02/15/2026

## Auto Liability

<i>Single Limit/BI Per Person</i>	<i>BI Per Accident</i>	<i>Property Damage</i>
\$1,000,000		

## General Liability

<i>Basis</i>	<i>Each Occurrence</i>	<i>Gen Aggregate</i>	<i>Prod &amp; Comp Ops</i>	<i>Personal &amp; Adv Injury</i>	<i>Damage to Rental</i>	<i>Medical Expense</i>
Occurrence	\$1,000,000	\$3,000,000	\$3,000,000	\$1,000,000	\$100,000	

# Premium Bid Summary of Premiums

<i>Line of Business</i>	<i>Quoting Carrier</i>	<i>AM Best Rating Carrier</i>	<i>2025-2026 Proposed Premium Bid</i>
<b>Line of Business</b>			
<b>Commercial Property, Inland Marine (C)</b>			
<b>Crime</b>			
<b>Employment Practices Liability</b>			
<b>Umbrella(C)</b>			
<b>General Liability/Employee Benefits Liability</b>			
<b>Law Enforcement Liability</b>			
<b>Public Officials Liability</b>			
<b>Accident and Health</b>			
<b>Accidental Death &amp; Dismemberment</b>			
<b>Business Auto</b>			
<b>Cyber</b>			
<b>Workers Compensation</b>			
<b>TOTAL</b>			

# Notes

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