



# Starr Indemnity & Liability Company

Dallas, TX 1-866-519-2522

## COMMERCIAL GENERAL LIABILITY DECLARATIONS

**POLICY NO:** 1000025461201

**RENEWAL OF NO:** 1000025461191

**NAMED INSURED & MAILING ADDRESS**

LDI MECHANICAL INC  
1587 E Bentley Dr  
Corona CA 92879

**PRODUCER'S NAME & MAILING ADDRESS**

Aon Risk Insurance Services West, Inc.  
707 Wilshire Boulevard Suite 2600  
Los Angeles CA 90017

**POLICY PERIOD:** From November 1, 2020 to November 1, 2021 at 12:01 A.M. Standard Time at your mailing address shown above.

**FORM OF BUSINESS:** ☐ INDIVIDUAL ☐ PARTNERSHIP ☐ JOINT VENTURE ☐ LIMITED LIABILITY COMPANY ☒ ORGANIZATION, INCLUDING A CORPORATION (BUT NOT INCLUDING A PARTNERSHIP, JOINT VENTURE OR LIMITED LIABILITY COMPANY)

**DESCRIPTION OF BUSINESS:**

**LOCATION OF ALL PREMISES YOU OWN, RENT OR OCCUPY:** ON FILE WITH COMPANY

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.

**POLICY PREMIUM:** \$  
**Premium for Terrorism Coverage:** (Excluded)  
**MINIMUM PREMIUM:** \$  
**MINIMUM EARNED PREMIUM:** \$

**SCHEDULE OF STATE TAXES, FEES AND SURCHARGES, IF APPLICABLE:\*\***

New Jersey Property Liability Guaranty Fund 0.60%	\$
<b>Total</b>	<b>\$</b>

\*\*State Taxes, Fees and Surcharges shown are in addition to the above referenced Policy Premium.

**ENDORSEMENTS ATTACHED TO THIS POLICY: (SEE ATTACHED FORMS SCHEDULE)**

**THESE DECLARATIONS, TOGETHER WITH THE COMMON POLICY CONDITIONS AND COVERAGE FORM(S) AND ANY ENDORSEMENT(S), COMPLETE THE ABOVE NUMBERED POLICY.**



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Date Issued: November 04, 2020

## LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT	\$	1,000,000	
DAMAGE TO PREMISES RENTED TO YOU LIMIT	\$	100,000	ANY ONE PREMISE
MEDICAL EXPENSE LIMIT ANY ONE PERSON	\$	5,000	ANY ONE PERSON
PERSONAL & ADVERTISING INJURY LIMIT	\$	1,000,000	ANY ONE PERSON OR ORGANIZATION
GENERAL AGGREGATE	\$	2,000,000	
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT	\$	2,000,000	

## RETROACTIVE DATE (CG 00 02 ONLY)

THIS INSURANCE DOES NOT APPLY TO "BODILY INJURY", "PROPERTY DAMAGE" OR "PERSONAL AND ADVERTISING INJURY" WHICH OCCURS BEFORE THE RETROACTIVE DATE, IF ANY, SHOWN BELOW.

RETROACTIVE DATE: NONE

(ENTER DATE OR "NONE" IF NO RETROACTIVE DATE APPLIES.)

## CLASSIFICATION AND PREMIUM

CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE		ADVANCE PREMIUM	
			Prem/Ops	Prod/Comp Ops	Prem/Ops	Prod/Comp Ops
SEE COMPOSITE RATE ENDORSEMENT			\$	\$	\$	\$
					Total:	\$

A = AREA  
M = ADMISSIONS  
O = TOTAL OPERATING EXPENSES  
P = PAYROLL  
S = GROSS SALES  
T = OTHER  
U = UNITS (EACH)

AUDIT PERIOD (IF APPLICABLE)

☒ ANNUALLY

☐ SEMI-ANNUALLY

☐ QUARTERLY

☐ MONTHLY



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## ADDRESS OF INSURER AND ITS AUTHORIZED AGENTS FOR NOTICES UNDER THIS POLICY

### A. Claims-Related Notices:

#### New Claims can be reported to :

Gallagher Bassett  
tnwclaims@tnwinc.com  
Claims Fax Number : (800) 748-6159  
Claims Phone Number : (855) 782-7750

#### Address

333 Research Court  
Norcross GA 30041

After hours emergency service call: (855) 782-7750

### B. All Other Notices

#### (i) To the Insurer:

Starr Indemnity & Liability Company  
399 Park Avenue 8<sup>th</sup> Floor  
New York, NY 10022

## THIS POLICY CONTAINS AGGREGATE LIMITS; REFER TO SECTION III. LIMITS OF INSURANCE OF THE APPLICABLE COVERAGE PART(S) FOR DETAILS

The foregoing discloses all hazards insured hereunder known to exist at the inception date of this Policy, unless otherwise stated herein by endorsement on this Policy.

COUNTERSIGNED

November 04, 2020

BY

DATE

AUTHORIZED REPRESENTATIVE



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## Composite Rating Plan Premium Endorsement

**Policy Number:** 1000025461201

**Effective Date:** November 1, 2020 at 12:01 A.M.

**Named Insured:** LDI MECHANICAL INC

This endorsement modifies the insurance coverage form(s) listed below that have been purchased by you and evidenced as such on the Declarations page. Please read the endorsement and respective policy(ies) carefully.

Commercial General Liability Coverage Form  
Business Auto Coverage Form

**The Class Code, Premium Basis, and Rate section of the Policy Declarations is changed to apply as follows:**

- A. The premium for this policy will be computed upon a composite basis as shown below in accordance with our rules, rates, rating plans, premiums and minimum premiums and the other policy terms.

Coverage (CGL or BA)	Premium Type (S or NS)	Estimated Basis of Premium	Composite Rate(s)	Estimated Premium	Minimum Premium	Deposit Premium
Commercial General Liability	NS	\$30,000,000	3.1889	\$	\$	\$
Totals:				\$	\$	\$

- B. The Composite Rate(s) shown above apply per 1000 of Receipts(a basis of premium type defined below or on page 2 of this endorsement).
- C. If no number or no basis of premium type is inserted, for Commercial General Liability Insurance (CGL Coverage) the rate shall apply per 1000 of "Sales"; or for Business Auto Insurance (BA Coverage) the rate shall apply per 1 Unit where "Unit" means a powered covered "auto".
- D. If "Sales" is selected as the basis of premium, such "Sales" will include both foreign and domestic sales and sales by one named insured to another unless otherwise indicated by "x" below:
- ☐ "Sales" do NOT include foreign sales.
- ☐ "Sales" do NOT include sales by one named insured to another.
- E. If "Units" is selected as the basis of premium, a Unit is a(n) .
- F. Other Basis of Premium Type: (Define herein or in "Exceptions" on Page 3)
- G. DEFINITIONS OF "BASIS OF PREMIUM TYPE" (Subject to "Exceptions", if any, described below)
1. **Admissions** means the total number of persons, other than you, your partners and your employees, admitted during the policy period, to events conducted on premises you own, rent, lease, or otherwise control, whether on paid admission tickets, complimentary tickets or passes.



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2. **Cost** means the total cost to you for all work performed for you during the policy period by independent contractors and their subcontractors at all levels, including the cost of all labor, materials, equipment and supplies furnished, used or delivered for use in the execution of such work, whether furnished by the owner, by contractors or subcontractors at any level, including, but not limited to, all fees, allowances, bonuses, and commissions either made, paid or due, as well as taxes other than taxes which you collect as a separate item and remit directly to a governmental division.
3. **Receipts** means the gross amount of money you have charged others for work that you, your partners, your employees, your contractors and subcontractors at all levels have performed during the policy period, including taxes other than taxes which you collect as a separate item and remit directly to a governmental division.
4. **Remuneration** or **Payroll** means all of the money or the substitute for money earned during the policy period by you if you are the proprietor of the insured business, by all partners if you are a partnership or by all members if you are a Limited Liability Company, and by all your employees for their services to you during the policy period, subject to the following:
  - ☐ Total Gross Remuneration or Payroll, without limitation; or
  - ☐ Determined and limited in accordance with our Workers' Compensation Insurance Manual's rules respectively for the states in which you have employment; or
  - ☐ Determined and limited in accordance with our General Liability Insurance Manual's rules respectively for the states in which you have employment.
5. **Sales** means the gross amount of money you or others trading in your name have charged for all goods and services you or they have sold or distributed during the policy period, including charges for delivery, installation, service and repair, and including taxes other than taxes which you or such others collect as a separate item and remit directly to a governmental division.
6. **Units** means the number of items of the types specified in this endorsement.
  - a. **Units that you hold for use in your business** shall mean half the sum of their number at the policy's inception and their number at its expiration or termination, (if terminated then pro-rated by the fraction of an annual period that the policy remained in effect).
  - b. **Units that you sell to others** whether for your own account or the account of another, shall mean the total number of such units that you sell during the policy term.
7. Other Definitions
  - a. **Subject** is a Premium Type that is subject to adjustment under a retrospective rating plan described in an endorsement attached to the policy. "Subject" is signified on Page 1 by a Premium Type "S".
  - b. **Non-Subject** is a Premium Type that is NOT subject to adjustment under a retrospective rating plan described in an endorsement attached to the policy. "Non-Subject" is signified on Page 1 by a Premium Type "NS".
  - c. **Exceptions**:



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All other terms and conditions of this Policy remain unchanged.

**Signed for STARR INDEMNITY & LIABILITY COMPANY**

  
Steve Blakey, President

  
Nehemiah E. Ginsburg, General Counsel