



Loss Run Report

Report Date: 02/18/2020

Report period requested: 5 Years

This Loss Run report presents claims associated with each applicable coverage OR may indicate that no claim has been reported. If you have questions regarding this report, please contact your underwriter. The report is based on data available on or about 2/14/2020.

The report is filtered for the following coverages: CRIME

Agent: GALLAGHERIA JIRMS OCCW19

Coverage: CRIME

Policy	Insured	Cov Eff Date	Cov Exp Date	Notice Date	Claim #	Claimant Name	Loss Paid	Expense Paid	Incurred	Claim Type	Status
106129486	NEW HANOVER COUNTY AIRPORT AUTHORITY	7/1/2019	7/1/2020			No Claims					
106129486	NEW HANOVER COUNTY AIRPORT AUTHORITY	7/1/2018	7/1/2019			No Claims					
106129486	NEW HANOVER COUNTY AIRPORT AUTHORITY	7/1/2017	7/1/2018			No Claims					
106129486	NEW HANOVER COUNTY AIRPORT AUTHORITY	7/1/2016	7/1/2017			No Claims					
106129486	NEW HANOVER COUNTY AIRPORT AUTHORITY	7/1/2015	7/1/2016			No Claims					
106129486	NEW HANOVER COUNTY AIRPORT AUTHORITY	7/1/2014	7/1/2015			No Claims					

NEW HANOVER COUNTY AIRPORT
Policy Number(s): 8E146593



Detail Loss Report

Losses From: 07/01/2015 To 07/01/2020

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
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Line of Insurance: P - PROPERTY

Policy Eff Date: 07/01/2017

Policy Number: 8E146593

Policy Number Other: <Blank>

NEW HANOVER COUNTY AIRPO 108 FR E8F7100 03/26/2018 03/28/2018 10/22/2018 C
 GEORGE KENNETH SCOTT - (IND) - IV WAS PULLING OUT OF BAY AND MADE A LEFT TURN BEFORE CLEARING BUILDING AND COLLIDED WITH THE CONCRETE BOLLARD OUTSIDE OF BAY DOOR. VEHICLE IS DRIVEABLE BUT DUE TO DAMAGE WITH HOSE MAY NOT BE FUNCTIONAL

Subtotals for Policy Number Other : <Blank>

Total Claim Count: 1

Subtotals for Policy Number : 8E146593

Total Claim Count: 1

Subtotals for Policy Eff Date : 07/01/2017

Total Claim Count: 1

Subtotals for Line of Insurance : P

Total Claim Count: 1

Report Grand Totals

Total Claim Count: 1

Inc:	\$40,939.00	\$40,939.00	\$0.00	\$0.00
Pd:	\$40,939.40	\$40,939.40	\$0.00	\$0.00
O/S:	\$0.00	\$0.00	\$0.00	\$0.00

Inc:	\$40,939.00	\$40,939.00	\$0.00	\$0.00
Pd:	\$40,939.40	\$40,939.40	\$0.00	\$0.00
O/S:	\$0.00	\$0.00	\$0.00	\$0.00

NEW HANOVER COUNTY AIRPORT
Policy Number(s): 8E146593



Detail Loss Report

Losses From: 07/01/2015 To 07/01/2020

Report Parameters

Report Name: Detail Loss
Losses From: 07/01/2015 To 07/01/2020

Policy Number(s): 8E146593

- Sort Name
1. Line of Insurance
2. Policy Eff Date
3. Policy Number
4. Policy Number Other

- Sort Label
Line of Insurance
Policy Eff Date
Policy Number
Policy Number Other

- Sorts
Subtotal
Y
Y
Y
Y

- Page Break
N
N
N
N

Limiting Statements

Large Loss Limiting

Drill Down Limiting Criteria

NEW HANOVER COUNTY AIRPORT AUT
Policy Number(s): 2N998717



Detail Loss Report

Losses From: 07/01/2019 To 07/01/2020

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
No losses were found based on report selection criteria											

NEW HANOVER COUNTY AIRPORT AUT
Policy Number(s): 2N998717

TRAVELERS 

Detail Loss Report

Losses From: 07/01/2019 To 07/01/2020

Report Parameters

Report Name: Detail Loss
Losses From: 07/01/2019 To 07/01/2020

Policy Number(s): 2N998717

Sort Name	SortLabel	Sorts	Subtotal	Page Break
1. Line of Insurance	Line of Insurance	Y	N	
2. Policy Eff Date	Policy Eff Date	Y	N	
3. Policy Number	Policy Number	Y	N	
4. Policy Number Other	Policy Number Other	Y	N	
5. Subline of Insurance	Subline of Insurance	Y	N	

Limiting Statements

Large Loss Limiting

Drill Down Limiting Criteria

NEW HANOVER COUNTY AIRPORT
Policy Number(s): 7E745900

TRAVELERS 

Detail Loss Report

Losses From: 07/01/2015 To 07/01/2019

Claimant	Adj Off	FP	Claim Number	Accident Date	Notice Date	Close Date	O/C	Total	Claim	Medical	Expense
No losses were found based on report selection criteria											

NEW HANOVER COUNTY AIRPORT
Policy Number(s): 7E745900



Detail Loss Report

Losses From: 07/01/2015 To 07/01/2019

Report Parameters

Report Name: Detail Loss
Losses From: 07/01/2015 To 07/01/2019

Policy Number(s): 7E745900

Sort Name
1. Line of Insurance
2. Policy Eff Date
3. Policy Number
4. Policy Number Other
5. Subline of Insurance

Sort Label
Line of Insurance
Policy Eff Date
Policy Number
Policy Number Other
Subline of Insurance

Sorts
Subtotal
Y
N
Y
N
Y
N
Y
N

Limiting Statements

Large Loss Limiting

Drill Down Limiting Criteria



Policy Loss Report
NEW HANOVER COUNTY AIRPORT
OMH-1439995

07/01/2019 to 07/01/2020										0 Claim Count	\$0.00 Total for Policy Period
Policy Period	Claim Number	Loss Date	Loss State	Report Date	Claimant Name	Claim Adjuster Name	Loss Description	Claim Status	Total Incurred		Total Incurred Details
07/01/2019 to 07/01/2020	No Losses									\$0.00	Total for Policy Period
07/01/2018 to 07/01/2019	0 Claim Count										
Policy Period	Claim Number	Loss Date	Loss State	Report Date	Claimant Name	Claim Adjuster Name	Loss Description	Claim Status	Total Incurred		Total Incurred Details
07/01/2018 to 07/01/2019	No Losses										
07/01/2017 to 07/01/2018	0 Claim Count									\$0.00	Total for Policy Period
Policy Period	Claim Number	Loss Date	Loss State	Report Date	Claimant Name	Claim Adjuster Name	Loss Description	Claim Status	Total Incurred		Total Incurred Details
07/01/2017 to 07/01/2018	No Losses										
07/01/2016 to 07/01/2017	0 Claim Count									\$0.00	Total for Policy Period
Policy Period	Claim Number	Loss Date	Loss State	Report Date	Claimant Name	Claim Adjuster Name	Loss Description	Claim Status	Total Incurred		Total Incurred Details
07/01/2016 to 07/01/2017	No Losses										
07/01/2015 to 07/01/2016	0 Claim Count									\$0.00	Total for Policy Period
Policy Period	Claim Number	Loss Date	Loss State	Report Date	Claimant Name	Claim Adjuster Name	Loss Description	Claim Status	Total Incurred		Total Incurred Details
07/01/2015 to 07/01/2016	No Losses										
0 Total Claim Count										\$0.00	Total For Policy

*****Confidential and Proprietary*****

Berkshire Hathaway GUARD Insurance Companies WC Loss Run
for
New Hanover County Airport Authority
Policy Number: NEWC997607

Policy Period: 07/01/2018 - 07/01/2019

Agency: UNITED STATES AVIATION UNDERWRITERS, INC.

Report Date: 02/19/2020

Losers as of: 02/19/2020

Claim Number	Claim Number	Claim Status	Date of loss Received	Pay Class Challant Status	Lost Time? Employee Location	Medical	Indemnity	Expense	Total
Injury	Accident Type Description	Recovery Status							
NEWC997607-001	09/14/2018	Med Only	0021	Paid: Outstanding: Incurred:	1,985.21 0.00 0.00	2,456.47 0.00 0.00	115.05 0.00 0.00	4,956.73 0.00 0.00	4,956.73
NEWC997607-002	10/15/2018	7403NC	CLOSED						
Stark Keighon	11/29/2018								
Dan Hohal									
Hand - Contusion									
CAUGHT IN OR BETWEEN - Miscellaneous									
NEWC997607-003	11/27/2018	Lost Time	0021						
Altenczy, Jeffrey	11/28/2018	7403NC	OPEN						
Ryan Brozena									
Jessica Hooper	03/11/2019								
Wrist - Contusion									
STRIKE AGAINST/STEP ON - Stationary Object									
NEWC997607-004	05/16/2019	Lost Time	0021	Paid: Outstanding: Incurred:	19,034.59 5,965.41 25,000.00	38,721.75 7,594.50 46,314.25	1,211.68 6,288.32 7,580.00	58,968.02 19,846.23 78,814.25	58,968.02
Sublett, James	05/22/2019	7403NC	CLOSED						
Katlyn Donnelly	10/28/2019								
Ankle - Sprain									
MOTOR VEHICLE - Miscellaneous									
NEWC997607-005	06/07/2019	Med Only	0021	Paid: Outstanding: Incurred:	2,570.03 0.00 1,841.12	1,813.33 0.00 0.00	177.74 0.00 11.80	2,931.10 0.00 1,832.92	2,931.10
Kelly, James	06/13/2019	7403NC	CLOSED						
Andrea Arzokane	12/15/2019								
Hand - Electric Shock									
MISCELLANEOUS CAUSES - Non-Physical Cause of Injury									

*****Policy Summary*****

Berkshire Hathaway GUARD Insurance Companies WC Loss Run Summary Sheet for NEWC997607

Open/Closed	Med/Ind	Medical	Indemnity	Expense	Total
Total Open Claims: 1	Med Only: 2	Total Paid: 25,430.95	41,761.55	1,516.27	68,708.77
Total Closed Claims: 4	Loss Time: 3	Total Outstanding: 5,965.41	7,592.50	6,288.32	19,846.23
		Total Incurred: 31,396.36	49,354.05	7,804.59	88,555.00

*****Total for All Policies*****

Policy Period: 07/01/2018 - 07/01/2019

Report Date: 02/19/2020

**INJURY FREQUENCY
BY CAUSE OF LOSS AT**

New Hanover County Airport Authority

Policy Number: NEWC997607

Location #: 002L
 Name: New Hanover County Airport Authority
 Address: 1740 Airport Blvd, Wilmington, NC 28405-8075

Cause Of Injury / Nature of Injury	Body Part	Number of Injuries	Cost Attributed
CAUGHT IN OR BETWEEN - Miscellaneous - Collision	Hand	1	0.00
FALL OR SLIP INJURY - Slipped, Did not Fall - Sprain	Knee	1	2,931.10

Injury Total:	1	2,931.10
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MISCELLANEOUS CAUSES - Non-Physical Cause of Injury: Electric Shock	Hand	1	1,852.92
MOTOR VEHICLE - Miscellaneous - Sprain	Ankle	1	78,814.25

Injury Total:	1	78,814.25
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STRIKE AGAINST/STEP ON - Stationary Object - Collision	Wrist	1	4,956.73
Location # 002L Total:		5	88,555.00

Location Total:		5	88,555.00
Policy Total:		5	88,555.00

**INJURY FREQUENCY
BY BODY PART AT**

New Hanover County Airport Authority

Policy Number: NEWC997607

Report Date: 02/19/2020

Body Part	Number of Injuries	Cost Attributed
Hand	2	1,852.92
Wrist	1	4,956.73
Ankle	1	78,814.25
Knee	1	2,931.10
Location Total:	5	88,555.00
POLICY TOTAL:	5	88,555.00

*****Confidential and Proprietary*****

Berkshire Hathaway GUARD Insurance Companies WC Loss Run

for
New Hanover County Airport Authority

Policy Number: NEWC030132

Policy Period: 07/01/2019 - 07/01/2020

Agency: UNITED STATES AVIATION UNDERWRITERS, INC.

Report Date: 02/19/2020

Losses as of: 02/19/2020

Claim	Claimant	Accident Type	Date of Loss Received	Lost Time?	Paid:	Medical	Indemnity	Expense	Total
	Adjustor Email	Description		Pay Class	Outstanding:				
INWC030132-001	Swerson, Tangle	Shoulder(s) - Sprain	08/15/2019	Lost Time	0021	3,258.27	2,161.72	252.26	5,672.25
	John Kreuzer			7403NC	OPEN	1,741.73	2,194.28	147.74	4,383.75
		STRAIN OR INJURY BY - Lifting				5,000.00	4,656.00	400.00	10,656.00
INWC030132-002	Solito, Michael		08/29/2019	Med Only	0021	0.00	0.00	0.00	0.00
	Deborah Martinez		09/03/2019	7403NC	CLOSED	0.00	0.00	0.00	0.00
		Hand - Burn				0.00	0.00	0.00	0.00
		BURN/SCALD, HEAT/COLD EXPOSURE, Steam/Hot Fluids							
INWC030132-003	Batten, John		01/07/2020	Med Only	0021	0.00	0.00	0.00	0.00
	Deborah Martinez		01/09/2020	7403NC	OPEN	1,000.00	0.00	125.00	1,125.00
		Hand - Laceration							
		CUT/PUNCTURE/ESCAPE BY - Miscellaneous							
INWC030132-004	Drew, Kyla		01/02/2020	Med Only	0021	0.00	0.00	0.00	0.00
	Deborah Martinez		01/09/2020	7403NC	OPEN	1,000.00	0.00	125.00	1,125.00
		Other Facial Soft Tissue - Laceration							
		RUBBED/ABRADED BY - Rubbed or Abraded, NOC							

*****Policy Summary*****

Berkshire Hathaway GUARD Insurance Companies WC Loss Run Summary Sheet for NEWC030132									
Open/Closed	Med/Ind	Total Paid:	Medical	Indemnity	Expense	Total	Med/Ind	Total Paid:	Medical
Total Open Claims: 3	Med Only: 3	3,258.27	2,161.72	252.26	5,672.25		Total Closed Claims: 1	3,741.73	2,194.28
Total Closed Claims: 1	Less Time: 1	3,741.73	397.74	6,313.75			Total Incurred:	4,056.00	650.00
		7,000.00	12,306.00						

*****Total for All Policies*****

Open/Closed	Med/Ind	Total Paid:	Medical	Indemnity	Expense	Total
Total Open Claims: 3	Med Only: 3	3,258.27	2,161.72	252.26	5,672.25	
Total Closed Claims: 1	Less Time: 1	3,741.73	2,194.28	397.74	6,633.75	
		7,000.00	4,656.00	650.00	12,306.00	

**INJURY FREQUENCY
BY CAUSE OF LOSS AT
New Hanover County Airport Authority
Policy Number: NEWC030132**

Policy Period: 07/01/2019 - 07/01/2020

Report Date: 02/19/2020

Location #: 002L
 Name: New Hanover County Airport Authority
 Address: 1740 Airport Blvd, Wilmington, NC 28405-3075

Cause Of Injury / Nature of Injury	Body Part	Number of Injuries	Cost Attributed
BURN/SCALD, HEAT/COLD	Hand	1	0.00
EXPOSURE - Steam/Hot Fluids - Burn			
CUT/PUNCTURE/SCRAPES BY - Miscellaneous - Laceration	Hand	1	1,125.00
RUBBED/ABRADED BY - Rubbed or Abraded NOC - Laceration	Other Facial Soft Tissue	1	1,125.00
STRAIN OR INJURY BY - Lifting - Sprain	Shoulder(s)	1	10,056.00
Location # 002L Total:		4	12,306.00
Policy Total:		4	12,306.00

**INJURY FREQUENCY
BY BODY PART AT**
New Hanover County Airport Authority
Policy Number: NEWC030132

Policy Period: 07/01/2019 - 07/01/2020

Report Date: 02/19/2020

Location #: 002L
 Address: 1740 Airport Blvd, Wilmington, NC 28405-3075

Body Part	Number of Injuries	Cost Attributed
Shoulder(s)	1	10,056.00
Hand	2	1,125.00
Other/Facial Soft Tissue	1	1,125.00

Location Total:

LOCATION TOTAL:
4
12,306.00

POLICY TOTAL:
4
12,306.00

Loss Run Dated - 01/31/2020

New Hanover County Airport Authority**Account No: 282940**

Policy Term: 07/01/2014 -- 07/01/2015

Policy Numbers: 10T029659-01858-14 7DA3CM0001817-00 AMP7525569-00 AMR-38856 CPP1013080 HAN-11840-00 LEX-084296664-00 MSP-17701 USI-11838-00

Broker Company: AmWins Brokerage

No Claims found for this policy

New Hanover County Airport Authority**Account No: 332926**

Policy Term: 07/01/2015 -- 07/01/2016

Policy Numbers: 10T029659-01858-15 7DA3CM0001817-01 AMP7525569-01 AMR-38856-01 CPP1013080-01 HAN-11840-01 LEX-084296664-01 MSP-17701-01 USI-11838-01

Broker Company: AmWins Brokerage

No Claims found for this policy

This is not to be construed as an absolute statement of claims, but as a history located for this insured with the listed policy numbers. The Amrisc, LLC loss runs do not necessarily reflect all new claims, transactions or changes applicable within the last 30 days.

Loss Run Dated - 01/31/2020

New Hanover County Airport Authority

Account No: 399357

Policy Term: 07/01/2016 -- 07/01/2017

Policy Numbers: 10T029659-01858-16-01 7DA3CM0001817-02 AMP7525569-02 AMR-38856-02 CPP1013080-02
HAN-11840-02 LEX-084296664-02 MSP-17701-02 USI-11838-02

Broker Company: AmWins Brokerage

No Claims found for this policy

New Hanover County Airport Authority

Account No: 475303

Policy Term: 07/01/2017 -- 07/01/2018

Policy Numbers: 10T029659-01858-17-02 7DA3CM0001817-03 AMP7525569-03 AMR-38856-03 CPP1013080-03
HAN-11840-03 LEX-084296664-03 MSP-17701-03 ORAMPR002407-00 USI-11838-03

Broker Company: AmWins Brokerage

Date Of Loss	Status	Loss Paid	Expense Paid	Loss Reserve	Expense Reserve	Total Incurred
2/28/2018	CLOSED	\$0.00	\$5,301.54	\$0.00	\$0.00	\$5,301.54
Claim Type:	Property Claim					
Loss Type:	Toxic Mold					
Loss Description:	Mold found throughout the offices of building that is leased out to Wilmington Business Development. Tenants are having					
Location:	OFFICE BUILDING - C20					
CLM25396	4151456					
Policy Total:	\$0.00	\$5,301.54	\$0.00	\$0.00		\$5,301.54

This is not to be construed as an absolute statement of claims, but as a history located for this insured with the listed policy numbers. The Amrisc, LLC loss runs do not necessarily reflect all new claims, transactions or changes applicable within the last 30 days.

New Hanover County Airport Authority**Account No: 574093**

Policy Term: 07/01/2018 -- 07/01/2019

Policy Numbers: 10T029659-01858-18-03 AMP7525569-04 AMR-38856-04 CPP1013080-04 HAN-11840-04 LEX-084296664-04 MSP-17701-04 ORAMPR002407-01 SSI-12616-00 USI-11838-04

Broker Company: AmWins Brokerage

Date Of Loss	Status	Loss Paid	Expense Paid	Loss Reserve	Expense Reserve	Total Incurred
9/14/2018	OPEN	\$339,638.27	\$38,571.37	\$68,571.71	\$8,928.63	\$455,709.98
Claim Type:	Property Claim					
Loss Type:	Wind; Named Storm					
Loss Description:	Significant water intrusion due to roof damage, main terminal . Possible damage to other builders that we have not been					
Location:	MAIN TERMINAL - C1					
CLM27021	4156092					
Policy Total:		\$339,638.27	\$38,571.37	\$68,571.71	\$8,928.63	\$455,709.98

New Hanover County Airport Authority**Account No: 657709**

Policy Term: 07/01/2019 -- 07/01/2020

Policy Numbers: 10T029659-01858-19-04 AMP7525569-05 AMR-38856-05 CPP1013080-05 HAN-11840-05 LEX-084296664-05 MSP-17701-05 ORAMPR002407-02 SSI-12616-01 USI-11838-05

Broker Company: AmWins Brokerage

Date Of Loss	Status	Loss Paid	Expense Paid	Loss Reserve	Expense Reserve	Total Incurred
9/6/2019	CLOSED	\$7,600.36	\$5,535.89	\$0.00	\$0.00	\$13,136.25
Claim Type:	Property Claim					
Loss Type:	Wind; Named Storm					
Loss Description:	Hurricane Dorian // Water damage was reported for the main terminal.					
Location:	MAIN TERMINAL - C1					
CLM30638	4165426					
Policy Total:		\$7,600.36	\$5,535.89	\$0.00	\$0.00	\$13,136.25

	Loss Paid	Expense Paid	Loss Reserve	Expense Reserve	Total Incurred
Total All Years:	\$347,238.63	\$49,408.80	\$68,571.71	\$8,928.63	\$474,147.77

This is not to be construed as an absolute statement of claims, but as a history located for this insured with the listed policy numbers. The Amrisc, LLC loss runs do not necessarily reflect all new claims, transactions or changes applicable within the last 30 days.

Loss Run Dated - 01/31/2020

Print Date : 02/19/2020

New Hanover County Airport Authority Account No: 282940

Policy Term: 07/01/2014 -- 07/01/2015

Policy Numbers: 10T029659-01858-14 7DA3CM0001817-00 AMP7525569-00 AMR-38856 CPP1013080 HAN-11840-00 LEX-084296664-00 MSP-17701 USI-11838-00

Broker Company: AmWins Brokerage

No Claims found for this policy

New Hanover County Airport Authority Account No: 332926

Policy Term: 07/01/2015 -- 07/01/2016

Policy Numbers: 10T029659-01858-15 7DA3CM0001817-01 AMP7525569-01 AMR-38856-01 CPP1013080-01 HAN-11840-01 LEX-084296664-01 MSP-17701-01 USI-11838-01

Broker Company: AmWins Brokerage

No Claims found for this policy

This is not to be construed as an absolute statement of claims, but as a history located for this insured with the listed policy numbers. The Amrisc, LLC loss runs do not necessarily reflect all new claims, transactions or changes applicable within the last 30 days.

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Agent Loss Run Report

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Policy Number	N0097982A	Policy Term	7/1/2015 - 7/1/2016
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY		
Division	H - Aerospace	PAC	CMA - Commercial Airports
Master/Subsidiary Producer	25107C - ARTHUR J GALLAGHER RISK	MCC	0040100 - Airports and Special Risk

BCC	Y16	Adjuster	BETTY REMBLAKE												
Claim	004995	Supervisor	SEAN FINNEGAN												
Plant / Div Location Cd															
		11081													
Sub Ltr	Occurrence ID	Proc ATM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss
A	JY16J0049951	456	1/26/16	1/28/16	2/18/16			NC	NOTICE ONLY	LARSON;KRIS	C	\$0	\$0	*	*
										Subtotal		\$0	\$0	*	*

CHUBB Agent Loss Run Report

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Agent Loss Run Report

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Valuation Date: 2/13/2020

Version: BAR - Report Generated: 2/20/2020 5:46:42 AM

CHUBB®

Agent Loss Run Report

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Policy Number	N0097982A	Policy Term	7/1/2018 - 7/1/2019
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY		
Division	H - Aerospace	PAC	CMA - Commercial Airports
Master/Subsidiary Producer	25107C - ARTHUR J GALLAGHER RISK	MCC	0040100 - Airports and Special Risk

BCO	Y18	Adjuster	***												
Claim	262939	Supervisor	***												
Plant / Div Location Cd															
Sub Ltr	Occurrence ID	Proc ATM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss
A	KY18K2629396	788	7/25/18		11/9/18			NC	MARY WILLIAMS ALLEGES SHE CUT FINGER ON BATHROOM STALL DOOR.	WILLIAMS;MARY	O	\$0	\$0	*	*
Subtotal										\$0	\$0	*	*		

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Agent Loss Run Report

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CHUBB**Agent Loss Run Report**

Page 6 of 14

Policy Number	N0097982A			Policy Term	8/14/2007 - 8/14/2008	
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY			Division	H - Aerospace	
Master/Subsidiary Producer	243982 - USI INSURANCE SERVICES LLC			PAC	ARS - Airports	
				MCC	0040100 - Airports and Special Risk	

BCO	Y08	Adjuster	SEAN FINNEGAN													
Claim	008250	Supervisor	BRYAN DOYLE													
Sub Ltr	Occurrence ID	Proc ATM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss	
A	JY08J0082500	456	12/23/07		3/12/08	7/17/08		NC	MEYERS;LEO ABIO FELL BY DOOR	MEYERS;LEO	C	\$0	\$0	*	*	
BCO	Y08	Adjuster	JOHN WALSH													
Claim	012580	Supervisor	BRYAN DOYLE													
Sub Ltr	Occurrence ID	Proc ATM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss	
A	JY08J0125807	456	2/1/08		4/14/08	11/20/08		NC	KLOSS;BARBARA ABIO TRIP/FALL	KLOSS;BARBARA	C	\$0	\$0	*	*	
										Subtotal		\$0	\$0	*	*	

CHUBB**Agent Loss Run Report**

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Policy Number	N0097982A		Policy Term	8/14/2008 - 8/14/2009	
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY		Division	H - Aerospace	
Master/Subsidiary Producer	243982 - USI INSURANCE SERVICES LLC		PAC	ARS - Airports	
			MCC	0040100 - Airports and Special Risk	

BCO	Y09	Adjuster	JOHN WALSH												
Claim	010458	Supervisor	BRYAN DOYLE												
Sub Ltr	Occurrence ID	Proc ATM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Expense	Gross Outstanding	Gross Incurred Loss
A	JY09J0104588	456	1/9/09		3/23/09	2/18/11	4/29/10	NC	ROBINSON;TONY ABIO FELL FROM BROKEN Y CHAIR	ROBINSON;TONY ABIO FELL FROM BROKEN Y CHAIR	C	\$0	\$0	*	*
										Subtotal		\$0	\$0	*	*

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Agent Loss Run Report

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Policy Number	N0097982A	Policy Term	8/14/2009 - 8/14/2010
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY		
Division	H - Aerospace	PAC	ARS - Airports
Master/Subsidiary Producer	243982 - USI INSURANCE SERVICES LLC	MCC	0040100 - Airports and Special Risk

BCO	Adjuster	***	***	***	***	***	***	***	Subtotal	\$0	\$0	*	*		
Claim	Supervisor	***	***	***	***	***	***	***							
	Plant / Div Location Cd														
Sub Ltr	Occurrence ID	Proc ATM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Expense	Gross Outstanding	Gross Incurred Loss

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Agent Loss Run Report

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Policy Number	N0097982A	Policy Term	8/14/2010 - 8/14/2011
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY		
Division	H - Aerospace	PAC	ARS - Airports
Master/Subsidiary Producer	243982 - USI INSURANCE SERVICES LLC	MCC	0040100 - Airports and Special Risk

BCC	Y11	Adjuster	SEAN FINNEGAN										
Claim	003366	Supervisor	BRYAN DOYLE										
		Plant / Div Location Cd	11081										
Sub Ltr	Occurrence ID	Proc ATM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Expense
A	JY11J0033660	456	1/13/11		1/21/11	5/20/11		NC	CLMT TRIPPED ON CURB SLATER,MEGAN	C	\$0	\$0	*
										Subtotal	\$0	\$0	*
													*

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Agent Loss Run Report

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Agent Loss Run Report

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Agent Loss Run Report

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Agent Loss Run Report

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Policy Number	N0097982A	Policy Term	8/14/2013 - 8/14/2014
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY		
Division	H - Aerospace	PAC	CMA - Commercial Airports
Master/Subsidiary Producer	243982 - USI INSURANCE SERVICES LLC	MCC	0040100 - Airports and Special Risk

BCO	Y13	Adjuster	JESSICA KERNAN												
Claim	052805	Supervisor	DENNIS KRUEGER												
Sub Ltr	Occurrence ID	Proc AIM	Event Date	Made Date	Report Date	Close Date	Reopen Date	Stake	Desc	Claimant	Sts	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss
A	JY13J0528055	456	10/5/13		10/15/13	9/10/14		NC	TRIP AND FALL	CHARIEL;JOAN CLARE	C	\$0	\$0	*	*
BCO	Y13	Adjuster	JESSICA KERNAN												
Claim	054742	Supervisor	JOHN WALSH												
Plant / Div Location Cd	11081														
Sub Ltr	Occurrence ID	Proc AIM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss
A	JY13J0547426	456	10/21/13		10/25/13	1/27/14		NC	TRIP AND FALL	WALK;TAMRA	C	\$0	\$16	*	*
Z	Y13J054742	456	10/21/13					***	***	***	***	\$0	(\$16)	*	*
BCO	Y13	Adjuster	JESSICA KERNAN												
Claim	054811	Supervisor	JOHN WALSH												
Plant / Div Location Cd	11081														
Sub Ltr	Occurrence ID	Proc AIM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss
A	JY13J0548119	456	10/21/13		10/25/13	2/13/14		NC	SLIP AND FALL	WHITE;TERRI	C	\$0	\$16	*	*
Z	Y13J054811	456	10/21/13					***	***	***	***	\$0	(\$16)	*	*
BCO	Y14	Adjuster	SARA KENNEY												
Claim	034712	Supervisor	***												
Plant / Div Location Cd	11081														
Sub Ltr	Occurrence ID	Proc AIM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss
A	JY14J0347127	456	6/30/14		7/8/14	7/29/14		NV	AUTO DAMAGE	NIXON;VERNON	C	\$1,372	\$100	*	*
Z	Y14J034712	456	6/30/14					***	***	***	***	(\$1,372)	(\$100)	*	*

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Agent Loss Run Report

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Policy Number	N0097982A	Policy Term	8/14/2013 - 8/14/2014
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY		
Division	H - Aerospace	PAC	CMA - Commercial Airports
Master/Subsidiary Producer	243982 - USI INSURANCE SERVICES LLC	MCC	0040100 - Airports and Special Risk

BCC	Y16	Adjuster	JOHN WALSH												
Claim	023114	Supervisor	SETH GOLDSTEIN												
Plant / Div Location Cd			11081												
Sub Ltr	Occurrence ID	Proc ATM	Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Sts	Gross Paid Loss	Gross Expense	Gross Outstanding	Gross Incurred Loss
A	JY16J0231143	456	5/21/14	4/29/16	7/22/17			NC	TENANT DISPUTE NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY	C	\$0	\$42,155	*	*	*
										Subtotal	\$0	\$42,155	*	*	*

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Agent Loss Run Report

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Policy Number	N0097982A	Policy Term	8/14/2014 - 7/1/2015
Insured Name	NEW HANOVER COUNTY AIRPORT AUTHORITY AND NEW HANOVER COUNTY		
Division	H - Aerospace	PAC	CMA - Commercial Airports
Master/Subsidiary Producer	25107C - ARTHUR J GALLAGHER RISK	MCC	0040100 - Airports and Special Risk

BCO	Y15	Adjuster	JOHN WALSH
Claim	013967	Supervisor	SEAN FINNEGAN
Plant / Div Location Cd			
Sub Ltr	Occurrence ID	Proc ATM	Event Date
A	JY15J0139678	456	3/12/15
Z	Y15013967	456	3/12/15
Report Date	Made Date	Close Date	Reopen Date
State	Desc	Claimant	Sts
NC	SLIP AND FALL	BLACHEEDGE, MI CHELLE	C
***	***	***	(\$2,000)
			(16)
Subtotal	\$0	\$0	*
Grand Total	\$0	\$42,155	*



Loss Detail Report

NEW HANOVER COUNTY AIRPORT AUTHORITY

230 Government Center Dr., Suite 125A

Wilmington, NC 28405

Account #: 34332981

Report Filters:

Created by: Jamie.Ruzicka@cfins.com

Policy #'s: Storage Tank Program-Sp108078, Sp112802, Sp118048, Sp122839, Sp127682

Claim Status: Open, Closed, Re-opened

Feature Status: Open, Closed, Re-opened

Note: Feature status is only applicable for non worker's compensation claims

Incurred Range From: \$0.00

Incurred Range To: \$0.00

Accident Description Type: Accident Narrative

Location: A//

Department: A//

State: A//

Valuation Date: 2/19/2020

Show Notification Only Claims: N

Show Billed Deductible: N



Producer Information

EIA, INC.
Po Box 23605
Portland, OR 972810000

Storage Tank Program

Insured Name: NEW HANOVER COUNTY AIRPORT AUTHORITY

Policy Number: STP127682 7/1/2019 - 7/1/2020

Note: Total Incurred loss includes ALAE minus Subro Recovery.

There are no claims for this policy.



Producer Information

EIA, INC.
Po Box 23605
Portland, OR 972810000

Storage Tank Program

Insured Name: NEW HANOVER COUNTY AIRPORT AUTHORITY

Policy Number: STP122839 7/1/2018 - 7/1/2019

Note: Total incurred loss includes ALAE minus Subro Recovery.

There are no claims for this policy.



Producer Information

EIA, INC.
Po Box 23605
Portland, OR 972810000

Storage Tank Program

Insured Name: NEW HANOVER COUNTY AIRPORT AUTHORITY

Policy Number: STP118048 7/1/2017 - 7/1/2018

Note: Total Incurred loss Includes ALAE minus Subro Recovery.

There are no claims for this policy.



Producer Information

EIA, INC.
Po Box 23605
Portland, OR 972810000

Storage Tank Program

Insured Name: NEW HANOVER COUNTY AIRPORT AUTHORITY

Policy Number: STP112802 7/1/2016 - 7/1/2017

Note: Total incurred loss includes ALAE minus Subro Recovery.

There are no claims for this policy.



Producer Information

EIA, INC.
Po Box 23605
Portland, OR 972810000

Storage Tank Program

Insured Name: NEW HANOVER COUNTY AIRPORT AUTHORITY

Policy Number: STP108078 7/1/2015 - 7/1/2016

Note: Total incurred loss includes ALAE minus Subro Recovery.

Accident State: NC

Accident Description: The 5000 diesel tank that is for the main terminal generator started having problems with water in the line and when they went in to investigate a puddle of fluid was found. The insured has contacted Catlin engineers.

Claim Status: C

Date Closed: 11/16/2016

Claimant Name	Policy Number	Claim Number	Claim Type	Damage Type	Date of Loss	Date Reported	Loc/Dept	Feature Status	OS Reserve	Paid ALAE	Subro/ Salvage	Total Incurred inc ALAE
NEW HANOVER COUNTY AIRPORT AUTHORITY	STP108078	NJU00593567	MCPD	BUILDING	8/13/2015	8/27/2015	C	\$0.00	\$0.00 \$0.00	\$0.00	\$0.00	\$0.00
Totals:									\$0.00 \$0.00 \$0.00	\$0.00	\$0.00	\$0.00



Producer Information

EIA, INC.
Po Box 23605
Portland, OR 972810000

Storage Tank Program

Insured Name: NEW HANOVER COUNTY AIRPORT AUTHORITY

Summary for Policy Number: STP108078 7/1/2015 - 7/1/2016

Deductible: \$0.00

Total Claims: 1

Report Only Features: 0

Claim Type	Average Per Claim	Open Claim Features	Total Claim Features	Outstanding Reserves	Total Paid Loss	ALAE	Salvage/ Subro	Total Incurred Loss & Recovery	ALAE
Liability-Property Damage	\$0.00	0	1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Totals	\$0.00	0	1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00