



PRESENTED BY  
**LEGACY INS PARTNERS INC**  
PO BOX 3858  
HICKORY, NC 28603

PROPOSED ON 06/13/2025 FOR  
**CITY OF NEWTON**  
P.O. BOX 550  
NEWTON, NC 28658

On behalf of **LEGACY INS PARTNERS INC** and **The Travelers Companies, Inc. and its affiliates**, we appreciate the opportunity to provide **CITY OF NEWTON** with the following policy proposal.



**Travelers Risk Control: Our Expertise is Your Advantage**

Travelers Risk Control is an innovative provider of cost-effective risk management services and products. As one of the largest Risk Control departments in the industry, our scale allows the right resource at the right time to meet customer needs. For over 110 years, our loss prevention professionals have assisted agents, brokers and customers across the country and around the world.

<https://www.travelers.com/risk-control>



**Claim Services:**

Travelers has over 11,000 highly trained Claim professionals located across the U.S. Our local field representatives are supported by teams of dedicated customer service, catastrophe response, legal, medical, investigative, engineering, and large loss experts. Claims can be complex and expensive. We'll help you manage claims to control your total risk-related costs.

<https://www.travelers.com/claims>

# Meet your Travelers team

## General

### Overall Account

Tyrone Forcey  
Account Executive  
TFORCEY@travelers.com  
210-525-3937

### Policy Services

Charlene Evans  
Operations Account Specialist  
CEVANS8@travelers.com  
210-525-3846

To report, ask a question or discuss a claim please call 1-800-238-6225. A Claim Customer Service Representative is available 24 hours a day, 7 days a week to take the first notice of loss or provide assistance on any existing claim.

# Your policies

## Commercial Package Program - Simp. Occ.

<b>Policy Number</b>	H-630-B449201A-TIL-25
<b>Effective</b>	07/01/2025 – 07/01/2026
<b>Insuring Company</b>	TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA

## Workers Compensation

<b>Policy Number</b>	UB-B4560833-25-PB-G
<b>Effective</b>	07/01/2025 – 07/01/2026
<b>Insuring Company</b>	THE TRAVELERS INDEMNITY COMPANY

## General Liability

<b>Policy Number</b>	ZLP-51N95397-25-PB
<b>Effective</b>	07/01/2025 – 07/01/2026
<b>Insuring Company</b>	THE CHARTER OAK FIRE INSURANCE CO

## Employee Benefit Liability

<b>Policy Number</b>	ZLP-51N95397-25-PB
<b>Effective</b>	07/01/2025 – 07/01/2026
<b>Insuring Company</b>	THE CHARTER OAK FIRE INSURANCE CO

## Law Enforcement Liability

<b>Policy Number</b>	ZLP-51N95397-25-PB
<b>Effective</b>	07/01/2025 – 07/01/2026
<b>Insuring Company</b>	THE CHARTER OAK FIRE INSURANCE CO

## Public Entity Management Liability

**Policy Number** ZLP-51N95397-25-PB  
**Effective** 07/01/2025 – 07/01/2026  
**Insuring Company** THE CHARTER OAK FIRE INSURANCE CO

## Public Entity Employment-Related Practices Liability

**Policy Number** ZLP-51N95397-25-PB  
**Effective** 07/01/2025 – 07/01/2026  
**Insuring Company** THE CHARTER OAK FIRE INSURANCE CO

## Auto Liability

**Effective** 07/01/2025 – 07/01/2026  
**Insuring Company** THE TRAVELERS INDEMNITY COMPANY

## Auto Physical Damage

**Effective** 07/01/2025 – 07/01/2026  
**Insuring Company** THE TRAVELERS INDEMNITY COMPANY

## Umbrella Liability

**Policy Number** ZUP-61N93015-25-PB  
**Effective** 07/01/2025 – 07/01/2026  
**Insuring Company** TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA

# Locations schedule

## 630 - B449201A – Commercial Package Program - Simp. Occ.

LOC/BLDG	DESCRIPTION	ADDRESS
1/1	GENERATOR 1825 KW JUSTICE CTR	100 S WESTSIDE BLVD, NEWTON, NC 28658
1/2	2000 KVA TRANSFORMER	100 SW BLVD, CAT CO JUSTICE CTR, NEWTON, NC 28658
1/3	750 KVA TRANSFORMER - CAT CO JUSTIC	100 SW BLVD, CAT CO JUSTICE CTR, NEWTON, NC 28658
2/4	GENERATOR 1825 KW SARSTEDT	1025 ST JAMES CHURCH RD, NEWTON, NC 28658
2/5	GENERATOR 1825 KW SARSTEDT	1025 ST JAMES CHURCH RD, NEWTON, NC 28658
2/6	1000 KVA TRANSFORMERSARSTE DT	1025 ST JAMES CHURCH RD, NEWTON, NC 28658
2/7	1500 KVA TRANSFORMER SARSTEDT	1025 ST JAMES CHURCH RD, NEWTON, NC 28658
2/8	1500 KVA TRANSFORMER SARSTEDT	1025 ST JAMES CHURCH RD, NEWTON, NC 28658
3/9	FIRE DEPT 1	116 WEST A ST, NEWTON, NC 28658
4/10	475 GENERATOR CITY LAKE RESERVOIR	1171 BOSTON RD, NEWTON, NC 28658
4/11	PUMP STATION	1171 BOSTON RD, NEWTON, NC 28658
4/12	PUMP STATION	1171 BOSTON RD, NEWTON, NC 28658
4/13	GENERATOR BLDG	1171 BOSTON RD, NEWTON, NC 28658
4/14	POLICE RANGE BLDG	1171 BOSTON RD, NEWTON, NC 28658
5/15	BAND SHELL	1175 US 321 SOUTH, NEWTON, NC 28658
5/16	CONCESSION	1175 US 321 SOUTH, NEWTON, NC 28658
5/17	SHELTER	1175 US 321 SOUTH, NEWTON, NC 28658
5/18	SHELTER	1175 US 321 SOUTH, NEWTON, NC 28658
6/19	POLICE SUBSTATION	125 S ERVIN AVE, NEWTON, NC 28658
7/20	SEWER PUMP STATION	1268 BEECHWOOD DR, NEWTON, NC 28658
8/21	1500 KVA TRANSFORMERCLARKS CREEK WW	1407 MCKAY RD, NEWTON, NC 28658
8/22	1600 KW GENERATOR CLARKS CREEK WWTP	1407 MCKAY RD, NEWTON, NC 28658
8/23	AERATION BASIN	1407 MCKAY RD, NEWTON, NC 28658
8/24	AERATION BASIN	1407 MCKAY RD, NEWTON, NC 28658
8/25	AERATION BASIN	1407 MCKAY RD, NEWTON, NC 28658
8/26	AERATION BASIN	1407 MCKAY RD, NEWTON, NC 28658
8/27	PRIMARY CLARIFIER	1407 MCKAY RD, NEWTON, NC 28658
8/28	PRIMARY CLARIFIER	1407 MCKAY RD, NEWTON, NC 28658
8/29	SLUDGE HOLDING TANK	1407 MCKAY RD, NEWTON, NC 28658
8/30	SLUDGE HOLDING TANK	1407 MCKAY RD, NEWTON, NC 28658
8/31	SLUDGE HOLDING TANK	1407 MCKAY RD, NEWTON, NC 28658
8/32	SLUDGE HOLDING TANK	1407 MCKAY RD, NEWTON, NC 28658
8/33	SECONDARY CLARIFIER	1407 MCKAY RD, NEWTON, NC 28658

8/34	SECONDARY CLARIFIER	1407 MCKAY RD, NEWTON, NC 28658
8/35	SECONDARY CLARIFIER	1407 MCKAY RD, NEWTON, NC 28658
8/36	SLUDGE BLDG	1407 MCKAY RD, NEWTON, NC 28658
8/37	DEWATERING BLDG	1407 MCKAY RD, NEWTON, NC 28658
8/38	INFLUENT PUMP BLDG	1407 MCKAY RD, NEWTON, NC 28658
8/39	LIME/GRIT BLDG	1407 MCKAY RD, NEWTON, NC 28658
8/40	RECYCLE PUMP STATION	1407 MCKAY RD, NEWTON, NC 28658
8/41	FILTER BLDG	1407 MCKAY RD, NEWTON, NC 28658
8/42	FILTER CONNECTED TO FILTER BLDG	1407 MCKAY RD, NEWTON, NC 28658
8/43	BACKWASH TANK/CHLORINE TANK	1407 MCKAY RD, NEWTON, NC 28658
8/44	CHLORINE BLDG	1407 MCKAY RD, NEWTON, NC 28658
8/45	ADMIN BLDG	1407 MCKAY RD, NEWTON, NC 28658
8/46	GATE ASSEMBLY	1407 MCKAY RD, NEWTON, NC 28658
9/47	DELIVERY STATION	1432 NC 10 WEST, NEWTON, NC 28658
10/48	SCADA HOUSE	1432 WEST NC HWY 10, NEWTON, NC 28658
11/49	750 KVA TRANSFORMER PRODELIN CORP	1500 PRODELIN DR, NEWTON, NC 28658
11/50	725 KWGENERATORPRODELI N CORP	1500 PRODELIN DR, NEWTON, NC 28658
12/51	1500KVA TRANSFORMERINNO- THERM	1545 ST JAMES CHURCH RD, NEWTON, NC 28658
12/52	1500KVA TRANSFORMER INNO-THERM	1545 ST JAMES CHURCH RD, NEWTON, NC 28658
12/53	GROUND STATION	1545 ST JAMES CHURCH RD, NEWTON, NC 28658
13/54	2000KVA TRANSFORMERZF LEMFORDER	1570 EAST P ST, NEWTON, NC 28658
13/55	1825KW GENERATOR ZF LEMFORDER	1570 EAST P ST, NEWTON, NC 28658
13/56	TRANSFORMER	1570 EAST P ST, NEWTON, NC 28658
14/57	2000KVA TRANSFORMER FLOWER FOODS	1613 FISHER COURT, NEWTON, NC 28658
14/58	2000 KVA TRANSFORMER FLOWER FOODS	1613 FISHER COURT, NEWTON, NC 28658
14/59	1825 KWGENERATORFLOWER S FOOD	1613 FISHER COURT, NEWTON, NC 28658
14/60	1825 KWGENERATORFLOWER S FOOD	1613 FISHER COURT, NEWTON, NC 28658
15/61	750,000G WATER TANK	1779 MT OLIVE CHURCH RD, NEWTON, NC 28658
16/62	ADMIN/LAB/FILTER	1780 WEST NC 10, NEWTON, NC 28658
16/63	CLEARWELL	1780 WEST NC 10, NEWTON, NC 28658
16/64	STORAGE BLDG	1780 WEST NC 10, NEWTON, NC 28658
16/65	CHEMICAL STORAGE/GEN BLDG	1780 WEST NC 10, NEWTON, NC 28658
16/66	WASTE BASIN	1780 WEST NC 10, NEWTON, NC 28658
16/67	BOOSTER STATION	1780 WEST NC 10, NEWTON, NC 28658
16/68	SEDIMENTATION BASIS	1780 WEST NC 10, NEWTON, NC 28658



16/69	GATE ASSEMBLY	1780 WEST NC 10, NEWTON, NC 28658
16/70	WORKSHOP/STORAGE BLDG	1780 WEST NC 10, NEWTON, NC 28658
16/71	400KW GENERATOR WTP	1780 WEST NC 10, NEWTON, NC 28658
17/72	SEWER PUMP STATION	1847 BURRIS RD, NEWTON, NC 28658
18/73	2000KVA TRANSFORMER TARGET DIST. CT	1880 STOVER COURT, NEWTON, NC 28658
18/74	2000KVA TRANSFORMERTARGET DIST. CTR	1880 STOVER COURT, NEWTON, NC 28658
18/75	1825KW GENERATOR TARGET DIST CTR	1880 STOVER COURT, NEWTON, NC 28658
18/76	1825KW GENERATOR TARGET DIST CTR	1880 STOVER COURT, NEWTON, NC 28658
18/77	40KW GENERATOR TARGET DIST CTR	1880 STOVER COURT, NEWTON, NC 28658
19/78	SEWER PUMP STATION	1910 TODD ST, NEWTON, NC 28658
20/79	CONCESSION	201 STADIUM AVE, NEWTON, NC 28658
20/80	SHELTER	201 STADIUM AVE, NEWTON, NC 28658
21/81	PW ADMIN OFFICE/WAREHOUSE	201 WEST 4TH ST, NEWTON, NC 28658
21/82	PAINT GARAGE	201 WEST 4TH ST, NEWTON, NC 28658
21/83	WASH STATION	201 WEST 4TH ST, NEWTON, NC 28658
21/84	LARGE VEH PARKING CANOPY	201 WEST 4TH ST, NEWTON, NC 28658
21/85	SMALL VEH PARKING CANOPY	201 WEST 4TH ST, NEWTON, NC 28658
21/86	FUEL ISLAND	201 WEST 4TH ST, NEWTON, NC 28658
21/87	GATE ASSEMBLY	201 WEST 4TH ST, NEWTON, NC 28658
22/88	FORMER TREATMENT PLANT	216 WEST 1ST ST, NEWTON, NC 28658
22/89	HIGH SERVICE PUMP STATION	216 WEST 1ST ST, NEWTON, NC 28658
22/90	CLEARWELL	216 WEST 1ST ST, NEWTON, NC 28658
22/91	CLEARWELL	216 WEST 1ST ST, NEWTON, NC 28658
22/92	SIREN	216 WEST 1ST ST, NEWTON, NC 28658
22/93	600KW GENERATOR OLD WATER PLANT	216 WEST 1ST ST, NEWTON, NC 28658
23/94	NEWTON REC CENTER	23 S BRADY AVE, NEWTON, NC 28658
23/95	OLYMPIC POOL	23 S BRADY AVE, NEWTON, NC 28658
23/96	CEMETERY BLDG	23 S BRADY AVE, NEWTON, NC 28658
23/97	STORAGE BLDG	23 S BRADY AVE, NEWTON, NC 28658
23/98	320KW GENERATOR REC CENTER	23 S BRADY AVE, NEWTON, NC 28658
24/99	SEWER PUMP STATION	2424 FIRE DEPT STR, NEWTON, NC 28658
25/100	OFFICE -POLICE COMPLEX	2427 N ASHE ST, NEWTON, NC 28658
25/101	GARAGE	2427 N ASHE ST, NEWTON, NC 28658
25/102	VEH PARKING CANOPY 1	2427 N ASHE ST, NEWTON, NC 28658
25/103	VEH PARKING CANOPY 2	2427 N ASHE ST, NEWTON, NC 28658
25/104	150 FT COMMUNICATION TOWER	2427 N ASHE ST, NEWTON, NC 28658
25/105	TRANSMITTERS -FIRE & PW	2427 N ASHE ST, NEWTON, NC 28658

25/106	GATE ASSEMBLY	2427 N ASHE ST, NEWTON, NC 28658
26/107	SEWER PUMP STATION	2800 WOODTECH DR, NEWTON, NC 28658
27/108	CENTRAL REC CENTER	301 S ERVIN AVE, NEWTON, NC 28658
27/109	NORTH WING	301 S ERVIN AVE, NEWTON, NC 28658
27/110	SOUTH WING	301 S ERVIN AVE, NEWTON, NC 28658
27/111	EAST NEWTON BALLFIELD FENCING	301 S ERVIN AVE, NEWTON, NC 28658
27/112	EAST NEWTON BB CRT	301 S ERVIN AVE, NEWTON, NC 28658
28/113	125KW GENERATOR BALLS CREEK	3201 MT OLIVE CHURCH RD, NEWTON, NC 28658
29/114	CIVIL DEFENSE BLDG	327 EAST A ST, NEWTON, NC 28658
30/115	SEWER PUMP STATION	3275 MT OLIVE CHURCH RD-BALLS CREEK, NEWTON, NC 28658
31/116	SEWER PUMP STATION	3505 NC HWY 10 WEST, NEWTON, NC 28658
32/117	150KW GENERATOR HWY 10 STATION	3505 WEST NC HWY 10, NEWTON, NC 28658
33/118	SEWER PUMP STATION	3723 W NC HWY 10, NEWTON, NC 28658
34/119	CONCESSION	3730 WEST NC 10 HWY, NEWTON, NC 28658
34/120	LIGHTS/POLES/FENCING	3730 WEST NC 10 HWY, NEWTON, NC 28658
35/121	NEW DELIVERY STATION	3768 NC HWY 10, NEWTON, NC 28658
35/122	SCADA HOUSE	3768 NC HWY 10, NEWTON, NC 28658
36/123	143KW GENERATOR GREGORY WOOD PRODUC	3864 ROCKY FD RD, NEWTON, NC 28658
37/124	N SIDEPARK-BROYHILL CONCESSION	400 EAST 22ND ST, NEWTON, NC 28658
37/125	NORTHSIDE CONCESSION	400 EAST 22ND ST, NEWTON, NC 28658
37/126	SHELTER	400 EAST 22ND ST, NEWTON, NC 28658
37/127	SMALL SHELTER	400 EAST 22ND ST, NEWTON, NC 28658
37/128	SMALL SHELTER	400 EAST 22ND ST, NEWTON, NC 28658
37/129	N SIDE FIELD LIGHTS/POLES/FEN	400 EAST 22ND ST, NEWTON, NC 28658
37/130	SOCCER LIGHTS/POLES/FENCING	400 EAST 22ND ST, NEWTON, NC 28658
37/131	BROYHILL LIGHTS/POLES/FENCING	400 EAST 22ND ST, NEWTON, NC 28658
37/132	TENNIS LIGHTS/POLES/FENCING	400 EAST 22ND ST, NEWTON, NC 28658
38/133	CITY HALL	401 N MAIN AVE, NEWTON, NC 28658
38/134	320KW GENERATOR CITY HALL	401 N MAIN AVE, NEWTON, NC 28658
39/135	FIRE DEPT 3	4197 STARTOWN RD, NEWTON, NC 28658
39/136	60KW GENERATOR FIRE DEPT 3	4197 STARTOWN RD, NEWTON, NC 28658
40/137	1500KVA TRANSFORMER 3M	500 THORNBURG DR-PREGIS, NEWTON, NC 28658
40/138	1825KW GENERATOR 3M	500 THORNBURG DR-PREGIS, NEWTON, NC 28658
41/139	1500KVA TRANSFORMERMORETZ	514 WEST 21ST ST, NEWTON, NC 28658
41/140	1000KVA TRANSFORMERMORETZ	514 WEST 21ST ST, NEWTON, NC 28658
41/141	1000KVA TRANSFORMERMORETZ	514 WEST 21ST ST, NEWTON, NC 28658



42/142	1825KW GENERATOR MORETZ HOSIERY	100 S WESTSIDE BLVD, NEWTON, NC 28658
43/143	FIRE DEPT 2	560 WEST 21ST ST, NEWTON, NC 28658
44/144	CONCESSION	605 WESTSIDE J ST -WESTSIDE JCPARK, NEWTON, NC 28658
44/145	SHELTER	605 WESTSIDE J ST -WESTSIDE JCPARK, NEWTON, NC 28658
44/146	FIELD LIGHTS/POLES/FENCING	605 WESTSIDE J ST -WESTSIDE JCPARK, NEWTON, NC 28658
44/147	TENNIS LIGHTS/POLES/FENCING	605 WESTSIDE J ST -WESTSIDE JCPARK, NEWTON, NC 28658
44/148	BB CRT LIGHTS/POLES/FENCING	605 WESTSIDE J ST -WESTSIDE JCPARK, NEWTON, NC 28658
45/149	STORAGE BLDG	201 WEST 4TH ST, NEWTON, NC 28658
45/150	SHELTER	201 WEST 4TH ST, NEWTON, NC 28658
46/151	RAW WATER INTAKE	JACOBS FORK RIVER OFF NC 10, NEWTON, NC 28658
46/152	WEIR INFRASTRUCTURE	JACOBS FORK RIVER OFF NC 10, NEWTON, NC 28658
47/153	2012 GENERATOR	BURRIS RD, NEWTON, NC 28658
48/154	40 KW GENERATOR	2427 NORTH ASHE AVE, NEWTON, NC 28658
49/155	500,000G WATER TANK	NORTH COLLEGE AVE, NEWTON, NC 28658
50/156	SOUTHSIDE COMMUNITY CTR	OFF NC 321 SOUTH, NEWTON, NC 28658
51/157	250KW GENERATORWESTSIDE LIFT STATIO	TODD ST, NEWTON, NC 28658
52/158	75KW GENERATORWALNUT CREEK	WALNUT CREEK AND SANDY FORD, NEWTON, NC 28658
53/159	500,000G WATER TANK	WEST 1ST ST, NEWTON, NC 28658
54/160	60KW GENERATOR NORTHSIDE FIRE STATI	560 WEST 21ST ST, NEWTON, NC 28658
55/161	1500KVA TRANSFORMERWEST 4TH ST	WEST 4TH ST, NEWTON, NC 28658
55/162	2000KVA TRANSFORMERWEST 4TH ST	WEST 4TH ST, NEWTON, NC 28658
55/163	1500KVA TRANSFORMERWEST 4TH ST	WEST 4TH ST, NEWTON, NC 28658
55/164	2000KVA TRANSFORMERWEST 4TH ST	WEST 4TH ST, NEWTON, NC 28658
55/165	40KW GENERATORPUBLIC WORKS	WEST 4TH ST, NEWTON, NC 28658
55/166	750 KVA TRANSFORMER- SPARE	WEST 4TH ST, NEWTON, NC 28658
55/167	1000 KVA TRANSFORMER -SPARE	WEST 4TH ST, NEWTON, NC 28658
55/168	576 KVA REGULATOR	WEST 4TH ST, NEWTON, NC 28658
56/169	25KW GENERATOR MAIN FIRE STATION	116 WEST A ST, NEWTON, NC 28658
57/170	1200KVA TRANSFORMERCATAWB A CO JUSTI	WESTSIDE BLVD, NEWTON, NC 28658

57/171	1000KVA TRANSFORMERHARRIS TEETER	WESTSIDE BLVD, NEWTON, NC 28658
58/172	NEW FIRE STATION 1	119 S BRADY ST, NEWTON, NC 28658
58/173	GENERATOR	119 S BRADY ST, NEWTON, NC 28658
59/174	LEASED OFFICE SPACE	217 N MAIN AVE, NEWTON, NC 28658
60/175	2500 KVA TRANSFORMER	1500 PRODELIN DR, NEWTON, NC 28658
61/176	2500 KVA TRANSFORMER	WEST 4TH ST, NEWTON, NC 28658
62/177	LIGHTS/POLES/FENCING	JACOB FORK PARK, NEWTON, NC 28658
63/178	AMPHITHEATER	N MAIN AVE, NEWTON, NC 28658
64/179	SPLASH PAD	23 S BRADY AVE, NEWTON, NC 28658
65/180	METAL PARK BLDG	201 WEST 4TH ST, NEWTON, NC 28658
66/181	WILL BECOME OFFICE SPACE	119 N COLLEGE ST, NEWTON, NC 28658
67/182	VEHICLE-EQUIPMENT STORAGE	2713 N COLLEGE AVE, NEWTON, NC 28658



# Property coverage premium summary

**Policy Number** 630-B449201A

## Coverages and limits of insurance – described premises

Insurance applies on a BLANKET basis only to a coverage or type of property for which a Limit of Insurance is shown below, and then only at the premises locations for which a value for such coverage or property is shown on the Statement of Values dated 5/21/2025, or subsequently reported to and insured by us. For Insurance that applies to a specific premises location see Deluxe Property Coverage Part Schedule - Specific Limits

BLANKET DESCRIPTION OF COVERAGE OR PROPERTY	LIMITS OF INSURANCE
<b>Building and Your Business Personal Property</b>	<b>\$141,333,969</b>

## Co-insurance provision

Coinsurance does not apply to Blanket Coverages shown above.

## Valuation provision

Replacement cost (subject to limitations) applies to most types of covered property (See Valuation Loss Condition).

## Deluxe property coverage part schedule - specific limits - described premises

Insurance applies only to a premises location and building number and to a coverage or type of property for which a Specific Limit of Insurance is shown on schedule.

## Co-insurance provision

Coinsurance does not apply to any Building, Personal Property or “Stock” coverage for which a Specific Limit of Insurance applies as shown on schedule.

## Valuation provision

Replacement cost (subject to limitations) applies to most types of covered property (See Valuation Loss Condition).

# Additional covered property

LIMITS OF INSURANCE

<b>Personal Property at Undescribed Premises</b>	
At any "exhibition" premises	\$50,000
At any installation premises or temporary storage premises	Not Covered
At any other not owned, leased or regularly operated premises	\$50,000
<b>Sales Representative Property</b>	
	\$50,000
<b>Personal Property in Transit</b>	
	\$50,000

# Deluxe property coverage form - additional coverages & coverage extensions

The Limits of Insurance shown in the left column are included in the coverage form and apply unless a Revised Limit of Insurance or Not Covered is shown in the Revised Limits of Insurance column on the right. The Limits of Insurance apply in any one occurrence unless otherwise stated.

	LIMITS OF INSURANCE	REVISED LIMITS OF INSURANCE
<b>Accounts Receivable</b>		
At all described premises	\$50,000	\$500,000
In transit or at all undescribed premises	\$25,000	\$250,000
<b>Appurtenant Buildings and Structures</b>	\$100,000	
<b>Claim Data Expense</b>	\$25,000	
<b>Covered Leasehold Interest – Undamaged Improvements &amp; Betterments</b>		
Lesser of Your Business Personal Property limit or:	\$100,000	
<b>Debris Removal (additional amount)</b>	\$250,000	
<b>Deferred Payments</b>	\$25,000	
<b>Duplicate Electronic Data Processing Data and Media</b>	\$50,000	
<b>Electronic Data Processing Data and Media</b>		
At all described premises	\$50,000	\$500,000
<b>Employee Tools</b>		
In any one occurrence	\$25,000	
Any one item	\$2,500	
<b>Expediting Expenses</b>	\$25,000	
<b>Extra Expense</b>	\$25,000	
<b>Fine Arts</b>		
At all described premises	\$50,000	\$250,000
In transit	\$25,000	
<b>Fire Department Service Charge</b>	Included*	
<b>Fire Protective Equipment Discharge</b>	Included*	
<b>Green Building Alternatives – Increased Cost Percentage 1%</b>		
<b>Maximum amount – each building</b>	\$100,000	
<b>Green Building Reengineering and Recertification Expense</b>	\$25,000	
<b>Limited Coverage for Fungus, Wet Rot or Dry Rot – Annual Aggregate</b>	\$25,000	
<b>Loss of Master Key</b>	\$25,000	
<b>Newly Constructed or Acquired Property</b>		
Buildings - each	\$2,000,000	
Personal Property at each premises	\$1,000,000	

\*Included means included in applicable Covered Property Limit of Insurance

## Deluxe property coverage form - additional coverages & coverage extensions

	LIMITS OF INSURANCE	REVISED LIMITS OF INSURANCE
<b>Non-Owned Detached Trailers</b>	\$25,000	
<b>Ordinance or Law Coverage</b>	\$250,000	\$500,000
<b>Outdoor Property</b>	\$25,000	\$350,000
Any one tree, shrub or plant	\$2,500	\$25,000
<b>Outside Signs</b>		
At all described premises	\$100,000	
At all undescribed premises	\$5,000	
<b>Personal Effects</b>	\$25,000	\$50,000
<b>Personal Property At Premises Outside of the Coverage Territory</b>	\$50,000	
<b>Personal Property In Transit Outside of the Coverage Territory</b>	\$25,000	\$50,000
<b>Pollutant Cleanup and Removal – Annual Aggregate</b>	\$100,000	
<b>Preservation of Property</b>		
Expenses to move and temporarily store property	\$250,000	
Direct loss or damage to moved property	Included*	
<b>Reward Coverage</b>		
25% of covered loss up to a maximum of:	\$25,000	
<b>Stored Water</b>	\$25,000	
<b>Theft Damage to Rented Property</b>	Included*	
<b>Undamaged Parts of Stock in Process</b>	\$50,000	
<b>Valuable Papers and Records – Cost of Research</b>		
At all described premises	\$50,000	\$500,000
In transit or at all undescribed premises	\$25,000	\$250,000
<b>Water or Other Substance Loss – Tear Out and Replacement Expense</b>	Included*	

\*Included means included in applicable Covered Property Limit of Insurance



# Deluxe business income (and extra expense) coverage form - described premises

PREMISES LOCATION NO.	BUILDING NO.	LIMITS OF INSURANCE
001-067	001-182	\$2,000,000

Rental Value: Included

Ordinary Payroll: Included

## Deluxe business income - additional coverages and coverage extensions

The Limits of Insurance, Coverage Period and Coverage Radius shown in the left column are included in the coverage form and apply unless a revised Limit of Insurance, Coverage Period, Coverage Radius or Not Covered is shown under the column on the right. The Limits of Insurance apply in any one occurrence unless otherwise stated.

	LIMITS OF INSURANCE, COVERAGE PERIOD OR COVERAGE RADIUS	REVISED LIMITS OF INSURANCE, COVERAGE PERIOD OR COVERAGE RADIUS
<b>Business Income from Dependent Property</b>		
At Premises Within the Coverage Territory	\$100,000	\$250,000
At Premises Outside of the Coverage Territory	\$100,000	
<b>Civil Authority</b>		
Coverage Period	30 days	
Coverage Radius	100 miles	
<b>Claim Data Expense</b>	\$25,000	
<b>Contract Penalties</b>	\$25,000	
<b>Extended Business Income</b>		
Coverage Period	180 days	
<b>Fungus, Wet Rot or Dry Rot – Amended Period of Restoration</b>		
Coverage Period	30 days	
<b>Green Building Alternatives – Increased Period of Restoration</b>		
Coverage Period	30 days	
<b>Ingress or Egress</b>	\$25,000	
Coverage Radius	1 mile	
<b>Newly Acquired Locations</b>	\$500,000	
<b>Ordinance or Law - Increased Period of Restoration</b>	\$250,000	
<b>Pollutant Cleanup and Removal – Annual Aggregate</b>	\$25,000	
<b>Transit Business Income</b>	\$25,000	
<b>Undescribed Premises</b>	\$25,000	

## Causes of loss – Earthquake

– aggregate in any one policy year, for all losses covered under the Causes of loss – Earthquake endorsement, commencing with the inception date of this policy:

		AGGREGATE LIMITS OF INSURANCE
01. Applies at the following Building(s) numbered:	01-182	\$10,000,000

If more than one Annual Aggregate Limit applies in any one occurrence, the most we will pay is the highest involved Annual Aggregate Limit. The most we will pay during each annual period is the highest of the Annual Aggregate Limits shown.

## Causes of loss – Broad Form Flood

– aggregate in any one policy year, for all losses covered under the Causes of loss – Broad Form Flood endorsement, commencing with the inception date of this policy:

		AGGREGATE LIMITS OF INSURANCE
01. Applies at the following Building(s) numbered:	02-14,19-20,49-71,73-78,81-114,118,121-141,143-150,154,160,169,172-175,179-182	\$10,000,000

If more than one Annual Aggregate Limit applies in any one occurrence, the most we will pay is the highest involved Annual Aggregate Limit. The most we will pay during each annual period is the highest of the Annual Aggregate Limits shown.

EXCESS OF LOSS LIMITATION APPLIES – See Causes of Loss – Broad Form Flood endorsement.

## Utility services

	LIMITS OF INSURANCE
Combined Direct Damage and Time Element - in any one occurrence (See Utility Services – Direct Damage and Utility Services Time Element endorsements)	\$350,000

Coverage is provided for the following:

Water Supply  
Communication Supply  
Power Supply

Coverage for Overhead Transmission Lines is:

Provided subject to Limit of Insurance of \$350,000 in any one occurrence

## Electronic Vandalism Limitation Endorsement DX T3 98

ELECTRONIC VANDALISM

LIMIT OF INSURANCE

Aggregate in any 12 month period of this policy:

\$10,000

### DX T3 63 ADDITIONAL COVERED PROPERTY

#### SCHEDULE

<u>Prem. Loc. No.</u>	<u>Bldg. No.</u>	<u>Description of Property</u>	<u>Limit of Insurance</u>
27	111	Building Coverage: Fences outside of buildings	\$ 17,548
34	120	Building Coverage: Fences outside of buildings	\$ 457,415
37	130	Building Coverage: Fences outside of buildings	\$ 166,471
37	131	Building Coverage: Fences outside of buildings	\$ 219,232
37	132	Building Coverage: Fences outside of buildings	\$ 207,884
44	146	Building Coverage: Fences outside of buildings	\$ 292,465
44	147	Building Coverage: Fences outside of buildings	\$ 196,536
44	148	Building Coverage: Fences outside of buildings	\$ 46,093
62	177	Building Coverage: Fences outside of buildings	\$ 466,773

# Public Sector Services Additional Coverage Endorsements

	LIMIT OF INSURANCE
<b>Spoilage Coverage Extension DX T3 15</b>	\$10,000
	LIMIT OF INSURANCE
<b>Sewer or Drain Backup Amendment DX T4 45</b>	\$50,000
	LIMIT OF INSURANCE
<b>Law Enforcement Animals DX T4 46</b>	
Any one law enforcement animal	\$25,000
All law enforcement animals – maximum per occurrence	\$100,000
	LIMIT OF INSURANCE
<b>Public Entity Property Extensions DX T4 47</b>	
Confiscated Property	\$100,000
Street Lights – each item	\$10,000
Street Lights – maximum per occurrence	\$250,000
Deductible	\$2,500
Street Signs – each item	\$10,000
Street Signs – maximum per occurrence	\$250,000
Deductible	\$2,500
Traffic Signs and Lights – each item	\$10,000
Traffic Signs and Lights – maximum per occurrence	\$250,000
Deductible	\$2,500
Stadium Lights – per occurrence	\$10,000
Stadium Lights – maximum per occurrence	\$250,000
Deductible	\$2,500
	LIMIT OF INSURANCE
<b>Unintentional E&amp;O-Failure To Report DX T4 59</b>	\$250,000

# Deductibles

## By Earthquake

	PERCENTAGE	OCCURENCE
01. in any one occurrence, at the following Building(s) numbered: 001-182		\$25,000
As respects Business Income Coverage a 72 hour deductible applies at all premises locations.		

## By Flood

	OCCURENCE
01. At each of the following Building(s) numbered: 002-014,019-020,049-071,073-078,081-114,118,121-141,143-150,154,160,169,172-175,179-182	\$25,000
As respects Business Income Coverage a 72 hour deductible applies at all premises locations.	

## To Utility Services

Time Element, in any one occurrence:	72 Hours
--------------------------------------	----------

## To “Electronic Data Processing Equipment”

in any one occurrence:	\$1,000
------------------------	---------

## To “Electronic Data Processing Data And Media”

in any one occurrence:	\$1,000
------------------------	---------

## To “Accounts Receivable”

in any one occurrence:	\$1,000
------------------------	---------

## To “Valuable Papers And Records”

in any one occurrence:	\$1,000
------------------------	---------

# Business Income

As respects Business Income Coverage, for which no other deductible is stated above or in the coverage description, a 72 hour deductible applies.

# Any Other Covered Loss

in any one occurrence: \$10,000

# Rating Basis

Total Rating Basis	\$143,616,139
Building Rate	0.076
Business Personal Property Rate	0.102
Time Element Rate	0.046
Premium for Policy Period	\$114,902



# Deluxe Property Coverage Part Schedule – Specific Limits

PREM	BUILDING	DESCRIPTION OF COVERAGE OR PROPERTY	LIMITS OF INSURANCE
25	104	Buildings	\$282,170



# Inland Marine coverage premium summary

**Policy Number** 630-B449201A

## Miscellaneous Property Coverage Form CM T2 39

### COVERAGE AND LIMITS OF INSURANCE

Covered property consists of the following when indicated by an 'X' below:

☒ **Scheduled items:**

☒ As shown on the most current schedule on file with us. The amount shown on such schedule for each item is the limit of insurance applying to that item.

Total limit of insurance for all scheduled items: \$333,726

☒ **Blanket items:**

Total limit of insurance for all unlisted items: \$100,000

Limit of insurance for any one unlisted item: \$10,000

Description of unlisted items:

TBD

Total limit of insurance for scheduled and blanket items: \$433,726

#### COVERAGE EXTENSIONS

#### LIMITS OF INSURANCE

<b>Fire Protective Systems:</b>	\$75,000
<b>Newly Acquired Property:</b>	\$25,000
<b>Preservation Of Property Expense:</b>	\$5,000
<b>Valuable Papers and Records:</b>	\$50,000

#### ADDITIONAL COVERAGES:

#### LIMITS OF INSURANCE

<b>Claim Data Expense:</b>	\$5,000
<b>Debris Removal Increased Limit:</b>	\$75,000
<b>Fire Or Police Department Service Charge:</b>	\$25,000
<b>Pollutant Cleanup And Removal:</b>	\$25,000
<b>Reward Coverage:</b>	\$2,500

Deductible

Deductible applying to all covered loss or damage unless a more specific deductible for the covered loss is shown below or elsewhere in this proposal: \$1,000

Deductible applying to covered loss or damage caused by or resulting from Flood or Earthquake when indicated by an 'X' below:

☒

Flood Deductible

\$25,000

or      % subject to  
\$ minimum and  
\$ maximum

Valuation

Replacement Cost

Coinsurance

The following Coinsurance applies when indicated by an 'X':

☐

100%

☐

90%

☐

80%

☒

No Coinsurance Applies

Premium

Premium: \$3,288 Annual Premium \$3,288 Term Premium

Minimum earned premium: None

Other Terms and Conditions

CM T7 53 – Earth Movement Deductible

☒

Dollar Deductible: \$25,000

CM T7 56 – Earth Movement Limitation – Described Property Or Locations

SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS	EARTH MOVEMENT OCCURRENCE LIMIT OF INSURANCE	EARTH MOVEMENT ANNUAL AGGREGATE LIMIT OF INSURANCE
ALL COVERED PROPERTY	\$433,726	\$433,726

CM T7 66 – Flood Limitation – Described Property Or Locations

SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS	FLOOD OCCURRENCE LIMIT OF INSURANCE	FLOOD ANNUAL AGGREGATE LIMIT OF INSURANCE
ALL COVERED PROPERTY	\$433,726	\$433,726

# Contractors Equipment Coverage Form CM T2 42

## COVERAGE AND LIMITS OF INSURANCE

### Covered Property

Coverage consists of the following when indicated by an 'X':

☒

**Scheduled Equipment**

☐

As shown on the most current schedule on file with us. The amount shown on such schedule for each item of equipment is the limit of insurance applying to that item.

Total limit of insurance for all Scheduled Equipment:

\$3,040,922

☒

**Unscheduled Owned Equipment**

Total limit of insurance for all unscheduled owned equipment:

\$100,000

Limit of insurance for any one unscheduled owned item of equipment:

\$10,000

☒

**Unscheduled Equipment Owned By Others**

Limit of insurance for any one unscheduled item of equipment leased, rented, or borrowed from others:

\$250,000

Total limit of insurance for all items of Equipment in any one Occurrence:

\$3,390,922

### Deductible

Deductible applying to all covered loss or damage indicated by an 'X' below unless a more specific Deductible for the covered loss or damage is shown elsewhere in this proposal:

☒

Dollar Deductible:

\$1,000

### Valuation and Coinsurance

#### Valuation

The following Valuation applies to the applicable Covered Property:

#### Scheduled Equipment:

Actual Cash Value Valuation applies unless replaced by the Optional Valuation indicated by an X'.

☒

Replacement Cost Valuation

#### Unscheduled Owned Equipment:

Actual Cash Value Valuation applies unless replaced by the Optional Valuation indicated by an X'.

☒

Replacement Cost Valuation

#### Equipment Owned By Others:

The amount for which you are legally liable, not to exceed Replacement Cost.

### Coinsurance

The following coinsurance applies to Scheduled Items when indicated by an 'X':

☐ 100%    ☐ 90%    ☐ 80%    ☒ No Coinsurance Applies

### Premium

The following Premium options apply when indicated by an 'X':

☒ **Scheduled and Unscheduled Owned Equipment**

☒ Non Reporting  
Premium \$15,736

☐ Premium Adjustment  
Premium Base Values  
Estimated Premium Base Amount  
Annual Rate Per \$100  
Inception Premium  
Adjustment Rate Per \$100

☒ **Leased Or Rented From Others**

☒ Non Reporting  
Premium \$200

☐ Premium Adjustment  
Premium Base Values  
Estimated Premium Base Amount  
Inception Premium  
Adjustment Rate Per \$100

Total Premium Due At Inception: \$15,936

### Other Terms and Conditions

#### CM B0 97 - Contractors Equipment Supplemental Declarations

COVERAGE EXTENSIONS	LIMIT OF INSURANCE
<b>Business Personal Property In Job Trailers:</b>	\$10,000
<b>Document And Data Restoration Costs:</b>	\$50,000
<b>Fire Protective Systems:</b>	\$75,000
<b>Hauling Property Of Others:</b>	\$100,000
<b>Newly Acquired Equipment - Per Item:</b>	\$250,000
<b>Rental Costs:</b>	
Any One Item:	\$5,000
Any One Occurrence:	\$25,000
<b>Upgrades To Covered Property:</b>	\$25,000

ADDITIONAL COVERAGES	LIMIT OF INSURANCE
<b>Claim Data Expenses:</b>	\$5,000
<b>Continuing Rental Payments:</b>	

Any One Item:	\$5,000
Any One Occurrence:	\$25,000
<b>Contract Penalty:</b>	\$25,000
<b>Debris Removal Increased Limit:</b>	\$75,000
<b>Employee Tools, Equipment And Clothing:</b>	
Any One Item:	\$1,000
Any One Employee:	\$2,500
Any One Occurrence:	\$5,000
<b>Errors Or Unintentional Omissions:</b>	\$100,000
<b>Expediting Expenses:</b>	\$25,000
<b>Expendable Supplies:</b>	\$10,000
<b>Fire Or Police Department Service Charge:</b>	\$25,000
<b>Lost Warranty Or Service Contract:</b>	\$10,000
<b>Pollutant Clean Up And Removal:</b>	\$25,000
<b>Preservation Of Property Expense:</b>	\$50,000
<b>Reward Coverage:</b>	\$2,500
<b>Tracking System Deductible Waiver Amount:</b>	\$10,000

**CM B0 99 - Contractors Equipment Deductible Schedule**

The following specific Deductible(s) apply to loss or damage to the type of property, or to loss or damage by the cause of loss, as indicated by an 'X' below:

☒ **Earth Movement Deductible:**

☒ Dollar Deductible: \$25,000

☒ **Flood Deductible:**

☒ Dollar Deductible: \$25,000

**CM U3 52 – Flood Limitation – Described Property or Locations**

SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS	FLOOD OCCURRENCE LIMIT OF INSURANCE	FLOOD ANNUAL AGGREGATE LIMIT OF INSURANCE
ALL COVERED PROPERTY	3,140,922	3,140,922

**CM U3 67 – Earth Movement Limitation – Described Property or Locations**

SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS	OCCURRENCE LIMIT OF INSURANCE	ANNUAL AGGREGATE LIMIT OF INSURANCE
ALL COVERED PROPERTY	3,140,922	3,140,922

**Gross Premium:** \$19,224



Electronic Vandalism Limitation And Other Changes CM U6 17

ELECTRONIC VANDALISM	LIMIT OF INSURANCE
Aggregate in any 12 month period of this policy:	\$10,000



# Crime coverage premium summary

**Policy Number** 630-B449201A

## Government Crime - Discovery Coverage

The Government Crime - Discovery Coverage Part consists of this Declarations Form and the Government Crime - Discovery Coverage Form.

### Employee benefit plan(s) included as insureds:

INSURING AGREEMENTS	LIMIT OF INSURANCE PER OCCURRENCE	DEDUCTIBLE AMOUNT PER OCCURRENCE
Employee Theft – Per Loss Coverage	\$500,000	\$500
Forgery Or Alteration	\$500,000	\$500
Inside The Premises – Theft of Money And Securities	\$250,000	\$500
Inside The Premises – Robbery Or Safe Burglary Of Other Property	\$100,000	\$500
Outside The Premises	\$250,000	\$500
Computer Fraud	\$250,000	\$500
Funds Transfer Fraud	\$250,000	\$500
Money Orders And Counterfeit Paper Currency	\$250,000	\$500

## Cancellation of prior insurance issued by us:

By acceptance of this Coverage Part you give us notice cancelling prior policy Nos. \_\_\_\_\_; the cancellation to be effective at the time this Coverage Part becomes effective.

**Gross Premium:** \$3,364



# Workers Comp coverage premium summary

**Policy Number** UB-B4560833

## Workers Compensation

### Coverage information

**Part One**

Workers Compensation Insurance: Statutory Requirements

Part One of the policy applies to the Workers Compensation Law of the states listed here:

**NC**

**Part Two**

Employers Liability Insurance: Part Two of the policy applies to work in each state listed in Part One.

The limits of our liability under Part Two are:

Bodily Injury by Accident	<u>\$1,000,000</u>	each accident
Bodily Injury by Disease	<u>\$1,000,000</u>	policy limit
Bodily Injury by Disease	<u>\$1,000,000</u>	each employee

**Part Three**

Other States Insurance: Part Three of the policy applies to the states, if any, listed here:

**AL,AR,AZ,CA,CO,CT,DC,DE,FL,GA,HI,IA,ID,IL,IN,KS,KY,LA,MA,MD,ME,MI,MN,MO,MS,MT,NE,NH,NJ,NM,NV,NY,OK,OR,PA,RI,SC,SD,TN,TX,UT,VA,VT,WI,WV**



# Workers Comp coverage premium summary

## Premium schedule

	PREMIUM
Experience Modification Factor: NC 1.29	
Total Estimated Annual Standard Premium including Expense Constant	\$373,133
Premium Discount	-\$20,886
Terrorism	\$438
CAT (other than Certified Acts of Terrorism)	\$875
Total Estimated Premium	\$353,560
Taxes and Surcharges	\$0
<b>Total</b>	<b>\$353,560</b>
Total Payroll	\$14,586,128

If an experience rating modification factor applies to this policy, it may change. We will apply any change in accordance with our manual rules and state law. A change in your experience rating modification may increase or decrease your premium.

**NOTE- TERRORISM PREMIUM CHARGES ARE SUBJECT TO CHANGE AT ANY TIME BASED ON STATE REGULATORY ACTION.**



# General Liability coverage premium summary

**Policy Number**

ZLP-51N95397

## Occurrence

### Option 1

**Gross Premium**

**\$27,291**

COVERAGE	LIMIT
General Aggregate Limit	\$3,000,000
Products/Completed Operations Aggregate Limit	\$3,000,000
Personal and Advertising Injury Liability Any One Person or Organization Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
The following limits apply:	
Damage to Premises Rented to You Limit (Any One Premises)	\$1,000,000
Medical Expense Limit (Any One Person)	Excluded
Sewage Back-Up Limit	\$1,000,000
Failure To Supply Limit	\$1,000,000
Abuse or Molestation Aggregate Limit	\$2,000,000
Each Abuse or Molestation Offense Limit	\$2,000,000

## Miscellaneous Items

DESCRIPTION
Cemetery Professional Services Liability
Exclusion - Communicable Diseases
Exclusion - Electromagnetic Fields
Exclusion - Designated Activities Or Operations - The Following Are Excluded:
North Carolina Municipal Power Agency Number 1 (NCMPA#1)
Unmanned Aircraft Exclusion - With Exceptions For Designated Aircraft And Certain Advertising Injury
Limited Abuse Or Molestation Liability Coverage

## Amendments

DESCRIPTION
Exclusion - PFAS
XTEND Endorsement For Public Entities
Mobile Equipment Redefined - Public Entities
Amendment - Pollution Exclusion
Cap On Losses From Certified Acts Of Terrorism
Exclusion - Injury To Volunteer Firefighters
Exclusion - Law Enforcement Activities Or Operations
Coverage C - Medical Payments Exclusion
Exclusion - Employees And Volunteer Workers As Insureds For Certain Bodily Injury, Personal Injury And Property Damage

Exclusion - Public Use Of Private Property
Fungi Or Bacteria Exclusion - With Limited Exception For Bacteria In Sewage Back-Up
Exclusion - Discrimination
Exclusion - Professional Health Care Services - Public Entities
Exclusion - Violation Of Consumer Financial Protection Laws
Amendment Of Intellectual Property Exclusion
Exclusion - Lead
Exclusion - Nuclear Energy Liability
Amendment Of Common Policy Conditions - Prohibited Coverage - Unlicensed Insurance And Trade Or Economic Sanctions
Amendment - Non Cumulation Of Each Occurrence Limit Of Liability And Non Cumulation Of Personal And Advertising Injury Limit
Amendment Of Contractual Liability Exclusion - Exception For Damages Assumed In An Insured Contract Applies Only To Named Insured
Preservation Of Governmental Immunity - North Carolina

Professional Health Care & Social Services Liability Coverage – Designated Professionals – Public Entities Applies When “Yes” Is Indicated Below:

NURSES	YES	PARAMEDIC / EMT	YES
JAIL NURSES	NO	SOCIAL SERVICES	NO
CORONER	NO		





# General Liability Employee benefits liability

**Policy Number** ZLP-51N95397

## Claims Made

### Option 1

**Gross Premium** \$381

COVERAGE	LIMIT
Aggregate Limit	\$3,000,000
Each Employee Limit	\$1,000,000

## Deductibles

The following deductibles (Loss Only) apply:

Each Employee Deductible (Loss Only)	\$1,000
--------------------------------------	---------

**Retroactive Date:** 07/01/2025

## Amendments

DESCRIPTION
Preservation Of Governmental Immunity - North Carolina



# Law Enforcement Liability

**Policy Number**

ZLP-51N95397

## Occurrence

### Option 1

**Gross Premium**

**\$35,368**

COVERAGE	LIMIT
Aggregate Limit	\$3,000,000
Each Wrongful Act Limit	\$1,000,000

## Deductibles

Deductibles apply to damages & defense expenses unless required otherwise by state regulation

The following deductible (Damages and Defense Expenses) applies

Each Wrongful Act Deductible - Damages and Defense Expenses	\$15,000
---	----------

## Miscellaneous Items

DESCRIPTION
Exclusion - Lead
Unmanned Aircraft Exclusion-With Exception For Designated Aircraft
Amendment Of Professional Health Care Services Exclusion - Emergency Medical Dispatchers Or 911 Operators

## Amendments

DESCRIPTION
Exclusion - PFAS
Cap On Losses From Certified Acts Of Terrorism
Amendment Of Common Policy Conditions - Prohibited Coverage -Unlicensed Insurance And Trade Or Economic Sanctions
Amendment Of Law Enforcement Activities Or Operations
Preservation Of Governmental Immunity - North Carolina
Mobile Equipment Redefined - Exclusion Of Vehicles Subject To Motor Vehicle Laws
Fungi Or Bacteria Exclusion



# Public Entity Management liability

**Policy Number**

ZLP-51N95397

## Claims Made

### Option 1

**Gross Premium**

\$9,148

COVERAGE	LIMIT
Aggregate Limit	\$3,000,000
Each Wrongful Act Limit	\$1,000,000

**Retroactive Date:**

07/01/1999

## Deductibles

Deductibles apply to damages & defense expenses unless required otherwise by state regulation

The following deductible (Damages and Defense Expenses) applies:

Each Wrongful Act Deductible - Damages and Defense Expenses	\$15,000
---	----------

## Miscellaneous Items

DESCRIPTION
Limited Special Expenses Coverage - Key Employees
Limited Special Expenses Aggregate Limit - Key Employees: \$50,000
Limited Special Expenses Participation Percentage - Key Employees: 10%
Defense Expenses Reimbursement For Injunctive Relief Suits
Defense Expenses Reimbursement Limit - Aggregate: \$50,000
Defense Expenses Reimbursement Limit - Each Wrongful Act: \$50,000
Injunctive Relief Each Wrongful Act Participation Amount: 10%

## Amendments

DESCRIPTION
Exclusion - PFAS
Amendment Of Joint Powers Authority Definition
Cap On Losses From Certified Acts Of Terrorism
Amendment Of Network And Information Security Wrongful Act Definition
Amendment Of Common Policy Conditions - Prohibited Coverage - Unlicensed Insurance And Trade Or Economic Sanctions
Amendment Of Law Enforcement Activities Or Operations Definition
Preservation Of Governmental Immunity - North Carolina

**The following are excluded when “yes” is indicated below. If “no” is indicated, an amendment and/or manuscript endorsement may be required**

- |     |   |     |                             |
|-----|---|-----|-----------------------------|
| Yes | Airport   | Yes | Transit Authorities         |
| Yes | Health Care Facilities: Clinics                   | Yes | Gas Utilities               |
| Yes | Health Care Facilities: Hospital                  | Yes | Electric Utilities          |
| Yes | Health Care Facilities: Blood Banks               | Yes | Housing Authorities         |
| Yes | Health Care Facilities: Nursing Homes             | Yes | Schools or School Districts |
| Yes | Health Care Facilities: Rehabilitation Facilities | Yes | Joint Powers Authority      |
| Yes | Port Authorities                                  |     |                             |



# Public Entity Employment related practices liability

**Policy Number**

ZLP-51N95397

## Claims Made

### Option 1

**Gross Premium**

\$50,153

COVERAGE

LIMIT

Aggregate Limit

\$3,000,000

Each Wrongful Employment Practice Offense Limit

\$1,000,000

## Deductibles

Deductibles apply to damages & defense expenses unless required otherwise by state regulation.

The following deductible (Damages and Defense Expenses) applies:

Each Wrongful Employment Practice Offense Deductible - Damages  
and Defense Expenses

\$15,000

**Retroactive Date**

07/01/1999

## Miscellaneous Items

DESCRIPTION

Non-Employment Related Sexual Harassment Endorsement

Workplace Violence Expenses Coverage

Workplace Violence Expenses Limit: \$250,000

Defense Expenses Outside Of Limits

## Amendments

DESCRIPTION

Amendment Of Joint Powers Authority Definition

Cap On Losses From Certified Acts Of Terrorism

Exclusion - Other Employment Laws

Amendment Of Common Policy Conditions - Prohibited Coverage - Unlicensed Insurance And Trade Or Economic  
Sanctions

Preservation Of Governmental Immunity - North Carolina

**The following are excluded when “yes” is indicated below. If “no” is indicated, an amendment and/or manuscript endorsement may be required**

Yes	Airport	Yes	Transit Authorities
Yes	Health Care Facilities: Clinics	Yes	Gas Utilities
Yes	Health Care Facilities: Hospital	Yes	Electric Utilities
Yes	Health Care Facilities: Blood Banks	Yes	Housing Authorities
Yes	Health Care Facilities: Nursing Homes	Yes	Schools or School Districts
Yes	Health Care Facilities: Rehabilitation Facilities	Yes	Joint Powers Authority
Yes	Port Authorities		



# Public Entity Employment related practices liability

**Policy Number** ZLP-51N95397

## Claims Made

### Option 2

**Gross Premium** \$39,790

## Important notice

Defense expenses are payable within the limits of Insurance

COVERAGE	LIMIT
Aggregate Limit	\$3,000,000
Each Wrongful Employment Practice Offense Limit	\$1,000,000

## Deductibles

Deductibles apply to damages & defense expenses unless required otherwise by state regulation.

The following deductible (Damages and Defense Expenses) applies:

Each Wrongful Employment Practice Offense Deductible - Damages and Defense Expenses	\$15,000
---	----------

**Retroactive Date** 07/01/1999

## Miscellaneous Items

DESCRIPTION
Non-Employment Related Sexual Harassment Endorsement
Workplace Violence Expenses Coverage
Workplace Violence Expenses Limit: \$250,000

## Amendments

DESCRIPTION
Amendment Of Joint Powers Authority Definition
Cap On Losses From Certified Acts Of Terrorism
Exclusion - Other Employment Laws
Amendment Of Common Policy Conditions - Prohibited Coverage - Unlicensed Insurance And Trade Or Economic Sanctions
Preservation Of Governmental Immunity - North Carolina

**The following are excluded when “yes” is indicated below. If “no” is indicated, an amendment and/or manuscript endorsement may be required**

Yes	Airport	Yes	Transit Authorities
Yes	Health Care Facilities: Clinics	Yes	Gas Utilities
Yes	Health Care Facilities: Hospital	Yes	Electric Utilities
Yes	Health Care Facilities: Blood Banks	Yes	Housing Authorities
Yes	Health Care Facilities: Nursing Homes	Yes	Schools or School Districts
Yes	Health Care Facilities: Rehabilitation Facilities	Yes	Joint Powers Authority
Yes	Port Authorities		





# Commercial Auto coverage premium summary

## Option 1

<b>Gross Premium</b>	\$142,811
<b>North Carolina Reinsurance Facility</b>	\$3,983

COVERAGE	AUTO SYMBOLS	LIMITS
Liability	1 only	\$1,000,000
Uninsured Motorist	2 only	Rejected
Uninsured/Underinsured Motorist	2 only	\$1,000,000
<b>Number of autos, excluding trailers</b>	178	
<b>Number of trailers</b>	33	

## Amendments

DESCRIPTION
Amendment Of Bodily Injury Definition
Public Entity Auto Extension
Professional Services Not Covered
Emergency Services - Volunteer Firefighters' & Workers' Injuries Excluded
Amendment Of Employee Definition
Preservation Of Governmental Immunity - North Carolina
Amendment Of Common Policy Conditions - Prohibited Coverage - Unlicensed Insurance And Trade Or Economic Sanctions



# Commercial Auto Physical Damage

## Option 1

### Gross Premium

\$43,524

COVERAGE	VALUATION	UNITS	DEDUCTIBLE
Symbol 2,8			
Comprehensive	Actual Cash Value	29	\$2,500
Comprehensive	Actual Cash Value	158	\$1,000
Comprehensive	Agreed Value	9	\$2,500
Comprehensive	Agreed Value	15	\$1,000
Collision	Actual Cash Value	29	\$2,500
Collision	Actual Cash Value	158	\$1,000
Collision	Agreed Value	9	\$2,500
Collision	Agreed Value	15	\$1,000

## Miscellaneous Items

### DESCRIPTION

Hired Auto Physical Damage-Loss Of Use-Comprehensive/Collision-Deductible: \$1,000/\$1,000

## Amendments

### DESCRIPTION

Public Entity Auto Extension

Preservation Of Governmental Immunity - North Carolina



# Commercial Auto coverage premium summary

## Automobile Composite Rating

In order to provide our insureds better service and administrative efficiency, Travelers Public Sector Services is pleased to provide the following process for handling mid-term automobile change requests. All requests will be managed in accordance with the Composite Rate Application outlined below. The insured should continue to submit all change requests to their agent for accurate record keeping and claims verification purposes. Particular attention should be paid to Item 5, which specifies the types of automobiles that will continue to require reporting to the Company.

### Composite Rate Application

- 1. If your policy includes the coverage for which a composite rate is designated in the table below then the premium for that coverage is composite rated. Automobile Liability is rated on a "per unit" basis and Automobile Physical Damage is rated on the basis of the original cost new of the autos. **The composite rates reflect premium charges for any applicable miscellaneous auto coverages, with the exception of Garagekeepers Legal Liability.**
- 2. The composite rates for Automobile Liability and Physical Damage are the rates applicable at the inception of the policy. Based on the information provided for this proposal and as of the date of this proposal, these rates are as follows:

	LIABILITY	COMPREHENSIVE	COLLISION
Option 1	\$802	0.108	0.132

- 3. The premium charged at inception is the estimated annual premium based on the number of units and total original cost new for all covered autos on file with the company at inception. The insured is to submit a current schedule of owned automobiles as of the expiration of the policy and the total earned premium will be computed on the basis of the average net change in units and their corresponding original cost new for the policy term.
- 4. All autos added will carry the same Liability limits and Physical Damage deductibles issued at policy inception for autos of the same type.
- 5. Any new auto requiring valuation other than actual cash value must be reported within 30 days of acquisition. These autos will be added to the policy automobile schedule mid-term and a final premium will be determined at policy expiration.



# Umbrella coverage premium summary

**Policy Number** ZUP-61N93015

## Option 1

**Total estimated policy premium** \$31,504

## Coverage information and limits

COVERAGE	LIMIT
<b>General Aggregate Limit</b>	\$2,000,000
<b>Products – Completed Operations Aggregate Limit</b>	\$2,000,000
<b>Occurrence Limit</b>	\$2,000,000
<b>Crisis Management Service Expenses Limit</b>	\$50,000
<b>Self Insured Retention Any One Occurrence or Event</b>	\$10,000

## Underlying schedule

Coverage is provided over the following underlying coverages:	Limit
<b>General Liability Limit</b>	\$1,000,000
<b>Employee Benefits Liability</b>	\$1,000,000
<b>Auto Liability</b>	\$1,000,000
<b>Law Enforcement Liability</b>	\$1,000,000
<b>Public Entity Management Liability</b>	\$1,000,000
<b>Public Entity Employment-Related Practices Liability</b>	\$1,000,000
<b>Employers Liability</b>	\$1,000,000/1,000,000/1,000,000

## Miscellaneous Items

DESCRIPTION
Communicable Disease Exclusion - Coverage A And B
Electromagnetic Radiation Exclusion - Coverages A And B
Damage To Property Exclusion - Coverage A
Exclusion - Designated Activities Or Operations - The Following Are Excluded:
North Carolina Municipal Power Agency Number 1 (NCMPA#1)

Excess Follow-Form And Umbrella Liability Insurance

## Amendments

COVERAGE
PFAS Exclusion - Coverages A And B
Policy Declarations - Excess Follow-Form And Umbrella Liability
Schedule Of Underlying Insurance
Cap On Losses From Certified Acts Of Terrorism And Exclusion Of Other Acts Of Terrorism Committed Outside The United States

Intellectual Property Exclusion - Coverage B
Coverage For Financial Interest In Foreign Insured Organizations
Failure To Supply Exclusion - Coverages A And B
Fungi Or Bacteria Exclusion - Coverages A And B
Mobile Equipment Racing Exclusion - Coverage B
Nuclear Energy Liability Exclusion (Broad Form) - Coverages A And B
Amendment Of Coverage - Definitions
Public Use Of Private Property Exclusion - Coverages A And B
Follow-Form Limitation -Coverage B
Watercraft Liability Exclusion - Coverage B
Amendment Of Underlying Insurance Definition
Amendment Of Who Is An Insured - Employees And Volunteer Workers - Coverage B
Discrimination Exclusion - Coverage B
Injury To Volunteer Firefighters Exclusion - Coverage B
Law Enforcement Activities Or Operations Exclusion - Coverage B
Lead Exclusion - Coverage B
Pollution Not Related To Autos Exclusion - Public Entities Or Indian Tribes - Coverage A
Professional Health Care Services Exclusion With Limited Exception For Designated Professionals - Coverages A And B
Abuse Or Molestation Exclusion - Coverage A And B- With Limited Follow-Form Exception
Preservation Of Governmental Immunity - North Carolina
Damage To Property Exclusion - Coverage A
Non Cumulation Of Occurrence Limit

# Federal Terrorism Risk Insurance Act Disclosure

The Federal Terrorism Risk Insurance Act of 2002 as amended ("TRIA") establishes a program under which the Federal Government may partially reimburse "Insured Losses" (as defined in TRIA) caused by "Acts Of Terrorism" (as defined in TRIA). "Act Of Terrorism" is defined in Section 102(1) of TRIA to mean any act that is certified by the Secretary of the Treasury – in consultation with the Secretary of Homeland Security and the Attorney General of the United States – to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States Mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

The Federal Government's share of compensation for such Insured Losses is 80% of the amount of such Insured Losses in excess of each Insurer's "Insurer Deductible" (as defined in TRIA), subject to the "Program Trigger" (as defined in TRIA). In no event, however, will the Federal Government be required to pay any portion of the amount of such Insured Losses occurring in a calendar year that in the aggregate exceeds \$100 billion, nor will any Insurer be required to pay any portion of such amount provided that such Insurer has met its Insurer Deductible. Therefore, if such Insured Losses occurring in a calendar year exceed \$100 billion in the aggregate, the amount of any payments by the Federal Government and any coverage provided by this policy for losses caused by Acts Of Terrorism may be reduced.

For each coverage provided by this policy, other than Workers' Compensation/Employers' Liability, that applies to such Insured Losses, the charge for such Insured Losses that has been included for each such coverage is the percentage of the premium for such coverage indicated below, and does not include any charge for the portion of such Insured Losses covered by the Federal Government under TRIA.

For Workers' Compensation/Employers' Liability coverage, the charge for such Insured Losses is an additional premium, which is reflected in the Workers' Compensation/Employers' Liability premium schedule, and does not include any charge for the portion of such Insured Losses covered by the Federal Government under TRIA.

# Account summary

## Premium summary

COVERAGE	POLICY NUMBER	PREMIUM
DELUXE	630-B449201A	\$114,902
GENERAL LIABILITY	ZLP-51N95397	\$27,291
EMPLOYEE BENEFITS LIABILITY	ZLP-51N95397	\$381
INLAND MARINE	630-B449201A	\$19,224
CRIME	630-B449201A	\$3,364
WORKERS COMPENSATION	UB-B4560833	\$353,560
LAW ENFORCEMENT LIABILITY	ZLP-51N95397	\$35,368
PUBLIC ENTITY MANAGEMENT LIABILITY	ZLP-51N95397	\$9,148
PUBLIC ENTITY EMPLOYMENT RELATED PRACTICES LIABILITY	ZLP-51N95397	\$50,153
AUTO LIABILITY		\$146,794
AUTO PHYSICAL DAMAGE		\$43,524
UMBRELLA EXCESS LIABILITY	ZUP-61N93015	\$31,504
<b>Total</b>		<b>\$835,213</b>
<b>Taxes &amp; Surcharges</b>		<b>\$3,983</b>

**Note:** The estimated premium shown in the Premium Schedule and Quote Options, if any, may differ from actual premiums shown on the policies and installment bills due to installment charges, estimated taxes and surcharges, as well as rounding. Estimated taxes and surcharges may differ depending on selection of Quote Options, if any.

### IMPORTANT NOTE REGARDING ACCOUNT MINIMUM PREMIUM

The lines of business shown in the Premium Schedule and Quote Options, if any, are subject to a \$5,000 account minimum premium. If the line(s) of business selected for binding do not total at least \$5,000, then the premiums shown for those lines of business will be adjusted to total \$5,000.

## Payment plan

### To Be Determined

Bill Payment Options can be found at: [Travelers.com/AutoPay](https://Travelers.com/AutoPay)

**Note:** The amount of each installment will be reflected on your policy invoicing.

# Account summary

## Disclosure

Unless accepted, the offer(s) of insurance contained in this proposal expire(s) automatically thirty (30) days after the proposal date referenced on the cover page, or the proposed effective date if earlier. This proposal is not a binding contract of insurance. If you have questions regarding this proposal, please contact your Travelers Representative.

The following outlines the coverage forms, limits of insurance, policy endorsements and other terms and conditions provided in this proposal/quote. Any policy coverages, limits of insurance, policy endorsements, coverage specifications, or other terms and conditions that you have requested that are not included in this proposal/quote have not been agreed to by Travelers. Please review this proposal/quote carefully and if you have any questions, please contact your Travelers representative.

This proposal/quote does not amend, or otherwise affect, the provisions of coverage of any resulting insurance policy issued by Travelers. It is not a representation that coverage does or does not exist for any particular claim or loss under any such policy. Coverage depends on the applicable provisions of the actual policy issued, the facts and circumstances involved in the claim or loss and any applicable law.

Please note that changes in the exposures, limits, or coverages may result in changes in rates and/or account pricing. Additionally, due to the expense of processing and servicing this account, in the event this quote is not accepted in its entirety, we reserve the right to reprice and reunderwrite this quote.

The policies will also be subject to all state-mandated endorsements.

At our discretion, we may decide to perform an interim test audit during the upcoming policy period to verify the adequacy of the exposure estimates that have been provided to us. If we decide to perform an interim test audit, a Travelers Auditor will contact the insured at the appropriate time to set up an appointment. The results of any interim test audit that we perform will be shared with you as soon as possible after the audit report has been completed.

As Broker/Agent you will be responsible for being aware of and complying with the various legal requirements associated with countersignature in various jurisdictions covered in the policies.



# Quote Options

QUOTE OPTION	GROSS PREMIUM
EMPLOYMENT PRACTICES LIABILITY - OPTION 2	\$39,790

# Additional Information

## Other Information

Please provide the following information:

- Minimum coverages required to bind: All lines. Our pricing is based on all lines being bound, so if any lines of coverages are not bound, we may need to requote.
- Signed Uninsured/Underinsured Selection/Rejection Form. If the signed forms are not received at time of binding, the policy will be issued with UM/UIM limit equal to the auto liability limit. When the signed forms are received, the policy will be endorsed to amend the limit, if necessary, effective the date the signed forms are received.



# Property coverage form index

**Policy Number** 630-B449201A

## Coverage and amendments

DESCRIPTION	FORM NUMBER
DELUXE PROP COV PART SCHED-SPECIF LIMITS	DX 00 03
TABLE OF CONTENTS - DELUXE PROP COV PART	DX 00 04
NORTH CAROLINA CHANGES	DX 01 18
DELUXE PROP COV PART DECLARATIONS	DX T0 00
DELUXE PROPERTY COVERAGE FORM	DX T1 00
DELUXE BI (AND EE) COVERAGE FORM	DX T1 01
CAUSES OF LOSS-EARTHQUAKE	DX T3 01
CAUSES OF LOSS - BROAD FORM FLOOD	DX T3 02
SPOILAGE COVERAGE EXTENSION	DX T3 15
ADDITIONAL COVERED PROPERTY	DX T3 63
UTILITY SERVICES-DIRECT DAMAGE	DX T3 85
UTILITY SERVICES-TIME ELEMENT	DX T3 86
ELECTRONIC VANDALISM LIMIT & OTHER CHANG	DX T3 98
FEDERAL TERRORISM RISK INSURANCE ACT DIS	DX T4 02
LIMITED SEWER DRAIN BACK-UP COVERAGE	DX T4 45
LAW ENFORCEMENT ANIMALS	DX T4 46
PUBLIC ENTITY PROPERTY EXTENSIONS	DX T4 47
UNINTENTIONAL E&O-FAILURE TO REPORT	DX T4 59
DIGITAL ASSETS EXCLUSIONS	DX T5 21

# Package common coverage form index

**Policy Number** 630-B449201A

## 630 Common coverage and amendments

DESCRIPTION	FORM NUMBER
COMMON DEC	IL T0 02
LOCATION SCHEDULE	IL T0 03
ACTUAL CASH VALUE	IL T0 63
NC CHANGES-CANCELLATION AND NONRENEWAL	IL T2 69
COMMON POLICY CONDITIONS-DELUXE	IL T3 18
EXCLUSION OF CERTAIN COMPUTER LOSSES	IL T3 55
EXCL OF LOSS DUE TO VIRUS OR BACTERIA	IL T3 82
AMNDT COMMON POLICY COND-PROHIBITED COVG	IL T4 12
CAP ON LOSSES FROM CERT ACTS OF TERRORIS	IL T4 14
ADDITIONAL BENEFITS	IL T4 27
PROTECTION OF PROPERTY	IL T4 40
EFFECTIVE TIME CHANGES	IL T9 06
FLOOD POLICYHOLDER NOTICE	PN T0 53
NOTICE INDEPENDENT AGENT AND BROKER COMP	PN T4 54
IMPORTANT NOTICE TO NC POLICYHOLDERS-COL	PN T9 38



# Inland Marine coverage form index

**Policy Number** 630-B449201A

## Coverage and amendments

### Inland Marine

DESCRIPTION	FORM NUMBER
COMMERCIAL INLAND MARINE CONDITIONS	CM 00 01
NORTH CAROLINA CHANGES	CM 01 03
MISC PROPERTY COVERAGE FORM DEC	CM B0 72
CONTRACTORS EQUIPMENT COVERAGE FORM DEC	CM B0 96
CONTRACTORS EQUIPMENT SUPPLEMENTAL DEC	CM B0 97
CONTRACTORS EQUIPMENT DEDUCTIBLE SCHED	CM B0 99
TABLE OF CONTENTS	CM T0 11
MISCELLANEOUS PROPERTY COVERAGE FORM	CM T2 39
CONTRACTORS EQUIPMENT COVERAGE FORM	CM T2 42
FEDERAL TERRORISM RISK INSURANCE ACT DIS	CM T3 98
EARTH MOVEMENT DEDUCTIBLE	CM T7 53
EARTH MVMNT LIMIT-DESCRIBED PROP OR LOCS	CM T7 56
FLOOD DEDUCTIBLE	CM T7 62
FLOOD LIMIT-DESCRIBED PROP OR LOCS	CM T7 66
FLOOD DEDUCTIBLE	CM U3 49
FLOOD LIMITATION-DESC PROP OR LOCS	CM U3 52
EARTH MOVEMENT DEDUCTIBLE	CM U3 65
EM LIMITATION-DESC PROP OR LOCS	CM U3 67
ELECTRONIC VAND LIMITATION & OTHER CHGS	CM U6 17
DIGITAL ASSETS EXCL - DIGITAL CURRENCY	CM U6 41



**Policy Number** 630-B449201A

## Coverage and amendments

DESCRIPTION	FORM NUMBER
GOV'T CRIME COV FORM (DISCOVERY FORM)	CR 00 24
NC CHANGES - LEGAL ACTION AGAINST US	CR 01 01
ADD FAITHFUL PERF OF DUTY COV GOVT EMPL	CR 25 19
GOVERNMENT CRIME COV PART DECLARATIONS	CR T0 22
TABLE OF CONTENTS - GOV'T DISCOVERY FORM	CR T0 29



# Workers Comp coverage form index

**Policy Number**

UB-B4560833

## Coverage and amendments

DESCRIPTION	FORM NUMBER
WORKERS COMPENSATION INFORMATION - PAGE 1	WC 00 00 01 AA
INFORMATION PAGE 2	WC 00 00 01 AB
INFORMATION PAGE SCHEDULE	WC 00 00 01 AC
LISTING OF ENDORSEMENTS	WC 00 00 01 AD
PREMIUM DISCOUNT ENDORSEMENT	WC 00 04 06 A
90-DAY REPORTING REQUIREMENT - NOTIFICATION OF CHANGE IN OWNERSHIP ENDORSEMENT	WC 00 04 14 A
MULTI-STATE PREMIUM DUE DATE ENDORSEMENT	WC 00 04 19 00
CATASTROPHE (OTHER THAN CERTIFIED ACTS OF TERRORISM) PREMIUM ENDORSEMENT	WC 00 04 21 F
TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT DISCLOSURE ENDORSEMENT	WC 00 04 22 C
AUDIT NONCOMPLIANCE CHARGE ENDORSEMENT	WC 00 04 24 00
EXPERIENCE RATING MODIFICATION FACTOR REVISION ENDORSEMENT	WC 00 04 25 00
NORTH CAROLINA AMENDED COVERAGE ENDORSEMENT	WC 32 03 01 D

# Commission summary

COVERAGE	POLICY NUMBER	COMMISSION
DELUXE	630-B449201A	15.00 %
GENERAL LIABILITY	ZLP-51N95397	15.00 %
EMPLOYEE BENEFITS LIABILITY	ZLP-51N95397	15.00 %
INLAND MARINE	630-B449201A	15.00 %
CRIME	630-B449201A	15.00 %
WORKERS COMPENSATION	UB-B4560833	7.50 %
LAW ENFORCEMENT LIABILITY	ZLP-51N95397	15.00 %
PUBLIC ENTITY MANAGEMENT LIABILITY	ZLP-51N95397	15.00 %
PUBLIC ENTITY EMPLOYMENT RELATED PRACTICES LIABILITY	ZLP-51N95397	15.00 %
AUTO LIABILITY		15.00 %
AUTO PHYSICAL DAMAGE		15.00 %
UMBRELLA EXCESS LIABILITY	ZUP-61N93015	15.00 %

**Note:** It is the agent's or broker's responsibility to comply with any applicable laws regarding disclosure to the policyholder of commission or other compensation we pay, if any, in connection with this policy or program.

\* Commission percentage displayed does not apply to any North Carolina Reinsurance Facility loss recoupment surcharge amounts included in the liability premium of the Commercial Auto Policy, if applicable.

## Important Notice Regarding Compensation Disclosure

For information about how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website:

[http://www.travelers.com/w3c/legal/Producer\\_Compensation\\_Disclosure.html](http://www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html)

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Travelers, Enterprise Development, One Tower Square, Hartford, CT 06183.





PRESENTED BY  
**LEGACY INS PARTNERS INC**  
PO BOX 3858  
HICKORY, NC 28603

PROPOSED ON 06/13/2025 FOR  
**CITY OF NEWTON**  
P O BOX 550  
NEWTON, NC 286580550

On behalf of **LEGACY INS PARTNERS INC** and **The Travelers Companies, Inc. and its affiliates**, we appreciate the opportunity to provide **CITY OF NEWTON** with the following policy proposal.



**Travelers Risk Control: Our Expertise is Your Advantage**

Travelers Risk Control is an innovative provider of cost-effective risk management services and products. As one of the largest Risk Control departments in the industry, our scale allows the right resource at the right time to meet customer needs. For over 110 years, our loss prevention professionals have assisted agents, brokers and customers across the country and around the world.

<https://www.travelers.com/risk-control>



**Claim Services:**

Travelers has over 11,000 highly trained Claim professionals located across the U.S. Our local field representatives are supported by teams of dedicated customer service, catastrophe response, legal, medical, investigative, engineering, and large loss experts. Claims can be complex and expensive. We'll help you manage claims to control your total risk-related costs.

<https://www.travelers.com/claims>

# Meet your Travelers team

## General

### Overall Account

Star Atchison-Rice  
Account Executive  
SATCHISO@travelers.com  
678-317-7021

### Policy Services

Zachary Antaya  
Operations Account Specialist  
ZANTAYA@travelers.com  
860-277-9913

To report, ask a question or discuss a claim please call 1-800-238-6225. A Claim Customer Service Representative is available 24 hours a day, 7 days a week to take the first notice of loss or provide assistance on any existing claim.

## Boiler & Machinery Helpful Contacts

Claim Handling	800.238.6225 or 877.784.5329 (fax)
Boiler Inspections	800.425.4119 or <a href="mailto:boilinsp@travelers.com">boilinsp@travelers.com</a>
Underwriting & Account Questions	Your account executive or <a href="mailto:boiler@travelers.com">boiler@travelers.com</a>
Policy Processing & Endorsements	Your account manager or <a href="mailto:boilerse@travelers.com">boilerse@travelers.com</a>
Learn more about Travelers Boiler & Machinery	<a href="https://travelers.com/business-insurance/boiler-machinery">travelers.com/business-insurance/boiler-machinery</a>

# Thank you!

Thank you for this opportunity to provide equipment breakdown insurance protection for your customer. We appreciate your consideration and loyalty to Travelers.

## Why Travelers is the smart choice

Travelers Boiler & Machinery offers industry-leading equipment breakdown coverage and services that will flex with each industry and the risks associated with technology advancements.

**EnergyMax 21<sup>SM</sup>** – broad coverage that protects businesses of all shapes and sizes against direct and indirect losses to:

- Mechanical and Electrical Equipment
- Boiler & Pressure Vessels
- Air Conditioning & Refrigeration Equipment
- Production Machinery
- Smart Devices Including IoT (Internet of Things)
- Computer & Communication Systems
- Micro-Circuitry Electronics

## Defined Terms

If these terms are used elsewhere in this Quote Letter, the following definitions shall apply:

“Diagnostic Equipment” means any machine, vessel or apparatus used solely for testing, research, diagnosis, medical, surgical, therapeutic, dental or pathological purposes.

“Production Machines” means any machine or apparatus that processes or produces a product, or part of a product, intended for eventual sale, including all component parts of such machine or apparatus and any other equipment used solely with such machine or apparatus. However, “Production Machines” does not include any boiler, or fired or unfired pressure vessel.

“Power Generating Equipment” means any pressure, mechanical or electrical equipment, machinery or apparatus that is used in, or associated with, the generation of electric power. “Power Generating Equipment” does not mean any equipment, machinery or apparatus with less than or equal to 1000 kilowatts of capacity, which is used solely to generate emergency power.

# Your policies

## Energy Max 21 Equipment Breakdown Protection

Policy Number	BME1-B5172613-TIL-25
Effective	07/01/2025 – 07/01/2026
Insuring Company	TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA

# Locations schedule

## BME1 - B5172613 – Energy Max 21 Equipment Breakdown Protection

Per schedule on file with the company



# Boiler & Machinery coverage premium summary

## Basis of coverage plan

Building + Contents Value	\$140,281,308
Business Income Value	\$2,000,000
Inventory/Stock Value	
Occupancy	ELECTRICITY, GENERATING-PUBLIC UTIL

## Coverage

	LIMITS OF INSURANCE
Total Limit per Breakdown	\$100,000,000
Property Damage(PD)	Included in Total Limit per Breakdown
(Includes micro-circuitry electronics)	

## Coverage extensions

Business Income Coverage Extension (BI)	\$2,000,000
Coinurance Percentage	100%
Extra Expense Coverage Extension (EE)	Included in BI Limit
Spoilage Damage Coverage Extension – including Utility Interruption-Spoilage (SD)	\$25,000
Utility Interruption-Spoilage coverage applies only if the interruption lasts at least (waiting period):	24 hour(s)
Utility Interruption-Time Element Coverage Extension (UI-TE)	\$100,000
Utility Interruption-Time Element coverage applies only if the interruption lasts at least (waiting period):	24 hour(s)
(Includes interruption of Cloud Services and Data Restoration)	
Civil Authority Coverage Extension	100 Mile(s) 3 Week(s)
“Dependent Property” Coverage Extension	Not Covered
“Dependent Property” Locations	
“Electronic Data” Or “Media” Coverage Extension	
“Electronic Data” Or “Media” Stored At “Covered Premises”:	\$50,000
“Electronic Data” Or “Media” Stored With “Electronic Data Storage Provider”:	Included With “Electronic Data” Or “Media” Stored At “Covered Premises”
Errors And Omissions Coverage Extension	\$25,000
Expediting Expense Coverage Extension	\$25,000
Extended Period of Restoration Coverage Extension	30 Day(s)
“Fungus”, Wet Rot And Dry Rot Coverage Extension	
Property Damage:	\$15,000
Business Income Or Extra Expense:	30 Day(s)
Green Enhancements Coverage Extension	
Property Damage Percentage Factor:	5%
Property Damage Additional Costs Limit of Insurance:	\$25,000
Business Income Or Extra Expense Additional Number of Days:	30 Day(s)
Ingress Or Egress Coverage Extension	1 Day(s)
Newly Acquired Locations Coverage Extension	\$1,000,000
Number of Days of Coverage:	90 Day(s)
Off-Premises Transportable Equipment Coverage Extension	\$25,000
Ordinance Or Law (Including Demolition And Increased Cost Of Construction) Coverage Extension	
Undamaged Property:	\$250,000
Demolition:	Included With Undamaged Property
Increased Cost Of Construction:	Included With Undamaged Property

## Limitations

COVERAGES	LIMITS OF INSURANCE
Hazardous Substance Limitation	\$25,000
Refrigerant Contamination Limitation	\$25,000
Water Damage Limitation	\$25,000
Drying Out Limit Of Insurance	\$25,000
Other	

## Deductible

COVERAGES	DEDUCTIBLE AMOUNT
Combined Deductible	Not Applicable
Property Damage (PD)	
Business Income (BI)	24 Hours
Extra Expense (EE)	Included in BI Deductible
Spoilage Damage (SD)	\$10,000
Utility Interruption-Time Element (UI-TE)	24 Hours
Dependent Property	Not Covered
Refrigerant Contamination	Included in PD Deductible
Other	Property Damage Deductible: \$10,000 except; \$25,000 for Deep Wells/Lift Stations \$100,000 for Utility Operations (including water distribution and wastewater/sewerage), Substations, and Engine- Generator Sets \$5/Maximum Rated kVA, and \$100,000 Minimum for Transformers at any covered premises

## Additional coverage extensions/restrictions/conditions

Number Of Days For Notice of Cancellation	90 Days, except 10 days for non-payment of premium, subject to state regulations
Diagnostic Equipment	Covered
Electronic Vandalism	Excluded
Joint Loss Agreement	Included
New Generation Valuation – Up to additional 50%	Included
Ordinary Payroll	Excluded
Production Machines	Covered
Specified Perils Elimination Endorsement EB T3 18	Included
Valuation	Repair/Replacement Included Except ACV: See EB T3 19.

### EB T3 19 – Actual Cash Value

Covered Premises	ALL "COVERED PREMISES"
Description Cov Prop	ALL "COVERED PROPERTY", "COVERED EQUIPMENT"
Covered Premises	CONT
Description Of Cov Prop	AND PROPERTY 25 YEARS OF AGE AND OLDER



# Federal Terrorism Risk Insurance Act Disclosure

The Federal Terrorism Risk Insurance Act of 2002 as amended ("TRIA") establishes a program under which the Federal Government may partially reimburse "Insured Losses" (as defined in TRIA) caused by "Acts Of Terrorism" (as defined in TRIA). "Act Of Terrorism" is defined in Section 102(1) of TRIA to mean any act that is certified by the Secretary of the Treasury – in consultation with the Secretary of Homeland Security and the Attorney General of the United States – to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States Mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

The Federal Government's share of compensation for such Insured Losses is 80% of the amount of such Insured Losses in excess of each Insurer's "Insurer Deductible" (as defined in TRIA), subject to the "Program Trigger" (as defined in TRIA).

In no event, however, will the Federal Government be required to pay any portion of the amount of such Insured Losses occurring in a calendar year that in the aggregate exceeds \$100 billion, nor will any Insurer be required to pay any portion of such amount provided that such Insurer has met its Insurer Deductible. Therefore, if such Insured Losses occurring in a calendar year exceed \$100 billion in the aggregate, the amount of any payments by the Federal Government and any coverage provided by this policy for losses caused by Acts Of Terrorism may be reduced.

For any Workers Compensation and Employers Liability coverage provided by this policy, the charge for such Insured Losses is an additional premium, which is reflected in any Workers Compensation and Employers Liability premium schedule included in this proposal or, if this proposal does not include such premium schedule, is reflected in a Workers Compensation premium summary included with this proposal. Note: terrorism premium charges listed in any such premium schedule or summary are subject to change at any time based on state regulatory action.

For any coverage provided by this policy, other than any Workers Compensation and Employers Liability coverage, that applies to such Insured Losses, the charge for such Insured Losses is included in the premium for such coverage. The charge for such Insured Losses that has been included for any such coverage is the percentage of the premium for such coverage indicated below and does not include any charge for the portion of such Insured Losses covered by the Federal Government under TRIA. Note: terrorism premium charges shown below are subject to change at any time based on state regulatory action.

The charge for such Insured Losses (for any coverage other than any Workers Compensation and Employers Liability coverage) is:

- 7% of either your total Commercial Property Coverage Part or your total Deluxe Property Coverage Part premium, if applicable, if your primary location is in a Designated City (as listed below).
- 3% of either your total Commercial Property Coverage Part or your total Deluxe Property Coverage Part premium, if applicable, if your primary location is not in a Designated City (as listed below).
- 4% of your total Businessowners Coverage Part premium, if applicable, if your primary location is in a Designated City (as listed below).
- 2% of your total Businessowners Coverage Part premium, if applicable, if your primary location is not in a Designated City (as listed below).
- 1% of your total Commercial Inland Marine Coverage Part premium if applicable.
- 1% of your total Boiler and Machinery or Equipment Breakdown Coverage Part if applicable.
- 1% of your total premium for any Commercial Liability Coverage included in this policy that is subject to the Federal Terrorism Risk Insurance Act of 2002 as amended.
- 1% of your total premium for any Commercial Ocean Marine Coverage Part premium if applicable.



Designated Cities are:			
<b>Albuquerque, NM</b>	<b>El Paso, TX</b>	<b>Miami, FL</b>	<b>San Antonio, TX</b>
<b>Atlanta, GA</b>	<b>Fort Worth, TX</b>	<b>Milwaukee, WI</b>	<b>San Diego, CA</b>
<b>Austin, TX</b>	<b>Fresno, CA</b>	<b>Minneapolis, MN</b>	<b>San Francisco, CA</b>
<b>Baltimore, MD</b>	<b>Honolulu, HI</b>	<b>Nashville-Davidson, TN</b>	<b>San Jose, CA</b>
<b>Boston, MA</b>	<b>Houston, TX</b>	<b>New Orleans, LA</b>	<b>Seattle, WA</b>
<b>Charlotte, NC</b>	<b>Indianapolis, IN</b>	<b>New York, NY</b>	<b>St. Louis, MO</b>
<b>Chicago, IL</b>	<b>Jacksonville, FL</b>	<b>Oakland, CA</b>	<b>Tucson, AZ</b>
<b>Cleveland, OH</b>	<b>Kansas City, MO</b>	<b>Oklahoma City, OK</b>	<b>Tulsa, OK</b>
<b>Colorado Springs, CO</b>	<b>Las Vegas, NV</b>	<b>Omaha, NE</b>	<b>Virginia Beach, VA</b>
<b>Columbus, OH</b>	<b>Long Beach, CA</b>	<b>Philadelphia, PA</b>	<b>Washington, DC</b>
<b>Dallas, TX</b>	<b>Los Angeles, CA</b>	<b>Phoenix, AZ</b>	<b>Wichita, KS</b>
<b>Denver, CO</b>	<b>Memphis, TN</b>	<b>Portland, OR</b>	
<b>Detroit, MI</b>	<b>Mesa, AZ</b>	<b>Sacramento, CA</b>	

# Account summary

## Premium summary

COVERAGE	POLICY NUMBER	PREMIUM
BOILER	BME1-B5172613	\$30,590
Total		\$30,590

**Note:** The estimated premium shown above may differ from actual premiums shown on the policies and installment bills due to installment charges, estimated taxes and surcharges, as well as rounding.

## Payment plan

To Be Determined  
Bill Payment Options can be found at: [Travelers.com/AutoPay](https://Travelers.com/AutoPay)

**Note:** The amount of each installment will be reflected on your policy invoicing.

# Account summary

## Disclosure

Unless accepted, the offer(s) of insurance contained in this proposal expire(s) automatically sixty (60) days after the proposal date referenced on the cover page, or the proposed effective date if earlier. This proposal is not a binding contract of insurance. If you have questions regarding this proposal, please contact your Travelers Representative.

The following outlines the coverage forms, limits of insurance, policy endorsements and other terms and conditions provided in this proposal/quote. Any policy coverages, limits of insurance, policy endorsements, coverage specifications, or other terms and conditions that you have requested that are not included in this proposal/quote have not been agreed to by Travelers. Please review this proposal/quote carefully and if you have any questions, please contact your Travelers representative.

This proposal/quote does not amend, or otherwise affect, the provisions of coverage of any resulting insurance policy issued by Travelers. It is not a representation that coverage does or does not exist for any particular claim or loss under any such policy. Coverage depends on the applicable provisions of the actual policy issued, the facts and circumstances involved in the claim or loss and any applicable law.

Please note that changes in the exposures, limits, or coverages may result in changes in rates and/or account pricing. Additionally, due to the expense of processing and servicing this account, in the event this quote is not accepted in its entirety, we reserve the right to reprice and reunderwrite this quote.

The policies will also be subject to all state-mandated endorsements.

At our discretion, we may decide to perform an interim test audit during the upcoming policy period to verify the adequacy of the exposure estimates that have been provided to us. If we decide to perform an interim test audit, a Travelers Auditor will contact the insured at the appropriate time to set up an appointment. The results of any interim test audit that we perform will be shared with you as soon as possible after the audit report has been completed.

As Broker/Agent you will be responsible for being aware of and complying with the various legal requirements associated with countersignature in various jurisdictions covered in the policies.

# Package common coverage form index

**Policy Number**

BME1-B5172613

## BME1 Common coverage and amendments

DESCRIPTION	FORM NUMBER
NC CHANGES-CANCELLATION AND NONRENEWAL	IL 02 69
COMMON POLICY CONDITIONS	IL T0 01
COMMON DEC	IL T0 02
LOCATION SCHEDULE	IL T0 03
ACTUAL CASH VALUE	IL T0 63
AMNDT COMMON POLICY COND-PROHIBITED COVG	IL T4 12
CAP ON LOSSES FROM CERT ACTS OF TERRORIS	IL T4 14
ADDITIONAL BENEFITS	IL T4 27
ENGINEERING AND CLAIM SERVICES	PN BM 17
NORTH CAROLINA POLICYHOLDER NOTICE	PN EB 08
JURISDICTIONAL INSP & CONTACT INFO REQ	PN T1 89
NOTICE INDEPENDENT AGENT AND BROKER COMP	PN T4 54



**Policy Number** BME1-B5172613

## Coverage and amendments

DESCRIPTION	FORM NUMBER
FEDERAL TERRORISM RISK INSURANCE ACT DIS	BM T5 94
GENERAL PURPOSE ENDORSEMENT	BM T8 00
ENERGYMAX21 EQUIP BREAKDOWN DEC	EB T0 00
ENERGYMAX 21 EQUIP BREAKDOWN PRO TOC	EB T0 01
EQUIPMENT BREAKDOWN PROTECTION	EB T1 00
SPECIFIED PERILS EXCLUSION	EB T3 18
ACTUAL CASH VALUE - PREDETERMINED DEPREC	EB T3 19
BURIED ELECTRICAL EQUIPMENT EXCLUSION	EB T3 23
PROPERTY NOT COVERED	EB T3 33
POWER GENERATING EQUIP CONTRACT EXCL	EB T3 47
COVERED EQUIPMENT INSTALLATION EXCLUSION	EB T3 60
ORDINARY PAYROLL EXCLUSION	EB T3 77
ELECTRONIC VANDALISM EXCLUSION	EB T4 47
SHIPLOADER AND BARGE LOADER EXCLUSION	EB T4 49
DIGITAL ASSETS EXCL	EB T4 50
NORTH CAROLINA CHANGES	EB T9 17

# Commission summary

COVERAGE	POLICY NUMBER	COMMISSION
BOILER	BME1-B5172613	15.00 %

**Note:** *It is the agent’s or broker’s responsibility to comply with any applicable laws regarding disclosure to the policyholder of commission or other compensation we pay, if any, in connection with this policy or program.*

\* Commission percentage displayed does not apply to any North Carolina Reinsurance Facility loss recoupment surcharge amounts included in the liability premium of the Commercial Auto Policy, if applicable.

## Important Notice Regarding Compensation Disclosure

For information about how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website:

[http://www.travelers.com/w3c/legal/Producer\\_Compensation\\_Disclosure.html](http://www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html)

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Travelers, Enterprise Development, One Tower Square, Hartford, CT 06183.