

A Casualty Binder for

The British Embassy

3100 Massachusetts Ave NW
Washington, DC 20008-3605



Policy Period

April 1, 2025 - April 1, 2026

Submitted to

WILLIS TOWERS WATSON SOUTHEAST, INC.

Binder Date

April 1, 2025

Underwriter

Lisa Valvo
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804-928-6208

Underwriting Associate

Karla Tate
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Insurance Solutions for U.S. Middle Market Companies



Property

- Broad personal property definition including personal property of directors, officers and employees
- Ordinance or law applies to all covered property and time element loss, not just buildings
- Rebuild to green compliance or higher standard automatically included via sublimit
- Tailored valuation provisions with no coinsurance contract
- Natural catastrophe limits and deductibles scheduled on declaration page
- Flexible Extended Period of Indemnity options
- Combined Business Income and Extra Expense Form with no deductible for Extra Expense
- Declaration page provides coverages, limits and deductibles at-a-glance

General Liability

- Broad Named Insured includes partnerships, Joint Ventures and LLC's
- Automatic Blanket Additional Insured coverage
- Automatic Waiver of Right of Subrogation and primary non-contributory wording

Workers' Compensation

- Level and variable dividend options available
- Loss sensitive programs available
- Pay-as-you-go payroll options

Auto

- Broadening coverage endorsement that adds 23 extensions in one form

Umbrella

- Additional limits protecting against catastrophic claims beyond primary coverage

International

- One of the industry's largest networks, providing coverage in 210 countries and territories
- Regionally-based international underwriting teams with expertise in navigating foreign legal, licensing and tax requirements
- A dedicated, 75-person servicing team for international programs
- Uniform Claims handling globally with a U.S.-based International Claims Coordinator acting as a single point of contact

Claims

- 24/7 Award-winning, Zurich-owned Customer Care Center¹
- Concierge Customer Service Executive, dedicated resource for all claims and related inquiries
- Access to digital programs that provide a transparent claim process
- Knowledgeable and reliable claims staff with industry specific expertise
- When utilized, integrated medical management program yields a 63% reduction in medical bill costs, on average²

Risk Engineering

- Dedicated Risk Engineering Services Coordinator
- Zurich Resilience Solutions address the most frequent and severe risks. Services can include:
 - Property and Casualty risk assessments
 - Water intrusion evaluation
 - Water leak detection
 - ACURE water damage and prevention program
 - Ergonomic assessment services from office to front line assessments
 - Slip, trip and fall assessment using Tribometry
 - Fleet Program Review & Telematics Implementation Assistance
 - Access to Safety Source's complete on-line video library.
 - Cyber risk assessment
- Safety Calendars

Services and Resources

- Premium installment plans available
- Premium audit services

Risks and Insights Resources:



1. Top Mid-size Contact Center as recognized by Contact Center World in 2021 / 2. Zurich North America Claims Finance 2021

Our commitment



Focus on customers

We continue our transformation to become a truly customer-led company.



Simplify

We work to simplify our business and operations to make better use of our resources.



Innovate

We adapt to continue to meet and exceed customers' expectations and needs.

The information in this publication was compiled from sources believed to be reliable for informational purposes only. This is intended as a general description of certain types of insurance and services available to qualified customers through the companies of Zurich in North America, provided solely for informational purposes. Nothing herein should be construed as a solicitation, offer, advice, recommendation, or any other service with regard to any type of insurance product underwritten by individual member companies of Zurich in North America, including Zurich American Insurance Company, 1299 Zurich Way, Schaumburg, IL 60196. Certain coverages and offerings may not be available in all states. Your policy is the contract that specifically and fully describes your coverage, terms and conditions. The description of the policy provisions gives a broad overview of coverages and does not revise or amend the policy. Coverages and rates are subject to individual insured meeting our underwriting qualifications and product availability in applicable states. Some coverages may be written on a nonadmitted basis through licensed surplus lines brokers. Risk engineering and risk management services are provided by The Zurich Services Corporation. This is intended as a general description of certain types of risk engineering and risk management services available to qualified customers through The Zurich Services Corporation. The Zurich Services Corporation does not guarantee any particular outcome and there may be conditions on your premises or within your organization, which may not be apparent to us. You are in the best position to understand your business and your organization and to take steps to minimize risk, and we wish to assist you by providing the information and tools to help you assess your changing risk environment.

EXECUTIVE SUMMARY – CASUALTY



The British Embassy						
Line of Business:	Auto					Total
Policy Number	BAP 0113513 - 10					
Program Structure and Limits						
Limits	AL:\$1,000,000 CSL PD: ACV					
Structure	Guaranteed Cost					
Deductible	AL: N/A Comp: Various Collision: Various					
Exposure						
Total Exposure	See Auto Premium Overview section					
Premium (including estimated taxes, surcharges and assessments)						
Composite Rated	Yes					
Est. Premium	\$564,888.00					\$564,888.00
Est. Terrorism	\$5,649.00					\$5,649.00
Est. CAT	N/A					
Exp. Constant	N/A					
Est. Taxes, Surcharges & Assessments	\$554.64					\$554.64
Estimated Total	\$571,091.64					\$571,091.64

EXECUTIVE SUMMARY



Program / Line of Business Totals		
Proposal Type	See the following sections for each line of business for a detailed breakdown	Subtotal
Casualty		\$571,091.64
Estimated Total Program Premium (inclusive of Taxes, Surcharges & Assessments)		\$571,091.64

Commission					
<i>Line of Business</i>	Auto				
Commission	20.00%				

Note: Commission is not paid on most taxes, surcharges, assessments, and fees.

Payment Terms		
Line of Business	Billing Type	Frequency
Casualty	Agency Bill	Prepaid

Account Service Team			
Responsibility	Contact	Email Address	Phone
Underwriter	Lisa Valvo	lisa.valvo@zurichna.com	804-928-6208
Underwriter Assistant	Karla Tate	karla.tate@zurichna.com	410-559-8248

REQUIRED AGREEMENTS AND SUBJECTIVITIES: CASUALTY



Required Agreements	Due Date
Signed UM/UIM Selection/Rejection Forms	Policy Effective Date

Required Underwriting Information / Subjectivities	Due Date
Completed Hired and Non-owned Auto questionnaire	Policy Effective Date
Insured must provide license plate numbers for all New York state vehicles prior to issuing the policy.	Prior to Issuing the Policy
Complete schedule of requested Named Insureds, including description of operations and percent ownership	Policy Effective Date
Favorable review of MVR results for the following "pending" drivers	Policy Effective Date
Subject to review and confirmation that all Registered Owners of autos are correctly listed on this contract.	Policy Effective Date

NAMED INSURED - CASUALTY



Company	Auto						
The British Embassy	X						
Her Majesty's Government AKA The British Embassy and AKA The British Consulate-General and British Defense Staff	X						
The UK Mission of The United Nations	X						
British Government Employees Social Club	X						

COMMON POLICY FORMS



Schedule of Forms and Endorsements

Form Number	Edition Date	Form Title	Fill-In Wording / Comments
U-GU-1223-B CA	09/16	Revised Definition of Spouse Endorsement	
U-GU-D-310-A	01/93	Common Policy Declarations	
U-GU-616-A CW	10/02	Schedule of Taxes, Surcharges or Fees	
U-GU-619-A CW	10/02	Schedule of Forms and Endorsements	
U-GU-319-F	01/09	Important Notice - In Witness Clause	
U-GU-621-A CW	10/02	Schedule Of Named Insured(s)	
IL 00 17	11/98	Common Policy Conditions	
IL 00 21	09/08	Nuclear Energy Liability Exclusion Endorsement (Broad Form)	
IL 01 49	01/12	Hawaii Changes – Civil Union	
IL 00 03	09/08	Calculation Of Premium	
U-GU-1191-A CW	03/15	Sanctions Exclusion Endorsement	
U-GU-1021-A DC	01/11	Notice of Exempt Commercial Risk - District of Columbia	

*Note: The most recently approved edition date will be used, unless otherwise noted.
Various state mandatory forms will be included as required.*

AUTO

Program Structure, Coverage and Premium Overview



Issuing Company:	Zurich American Insurance Company
Policy Period:	04/01/2025 – 04/01/2026
Policy Number:	BAP 0113513 - 10

Program Structure	
Program Type:	Guaranteed Cost
Liability Deductible:	N/A

Liability Coverage		
Coverage	Symbol	Limits
Liability – Combined Single Limit (CSL)	1	\$1,000,000
Medical Payments	7	\$5,000
Personal Injury Protection	5	Statutory
Additional Personal Injury Protection	Not Covered	Statutory
Uninsured Motorist	2	Refer to UM/UIM Selection/Rejection Form(s), as applicable.
Underinsured Motorist	2	Refer to UM/UIM Selection/Rejection Form(s), as applicable.
Towing	Not Covered	

Physical Damage Coverage			
Coverage	Symbol	Deductible	Limits
Comprehensive	2,8	Various	DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.) OR DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO (A maximum deductible may also apply. Refer to Coverage Form for details.) See ITEM FOUR For Hired or Borrowed Autos.
Collision	2,8	Various	DEDUCTIBLE FOR EACH COVERED AUTO. See ITEM FOUR For Hired Or Borrowed Autos.

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AUTO

Program Structure, Coverage and Premium Overview



Schedule of Forms and Endorsements			
Form Number	Edition Date	Form Title	Fill-In Wording / Comments
CA 02 01	04/17	Hawaii Changes - Cancellation And Nonrenewal	
U-GU-670-A	11/03	New York Fraud Statement	
U-CA-920-A CW	10/23	Schedule of Uninsured and Underinsured Motorists Limits	
CA 20 01	11/20	Lessor - Additional Insured And Loss Payee	See Fill-In Wording Schedule
U-CA-411-E CW	02/14	Premium and Reports Agreement - Composite Rated Policies	See Fill-In Wording Schedule
U-CA-531-B	02/08	Notice Regarding Terrorism Premium (For Commercial Automobile Insurance)	
U-CA-D-600-D	10/21	Business Auto Declarations	
U-CA-D-399-D MA	05/15	Commercial Auto Coverage Part Supplemental Business Auto And Motor Carrier Declarations - Massachusetts	
CA 00 01	11/20	Business Auto Coverage Form	
CA 01 20	01/15	Illinois Changes	
CA 01 26	01/25	North Carolina Changes	
CA 01 27	04/17	Hawaii Changes	
CA 01 36	10/13	Nevada Changes	
CA 01 70	04/25	Maryland Changes	
CA 01 96	11/20	Texas Changes	
CA 02 67	01/21	Florida Changes - Cancellation And Nonrenewal	
CA 02 68	01/21	Virginia Changes In Policy - Cancellation And Nonrenewal	
MM 99 11	10/13	Massachusetts Mandatory Endorsement	
MM 99 67	10/13	Massachusetts Changes	
CA 01 09	12/23	Georgia Changes	
CA 01 28	01/21	Florida Changes	
CA 01 40	10/13	District Of Columbia Changes	
CA 01 43	05/17	California Changes	
CA 02 15	12/17	Maryland Cancellation Changes	
CA 02 25	06/20	New York Changes - Cancellation	
CA 02 63	10/13	District Of Columbia Changes - Cancellation And Nonrenewal	
CA 02 70	01/18	Illinois Changes - Cancellation And Nonrenewal	
CA 21 09	10/13	Texas Uninsured/Underinsured Motorists Coverage	
CA 21 13	03/21	Maryland Uninsured Motorists Coverage	

AUTO

Program Structure, Coverage and Premium Overview



Schedule of Forms and Endorsements			
Form Number	Edition Date	Form Title	Fill-In Wording / Comments
CA 21 16	01/25	North Carolina Uninsured Motorists Coverage	
CA 21 21	07/23	Uninsured Motorists Endorsement (Virginia)	
CA 21 49	10/13	District Of Columbia Uninsured Motorists Coverage	
CA 21 54	11/16	California Uninsured Motorists Coverage - Bodily Injury	
CA 21 84	04/17	Hawaii Uninsured Motorists Coverage (Nonstacked)	
CA 21 85	04/17	Hawaii Underinsured Motorists Coverage (Nonstacked)	
CA 31 37	10/13	Georgia Uninsured Motorists Coverage - Added On To At-Fault Liability Limits	
MM 99 28	10/13	Uninsured Motorists Coverage - Massachusetts	
CA 21 27	10/13	Nevada Uninsured Motorists Coverage	
CA 21 30	01/15	Illinois Uninsured Motorists Coverage	
CA 21 38	10/13	Illinois Underinsured Motorists Coverage	
CA 21 55	10/13	California Uninsured Motorists Coverage - Property Damage	
CA 21 72	06/17	Florida Uninsured Motorists Coverage - Nonstacked	
CA 31 07	11/18	New York Supplementary Uninsured/Underinsured Motorists Endorsement	
CA 02 43	11/13	Texas Changes - Cancellation And Nonrenewal	
CA 22 10	01/21	Florida Personal Injury Protection	
CA 22 65	02/18	Hawaii Personal Injury Protection Coverage	
CA 22 66	04/17	Hawaii Added Personal Injury Protection Coverage	
MM 99 35	04/11	Personal Injury Protection Coverage - Massachusetts	
CA 22 19	03/21	Maryland Personal Injury Protection Endorsement	
CA 22 32	11/18	New York Mandatory Personal Injury Protection Endorsement	
CA 22 51	10/13	District Of Columbia Personal Injury Protection Coverage	
CA 04 24	10/13	California Auto Medical Payments Coverage	
CA 22 46	11/16	Virginia Medical Expense And Income Loss Benefits Endorsement	
CA 23 45	11/20	Public Or Livery Passenger Conveyance And On-demand Delivery Services Exclusion	
CA 99 81	02/24	Illinois Stated Amount Insurance	

AUTO

Program Structure, Coverage and Premium Overview



Schedule of Forms and Endorsements			
Form Number	Edition Date	Form Title	Fill-In Wording / Comments
CA 99 95	10/13	Texas Supplementary Death Benefit	
U-CA-424-H CW	10/21	Coverage Extension Endorsement	
CA 99 03	10/13	Auto Medical Payments Coverage	
CA 99 16	10/13	Hired Autos Specified As Covered Autos You Own	See Fill-In Wording Schedule
CA 99 23	10/13	Rental Reimbursement Coverage	See Fill-In Wording Schedule
MM 99 13	12/16	AUTO MEDICAL PAYMENTS COVERAGE - MASSACHUSETTS	
MM 99 23	04/11	Rate Modification - Massachusetts	
MM 99 39	10/13	Loss of Use - Rental Reimbursement - Massachusetts	See Fill-In Wording Schedule
MM 99 51	10/13	Glass Breakage - \$100 Deductible-Massachusetts	
MM 99 54	10/13	Underinsured Motorists Coverage - Massachusetts	
U-CA-339-E TX	06/23	Texas Motor Vehicle Crime Prevention Authority (MVCPA)	

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Premium Details		
Estimated Unit(s) of Exposure	Composite Rate(s)	Premium
Composite Group 1 : PPT - Liability (69)	\$3,347.348	\$230,967
Composite Group 2 : LT & MT - Liability (43)	\$3,758.279	\$161,606
Composite Group 4 : PPT - Physical Damage (69)	\$1,643.971	\$113,434
Composite Group 5 : LT & MT - Physical Damage (43)	\$1,209.814	\$52,022
Composite Group 6 : LT - Liability (1)	\$3,367.000	\$3,367
Composite Group 6 : LT - Physical Damage (1)	\$2,268.000	\$2,268
Estimated Composite Premium Subtotal		\$563,664
Non-Composite - Coverages		\$1,224
Estimated Premium		\$564,888
Est. Terrorism Premium		\$5,649
Est. Taxes, Surcharges and Assessments		\$554.64
Estimated Total		\$571,091.64
<i>Minimum Premium</i>		\$570,537

Auto Composite Rated

Condition 6, Premium Audit, of Part B, General Conditions, of Section IV, Business Auto Conditions of form CA0001 is replaced by the following:

6. Premium Audit

- a. The estimated premium for this Coverage Form is based on the exposures you told us you would have when this policy began. Within 180 days after this Coverage Part expires, we will conduct an audit, which may not be waived. We will compute the final premium due when we determine your actual exposures. The Named Insured will be billed for any additional premium due or any premium over payment will be returned to the Named Insured. The final premium will be determined as follows:
 1. The number of owned "autos" at policy inception will be added to the number of owned autos at policy expiration and multiplied by 50%.
 2. The number of autos developed in 1. above will be multiplied by the composite rates shown on this endorsement.
 3. The estimated sub total premium at policy inception will be credited against the premium determined in 2. above.
 4. The premium determined in 3. above is the additional or return premium due and in combination with the policy inception, estimated premium will become the final premium for the annual term.
- b. If this policy is issued for more than one year, the premium for this Coverage Form will be computed annually based on our rates or premiums in effect at the beginning of each year of the policy.
- c. For policies other than Annual Reporting, the deposit premium shown in the Schedule is due and payable on the first day of the policy period. The first Named Insured will pay, within 20 days following the mailing or delivery of the statement of audited premium for each audit period, the earned premium due.
- d. The final premium will not be less than the greater of 80% of the estimated annual premium, or the Minimum Premium shown in the Schedule above.
- e. The first Named Insured must maintain records of the information we need for premium computation and send us copies at such times as we may request.

Premium Audit

Auditable: The exposures and premiums are estimates and, in accordance with applicable policy terms and conditions, may be subject to audit, adjustment, or both.

AUTO

Program Structure, Coverage and Premium Overview



Important update to New York insurance motor vehicle reporting requirements:

The following information is required in order to properly report a vehicle(s) to the state of New York – **NOTE, THIS APPLIES TO MIDTERM CHANGES AS WELL:**

- Registrant/insured name and address
- Vehicle identification number (VIN)
- License plate number
- Effective date (Date the vehicle is being added/deleted for coverage purposes)
- Policy number and policy effective dates
- Reporting insurance company

FOR MIDTERM CHANGES, THIS INFORMATION MUST BE RECEIVED WITHIN 3-DAYS OF THE EFFECTIVE DATE OF COVERAGE FOR US TO MEET THE 7-DAY DEADLINE WITH THE STATE OF NEW YORK.

AUTO

Program Structure, Coverage and Premium Overview



Fill-In Wording Schedule

Form Number CA 20 01

ADDITIONAL INSURED (LESSOR): / DESIGNATION OR DESCRIPTION OF "LEASED AUTOS":

All Lessors of a "leased auto" leased or rented by you for 180 continuous days or more / All "leased autos" leased or rented by you for 180 continuous days or more

Form Number U-CA-411-E CW

*** SEE PREMIUM DETAIL SECTION

Form Number CA 99 16

DESCRIPTION OF AUTO:

Autos leased or rented by you for 180 continuous days or more under an agreement that requires you to provide primary insurance covering such "auto"

Form Number CA 99 23

DESCRIPTION OF COVERED AUTOS: / MAX. PAYMENT ANY ONE DAY: / MAX. NO. OF DAYS: / MAX. PAYMENT ANY ONE PERIOD:

2023, CHEVROLET, TRAVERSE LT, 1GNERGKW8PJ229351 / \$50 / 30 / \$1500

2023, FORD, TRANSIT, 1FTBW1YK7PKA48287 / \$50 / 30 / \$1500

2019, CHEVROLET, TRAVERSE, 1GNEVFKW1KJ135939 / \$50 / 30 / \$1500

2021, LAND ROVER, RANGE ROVER, SALGS4RY4MA420684 / \$50 / 30 / \$1500

2020, CHEVROLET, TRAVERSE, 1GNEVMKW6LJ203142 / \$50 / 30 / \$1500

2024, TOYOTA, TACOMA, 3TYLB5JN2RT008503 / \$50 / 30 / \$1500

2020, LAND ROVER, RANGE ROVER, SALGS4RY7LA596997 / \$50 / 30 / \$1500

2022, FORD, F150, 1FTMF1EB4NKE12871 / \$50 / 30 / \$1500

2017, LAND ROVER, DISCOVERY SPORT, SALCP2BG9HH642818 / \$50 / 30 / \$1500

2022, FORD, ESCAPE, 1FMCU9H67NUB68261 / \$50 / 30 / \$1500

2018, FORD, EXPLORER, 1FM5K7D84JGB97543 / \$50 / 30 / \$1500

2023, CHEVROLET, TRAVERSE LT, 1GNERGKWXPJ224281 / \$50 / 30 / \$1500

2022, FORD, EXPLORER, 1FMSK8DHXNGA14340 / \$50 / 30 / \$1500

2016, FORD, EDGE, 2FMPK3J99GBB92322 / \$50 / 30 / \$1500

2024, FORD, EXPEDITION, 1FMJU1J84REA47983 / \$50 / 30 / \$1500

2017, CHEVROLET, SUBURBAN, 1GNSKHKC7HR292740 / \$50 / 30 / \$1500

2022, FORD, F150, 1FTEX1EB0NKD74752 / \$50 / 30 / \$1500

Fill-In Wording Schedule

2017, JEEP, GRAND CHEROKEE, 1C4RJFBG5HC735147 / \$50 / 30 / \$1500

2017, HONDA, ODYSSEY, 5FNRL5H96HB001133 / \$50 / 30 / \$1500

2023, CHEVROLET, TRAVERSE LT, 1GNERGKW4PJ224857 / \$50 / 30 / \$1500

2024, MITSUBISHI, OUTLANDER, JA4J4VA81RZ015975 / \$50 / 30 / \$1500

2020, FORD, F150, 1FTFW1E5XLFB38729 / \$50 / 30 / \$1500

2017, FORD, EXPLORER, 1FM5K8DH5HGA55752 / \$50 / 30 / \$1500

2021, CHEVROLET, SUBURBAN, 1GNSKCKD4MR192455 / \$50 / 30 / \$1500

2020, LAND ROVER, RANGE ROVER, SALGS4RY0LA598266 / \$50 / 30 / \$1500

2019, LAND ROVER, DISCOVERY, SALRR2RV5KA086693 / \$50 / 30 / \$1500

2020, CHEVROLET, TRAVERSE, 1GNEVMKW6LJ170594 / \$50 / 30 / \$1500

2023, CHEVROLET, TRAVERSE LT, 1GNERGKW8PJ227731 / \$50 / 30 / \$1500

2023, FORD, TRANSIT, 1FTBW1YK8PKA48394 / \$50 / 30 / \$1500

2020, FORD, F150, 1FTFW1E56LFB38730 / \$50 / 30 / \$1500

2020, CHEVROLET, SUBURBAN, 1GNSKHKC7LR129112 / \$50 / 30 / \$1500

2023, CHEVROLET, TRAVERSE, 1GNERGKWXPJ227620 / \$30 / 30 / \$900

2018, VOLKSWAGEN, ATLAS, 1V2MR2CA7JC575248 / \$50 / 30 / \$1500

2021, CHEVROLET, SUBURBAN, 1GNSKCKD3MR371215 / \$50 / 30 / \$1500

2022, FORD, EDGE, 2FMPK4J94NBB15697 / \$50 / 30 / \$1500

2023, FORD, TRANSIT 250, 1FTBR1X84PKA80949 / \$50 / 30 / \$1500

2023, CHEVROLET, SUBURBAN, 1GNSKCKD1PR332160 / \$50 / 30 / \$1500

2020, CHEVROLET, SILVERADO, 1GCUYDED7LZ166349 / \$50 / 30 / \$1500

2024, FORD, EDGE, 2FMPK4J9XRBA44544 / \$50 / 30 / \$1500

2023, CHEVROLET, TRAVERSE, 1GNERFKW4PJ140175 / \$50 / 30 / \$1500

2024, NISSAN, PATHFINDER, 5N1DR3BD6RC314140 / \$50 / 30 / \$1500

2021, CHRYSLER, PACIFICA, 2C4RC1S70MR590288 / \$50 / 30 / \$1500

2024, JEEP, GRAND CHEROKEE, 1C4RJKAG6R8589422 / \$50 / 30 / \$1500

2020, FORD, TRANSIT CONNECT, NM0LE7F27L1445606 / \$50 / 30 / \$1500

AUTO

Program Structure, Coverage and Premium Overview



Fill-In Wording Schedule

2023, CHEVROLET, SUBURBAN, 1GNSKCKD4PR554305 / \$50 / 30 / \$1500

2020, CHEVROLET, TRAVERSE, 1GNEVMKW6LJ175567 / \$50 / 30 / \$1500

2023, RAM, PROMASTER 3500, 3C6MRVJG1PE532219 / \$50 / 30 / \$1500

2021, HYUNDAI, PALISADE, KM8R3DHE5MU195593 / \$50 / 30 / \$1500

2021, FORD, F150, 1FTEX1EP7MFA44884 / \$50 / 30 / \$1500

2023, LAND ROVER, RANGE ROVER, SALKP9F41PA024808 / \$50 / 30 / \$1500

2023, CHEVROLET, TRAVERSE LT, 1GNERGKW3PJ114396 / \$50 / 30 / \$1500

2024, JEEP, GRAND CHEROKEE, 1C4RJKAGXR8589424 / \$50 / 30 / \$1500

2020, GMC, SAVANA, 1GTW7AFG1L1156515 / \$50 / 30 / \$1500

2025, CHEVROLET, SUBURBAN, 1GN56CRDXSR179636 / \$50 / 30 / \$1500

2024, NISSAN, PATHFINDER, 5N1DR3BD5RC316753 / \$50 / 30 / \$1500

2024, FORD, EXPEDITION, 1FMJU1J86REA51730 / \$50 / 30 / \$1500

2013, FORD, F250, 1FTBF2A60DEA01762 / \$50 / 30 / \$1500

2022, FORD, EDGE, 2FMPK4J95NBA03815 / \$50 / 30 / \$1500

2017, LAND ROVER, DISCOVERY SPORT, SALCP2BG0HH640603 / \$50 / 30 / \$1500

2024, JEEP, GRAND CHEROKEE, 1C4RJKAG8R8589423 / \$50 / 30 / \$1500

2016, FREIGHTLINER, SPRINTER, WDYPF1CD0GP308972 / \$50 / 30 / \$1500

2024, CHEVROLET, SUBURBAN, 1GNSKCKD3RR292280 / \$50 / 30 / \$1500

2024, FORD, EDGE, 2FMPK4J94RBA48606 / \$50 / 30 / \$1500

2024, NISSAN, PATHFINDER, 5N1DR3BD7RC314714 / \$50 / 30 / \$1500

2013, FORD, F150, 1FTMF1EM7DKF69911 / \$50 / 30 / \$1500

2017, CHEVROLET, SUBURBAN, 1GNSKHKC0HR243380 / \$50 / 30 / \$1500

2022, FORD, EDGE, 2FMPK4J94NBA14756 / \$50 / 30 / \$1500

2017, LAND ROVER, DISCOVERY SPORT, SALCP2BG5HH636613 / \$50 / 30 / \$1500

2024, NISSAN, ROGUE, 5N1BT3CA7RC706430 / \$50 / 30 / \$1500

2024, NISSAN, ROGUE, JN8BT3CA3RW351070 / \$50 / 30 / \$1500

2025, TOYOTA, RAV4, 2T3G1RFV1SW498355 / \$50 / 30 / \$1500

AUTO

Program Structure, Coverage and Premium Overview



Fill-In Wording Schedule

2024, HONDA, ACCORD, 1HGCY1F32RA084991 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1G11AK4PU798518 / \$50 / 30 / \$1500

2025, KIA, CARNIVAL, KNDNC5K39S6492643 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1T11AK0PU797123 / \$50 / 30 / \$1500

2025, KIA, CARNIVAL, KNDNC5K37S6519547 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1C11AK8PU147780 / \$50 / 30 / \$1500

2024, NISSAN, ROGUE, 5N1BT3CAXRC706082 / \$50 / 30 / \$1500

2024, HYUNDAI, SANTA FE, 5NMP2DGL6RH042024 / \$50 / 30 / \$1500

2016, BENTLEY, FLYING SPUR, SCBET9ZA2GC050861 / \$50 / 30 / \$1500

2024, HONDA, ACCORD, 1HGCY1F36RA037186 / \$50 / 30 / \$1500

2019, JAGUAR, XJL, SAJWJ2GD0K8W20591 / \$50 / 30 / \$1500

2024, NISSAN, ROGUE, 5N1BT3CA0RC706625 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1G11AK6PU802424 / \$50 / 30 / \$1500

2024, TOYOTA, COROLLA, JTDB4MEE2R3025647 / \$50 / 30 / \$1500

2024, TOYOTA, RAV4 LE AWD, 2T3F1RFV3RC404385 / \$50 / 30 / \$1500

2025, KIA, K5, KNAG24J71S5320961 / \$50 / 30 / \$1500

2018, JAGUAR, F-PACE, SADCM2FV9JA275592 / \$50 / 30 / \$1500

2022, VOLKSWAGEN, TIGUAN, 3VV8B7AX9NM037264 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1R11AK1PU792944 / \$50 / 30 / \$1500

2024, NISSAN, ROGUE, 5N1BT3CA1RC707525 / \$50 / 30 / \$1500

2024, NISSAN, ROGUE, 5N1BT3CAXRC707989 / \$50 / 30 / \$1500

2024, HONDA, ACCORD, 1HGCY1F36RA007590 / \$50 / 30 / \$1500

2024, HONDA, ODYSSEY, 5FNRL6H53RB031940 / \$50 / 30 / \$1500

2019, KIA, SORENTO, 5XYPGDA55KG497832 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1T11AKXPU794472 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1C11AK7PU798785 / \$50 / 30 / \$1500

2024, TOYOTA, COROLLA, JTDB4MEE9R3025905 / \$50 / 30 / \$1500

AUTO

Program Structure, Coverage and Premium Overview



Fill-In Wording Schedule

2025, KIA, CARNIVAL, KNDNC5K35S6512122 / \$50 / 30 / \$1500

2024, MERCEDES-BENZ, SPRINTER, W1Y8NC3Y1RT186663 / \$50 / 30 / \$1500

2019, JAGUAR, F-PACE, SADCK2FX1KA609865 / \$50 / 30 / \$1500

2024, NISSAN, ROGUE, 5N1BT3CA9RC706509 / \$50 / 30 / \$1500

2024, NISSAN, ROGUE, JN8BT3CA6RW351080 / \$50 / 30 / \$1500

2024, TOYOTA, RAV4, 2T3P1RFV5RW418890 / \$50 / 30 / \$1500

2024, HONDA, ACCORD, 1HGCY1F33RA010544 / \$50 / 30 / \$1500

2024, HONDA, ACCORD, 1HGCY1F32RA059041 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1C11AK6PU797918 / \$50 / 30 / \$1500

2023, TESLA, MODEL Y, 7SAYGDEELPA105193 / \$50 / 30 / \$1500

2023, TOYOTA, CAMRY LE, 4T1T11AK6PU799489 / \$50 / 30 / \$1500

2025, KIA, CARNIVAL, KNDNC5K38S6512123 / \$50 / 30 / \$1500

2022, HONDA, CR-V, 2HKRW2H26NH611023 / \$50 / 30 / \$1500

Form Number MM 99 39

DESCRIPTION OF COVERED AUTOS: / MAX. PAYMENT ANY ONE DAY: / MAX. NO. OF DAYS: / MAX. PAYMENT ANY ONE PERIOD:

2021, LAND ROVER, RANGE ROVER, SALGS4RYXMA428224 / \$50 / 30 / \$1500

TERMS & CONDITIONS



General Conditions

Throughout this document the terms “the Insured”, “the Producer” and “the Company” are used. These terms refer to the following entities:

The Insured:	The British Embassy
The Producer:	WILLIS TOWERS WATSON SOUTHEAST, INC.
The Company:	Zurich American Insurance Company

No changes to the terms, conditions, or pricing reflected in this document may be made without written authorization from the Company.

This binder is presented to the Insured with the understanding that neither Zurich nor any of its subsidiaries, affiliates, or employees, offer, or purport to offer, advice to the Insured concerning the proper financial, accounting, or tax treatment for the policy(ies) of insurance referenced herein and nothing herein should be considered to constitute such advice. If accounting advice, tax advice, or other expert professional assistance is required, the Insured should consult with their own accountant, adviser, counsel, or other similar competent professional with expertise in the required area.

This is a binder for insurance coverage and is not an insurance policy. Any coverage description shown in this binder may be an abbreviated title and does not indicate insurance policy language. Only the insurance policy itself provides coverage. This binder is not part of and is not incorporated into the insurance policy. Policy forms attached to this binder, if any, are sample policy forms and are not the insurance policy itself and do not represent the final terms and conditions of the insurance policy. If there is any conflict between the coverage descriptions shown in this binder, the sample policy forms, and the actual insurance policy, the insurance policy will prevail and supersede this binder. This binder describes the coverages, terms, and conditions offered by the Company. Please review them carefully as they may differ from the expiring program or from the specifications requested in the submission.

Any person who knowingly and with the intent to defraud an insurance company, or a person who files an application or who submits through its producer exposure and associated information for an insurance policy, or files an insurance claim or statement containing any materially false information, or conceals information for the purpose of misleading an insurance company, commits a fraudulent insurance act which may be subject to both criminal and civil penalties.

Under the policy(ies) offered, coverage will not be provided and payments cannot be made hereunder to the extent that such coverage or payment would violate any applicable trade or economic sanctions law or regulation.

If the Program Type for a specific policy indicates NYFTZ, then, subject to the minimum standards of New York insurance laws and regulations, such policy is exempt from the filing requirements of New York.

TERMS & CONDITIONS



Binder Preparation

Zurich has prepared this binder in response to your submission requesting insurance coverage for specific lines of business. This binder is based only on the lines of business included in this binder. In the event you seek a binder for lines of business that differs from those included in this binder, Zurich reserves the right to review and revise the terms and pricing of this binder.

The program structure and pricing components were designed using data provided by the Producer. Any errors, omissions, or alterations to the Producer specifications may result in a change or withdrawal of this binder.

This binder is strictly conditional upon no material change in the risk and no known new losses occurring between the date of this binder and the inception date of the proposed policy. In the event of such change in risk or loss, Zurich may in its sole discretion, whether or not this binder has been already accepted by the insured, modify or withdraw this binder.

This binder identifies the policy forms and the associated form number that will be provided by Zurich. The policy forms may deviate from the requested coverage and wording contained in the submission. The policy forms noted herein include countrywide and some state-specific forms. Additional state-specific forms not noted herein will be endorsed on to the policy, where applicable. There may be instances where the policy form actually issued by Zurich differs from that which is in this binder. This may be due to an insured-specific request, recent amendments to the policy form filed and approved for use but not yet updated in the Zurich binder, or other reasons. Zurich may also include policy forms that are in addition to those requested by the Insured or Producer in the submission. These additional policy forms are issued by Zurich in accordance with internal and/or state specific requirements. Any premium associated with these additional policy forms is included in the quoted premium in this binder.

Premium-Specific Conditions

The premium elements, which include, but are not limited to, premium, factors, or formulas, included within this binder are estimates. These estimates are based upon the information contained in the application and submission made available to Zurich at the time this binder was prepared. Any subsequent changes in the information provided may result in modifications to this binder. Changes in the information that may result in modifications to the premium elements include, but are not limited to, rates, classifications, new or different exposures, changes in operations, prior exposures, prior loss information, experience modifications, managed care modifications, drug free modifications, tax multipliers, insured's request for removal of any products contained in the binder, or the insured's financial condition.

Risk Engineering

Risk Engineering services are provided by The Zurich Services Corporation (ZSC) and/or strategic vendors of ZSC. The outline of Risk Engineering services is intended as a general description of the services available and is provided solely for informational purposes. Nothing herein should be construed as advice or recommendations, and ZSC, its affiliates and strategic vendors do not guarantee any particular outcome or reduction in losses, claims or costs.

TERMS & CONDITIONS



Claim Services Disclosures

Legal Bill Review utilizes a rules-based software program provided by an outside vendor and a dedicated staff of legal professionals and support staff to verify the accuracy of electronically submitted legal bills presented under the policy for payment in an effort to control your overall claim costs. As a component of ALAE, each claim file is charged 1.5%* of the legal charges reviewed through this service.

Zurich's Recovery Services consist of seven regional recovery hubs providing multi-line commercial recovery services on a domestic and international basis. Front-end data mining, fully dedicated personnel, recovery panel counsel, forensic engineering and other leveraged programs assist in driving results. Zurich Recovery Services will charge seventeen percent (17%)* of the gross amount recovered from the third parties responsible for the loss. If a recovery is not produced, a fee will not be earned. Associated expense in pursuit of recovery will be charged to the claim file.

Certain special claim handling services are provided only for the duration of your effective policy period. These services can continue beyond an effective policy term, but will be charged according to Zurich's current rates at that time.

** Subject to change*

Uninsured Motorist (UM) / Underinsured Motorist (UIM)

See UM/UIM Selection/Rejection Summary Form (UCA309) for coverages and limits applicable, sent under separate cover. Please refer to the UM/UIM Selection/Rejection Summary form packet and wording below, as it contains information regarding the insured's obligation to Zurich if the insured fails to return the signed Selection/Rejection Summary form and the mandatory state-specific Selection/Rejection forms prior to the policy inception date. The laws in a number of jurisdictions require that the Insured make their selection/rejection prior to policy issuance. Should the Insured fail to return the signed Uninsured/Underinsured Motorist (UM/UIM) Selection/Rejection Summary Form and required state-specific forms prior to the policy inception date(s), the Automobile Liability policy may be issued with coverage limits imposed by operation of state law. In such event, the Insured agrees that they shall reimburse the Company for the payments made on UM/UIM claims. The amount of the Insured's reimbursement obligation shall be equal to the amount of loss paid in excess of the UM/UIM limits shown in the UM/UIM Selection/Rejection Summary Form (UCA309).

Commercial Auto Coverage Part Supplemental Business Auto And Motor Carrier Declarations - Massachusetts



Policy Number: Binder

Renewal of Number: BAP 0113513 - 09

Item 1. Named Insured: The British Embassy

Mailing Address: 3100 Massachusetts Ave NW
Washington, DC 20008-3605

See commercial auto Declarations.

☐ The Declarations includes Part 2

Policy Period: From: 04/01/2025 To: 04/01/2026 12:01 A.M. Standard Time at your mailing address shown in **Item 1**.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

Item 2. Schedule Of Coverages And Covered Autos

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos." "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the **Covered Autos** Section of the **Business Auto Coverage Form** and the **Motor Carrier Coverage Form** next to the name of the coverage.

Schedule					
Coverages	Covered Autos	Limit		Premium	
Compulsory Bodily Injury	1	\$20,000 \$40,000	Each Person Each Accident	\$	INCL
Personal Injury Protection	5	\$8,000	Each Person	\$	21
Liability Insurance					
Optional Bodily Injury	1	\$1,000,000 \$1,000,000	Each Person Each Accident	\$	2,821
Property Damage (Compulsory Limit \$5,000)	1	\$1,000,000	Each Accident	\$	INCL
Auto Medical Payments Insurance	7	\$5,000	Each Person	\$	4
Uninsured Motorists (Compulsory Limits \$20,000/\$40,000)	2	\$1,000,000 \$1,000,000	Each Person Each Accident	\$	13
Underinsured Motorists	2	\$1,000,000 \$1,000,000	Each Person Each Accident	\$	508
Physical Damage Insurance					
Comprehensive Coverage	2, 8	Actual Cash Value Or Cost Of Repair, Which Ever is Less	\$1,000	Deductible For Each Covered Auto	\$ 400
Specified Causes Of Loss Coverage			\$	Deductible For Each Covered Auto	\$
Collision Coverage	2, 8		\$1,000	Deductible For Each Covered Auto	\$ 1,697
Limited Collision			\$	Deductible For Each Covered Auto	\$

Schedule Continued			
Coverages	Covered Autos	Limit	Premium
Towing And Labor		For Each Disablement Of A Private "Auto" \$	\$ INCL
Loss Of Use Substitute Transportation Coverage		\$	\$
Forms and endorsements contained in this policy at its inception: II0021 Broad Form Nuclear Exclusion.			
(Not Applicable In New York)		Premium For Endorsements	\$ 171
		Estimated Total Premium	\$ 5,635

Zurich American Insurance Company
1299 Zurich Way
Schaumburg, IL 60196-1056

BUSINESS AUTO DECLARATIONS

ITEM ONE

PRODUCER: WILLIS TOWERS WATSON SOUTHEAST, INC.

NAMED INSURED: The British Embassy

MAILING ADDRESS: 3100 Massachusetts Ave NW
Washington, DC 20008-3605

POLICY PERIOD: From 04/01/2025 to 04/01/2026 at 12:01 A.M. Standard Time at your
mailing address shown above

PREVIOUS POLICY NUMBER: 0113513 - 09

FORM OF BUSINESS:

☒ CORPORATION ☐ LIMITED LIABILITY COMPANY (LLC) ☐ INDIVIDUAL
☐ PARTNERSHIP ☐ OTHER _____

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY,
WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

Premium shown is payable at inception: \$571,091.64					
AUDIT PERIOD (IF APPLICABLE)	<input checked="" type="checkbox"/>	ANNUALLY	<input type="checkbox"/>	SEMI-ANNUALLY	<input type="checkbox"/>
				QUARTERLY	MONTHLY

ENDORSEMENTS ATTACHED TO THIS POLICY:

IL 00 17 – Common Policy Conditions (**IL 01 46** in Washington)

IL 00 21 – Broad Form Nuclear Exclusion (not Applicable in New York) (**IL 01 98** in Washington)

SEE SCHEDULE OF FORMS AND ENDORSEMENTS

COUNTERSIGNED _____ BY _____
(Date) (Authorized Representative)

ITEM TWO

Schedule Of Coverages And Covered Autos

This Policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". **"Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the Covered Autos section of the Business Auto Coverage Form next to the name of the coverage.**

COVERAGES	COVERED AUTOS	LIMIT OR DEDUCTIBLE	PREMIUM
COVERED AUTOS LIABILITY	1	\$1,000,000	\$341,419
PERSONAL INJURY PROTECTION (or equivalent No-fault Coverage)	5	SEPARATELY STATED IN EACH P.I.P. ENDORSEMENT MINUS SEE ENDT DEDUCTIBLE.	\$6,091
ADDED PERSONAL INJURY PROTECTION (or equivalent Added No-fault Coverage)		SEPARATELY STATED IN EACH ADDED P.I.P. ENDORSEMENT.	
PROPERTY PROTECTION INSURANCE (Michigan only)		SEPARATELY STATED IN THE PROPERTY PROTECTION INSURANCE ENDORSEMENT MINUS SEE ENDT DEDUCTIBLE FOR EACH ACCIDENT.	
AUTO MEDICAL PAYMENTS	7	\$5,000 EACH INSURED	\$1,658
MEDICAL EXPENSE AND INCOME LOSS BENEFITS (Virginia only)		SEPARATELY STATED IN THE MEDICAL EXPENSE AND INCOME LOSS BENEFITS ENDORSEMENT.	\$292
UNINSURED MOTORISTS	2	SEE ENDT	\$42,828
UNDERINSURED MOTORISTS (When not included in Uninsured Motorists Coverage)	2	SEE ENDT	\$912
PHYSICAL DAMAGE COMPREHENSIVE COVERAGE	N/A 2, 8	DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.) OR SEE ENDT DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO (A maximum deductible may also apply. Refer to Coverage Form for details.) See ITEM FOUR For Hired or Borrowed Autos.	\$42,169
PHYSICAL DAMAGE SPECIFIED CAUSES OF LOSS COVERAGE		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.) OR DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO (A maximum deductible may also apply. Refer to Coverage Form for details.) See ITEM FOUR For Hired or Borrowed Autos.	
PHYSICAL DAMAGE COLLISION COVERAGE	2, 8	SEE ENDT DEDUCTIBLE FOR EACH COVERED AUTO. See ITEM FOUR For Hired Or Borrowed Autos.	\$125,029
PHYSICAL DAMAGE TOWING AND LABOR		NoCoverage FOR EACH DISABLEMENT OF A PRIVATE PASSENGER AUTO, LIGHT OR MEDIUM TRUCK.	
TAX/SURCHARGE/FEE			\$554.64
PREMIUM FOR ENDORSEMENTS			\$10,139.00
*ESTIMATED TOTAL PREMIUM			\$571,091.64

*This Policy may be subject to final audit.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			
<p>For "autos" used in your motor carrier operations, cost of hire means:</p> <ol style="list-style-type: none"> 1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein, 2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and 3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others. 			

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	DC	\$50,000	\$17,635
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			\$17,635
<p>For "autos" NOT used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.</p>			

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	NC	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	HI	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	NV	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	MD	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	TX	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	NY	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	GA	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	FL	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	MA	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	IL	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	CA	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR ALL STATES	PREMIUM
Primary Coverage			
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

COVERED AUTOS LIABILITY COVERAGE – Cost Of Hire Rating Basis for Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
COVERED AUTOS LIABILITY COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE	PREMIUM
Primary Coverage	VA	IF ANY	INCL
Excess Coverage			
TOTAL HIRED AUTO PREMIUM			

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS (Cont'd)

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	DC	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	\$50,000	\$395
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	DC	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	\$50,000	\$829
TOTAL HIRED AUTO PREMIUM				\$1,224
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	NC	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	NC	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	HI	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	HI	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	NV	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	NV	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	MD	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	MD	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	TX	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	TX	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	NY	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	NY	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	GA	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	GA	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	FL	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	FL	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	MA	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	MA	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	IL	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	IL	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	CA	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	CA	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Physical Damage Coverages – Cost Of Hire Rating Basis For All Autos (Other Than Mobile or Farm Equipment)				
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)	PREMIUM
COMPREHENSIVE	VA	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)	IF ANY	INCL
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)		
COLLISION	VA	\$1,000 DEDUCTIBLE FOR EACH COVERED AUTO.	IF ANY	INCL
TOTAL HIRED AUTO PREMIUM				
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.				

Cost Of Hire Rating Basis For Mobile Or Farm Equipment – Other Than Physical Damage Coverages					
COVERAGE	STATE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE		PREMIUM	
		Mobile Equipment	Farm Equipment	Mobile Equipment	Farm Equipment
Covered Autos Liability – Primary Coverage					
Covered Autos Liability – Excess Coverage					
Personal Injury Protection					
Medical Expense Benefits (Virginia Only)					
Income Loss Benefits (Virginia Only)					
Auto Medical Payments					
TOTAL HIRED AUTO PREMIUMS					
Cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.					

ITEM FOUR

SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS (Cont'd)

Cost Of Hire Rating Basis For Mobile or Farm Equipment – Physical Damage Coverages						
COVERAGE	STATE	DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE FOR EACH STATE (Excluding Autos Hired With A Driver)		PREMIUM	
			Mobile Equipment	Farm Equipment	Mobile Equipment	Farm Equipment
COMPREHENSIVE		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)				
SPECIFIED CAUSES OF LOSS		DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY THEFT OR MISCHIEF OR VANDALISM (A maximum deductible may also apply. Refer to Coverage Form for details.)				
COLLISION		DEDUCTIBLE FOR EACH COVERED AUTO.				
TOTAL HIRED AUTO PREMIUM						
For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any auto that is leased, hired, rented or borrowed with a driver.						

Rental Period Rating Basis For Mobile Or Farm Equipment					
COVERAGE	TOWN AND STATE WHERE THE JOB SITE IS LOCATED	ESTIMATED NUMBER OF DAYS EQUIPMENT WILL BE RENTED		PREMIUM	
		Mobile Equipment	Farm Equipment	Mobile Equipment	Farm Equipment
Liability – Primary Coverage					
Liability – Excess Coverage					
Personal Injury Protection					
Medical Expense Benefits (Virginia Only)					
Income Loss Benefits (Virginia Only)					
Auto Medical Payments					
TOTAL PREMIUMS					

ITEM FIVE**SCHEDULE FOR NON-OWNERSHIP COVERED AUTO LIABILITY**

NAMED INSURED'S BUSINESS	RATING BASIS	NUMBER	PREMIUM
Other Than Auto Service Operations, Partnerships or LLCs	Number Of Employees	127	\$2,491
	Number Of Volunteers	0	\$0
TOTAL NON-OWNERSHIP COVERED AUTOS LIABILITY PREMIUM			\$2,491

ITEM SIX**SCHEDULE FOR GROSS RECEIPTS OR MILEAGE BASIS**

Type Of Risk (Check one):	<input type="checkbox"/> Public Autos	<input type="checkbox"/> Leasing Or Rental Concern
Rating Basis (Check one):	<input type="checkbox"/> Gross Receipts (Per \$100)	<input type="checkbox"/> Mileage (Per Mile)
Estimated Yearly (Check One):	<input type="checkbox"/> Gross Receipts (Per \$100)	<input type="checkbox"/> Mileage
Premiums		
Covered Autos Liability		
Personal Injury Protection		
Added Personal Injury Protection		
Property Protection Insurance (Michigan Only)		
Auto Medical Payments		
Medical Expense And Income Loss Benefits (Virginia Only)		
Comprehensive		
Specified Causes Of Loss		
Collision		
Towing And Labor		

When used as a premium basis:

FOR PUBLIC AUTOS

Gross receipts means the total amount earned by the named insured for transporting passengers, mail and merchandise.

Gross receipts does not include:

- A.** Amounts paid to air, sea or land carriers operating under their own permits.
- B.** Advertising revenue.
- C.** Taxes collected as a separate item and paid directly to the government.
- D.** C.O.D. collections for cost of mail or merchandise including collection fees.

Mileage means the total live and dead mileage of all revenue producing "autos" during the policy period.

FOR RENTAL OR LEASING CONCERNS

Gross receipts means the total amount earned by the named insured for the leasing or renting of "autos" to others without drivers.

Mileage means the total live and dead mileage of all "autos" you leased or rented to others without drivers.