RESOLUTION 2021-005

AUTHORIZING THE CITY MANAGER TO SIGN AGREEMENTS FOR INSURANCE COVERAGE EFFECTIVE JANUARY 1, 2021 THROUGH DECEMBER 31, 2021 IN THE AMOUNT OF \$578,428.

WHEREAS, the City of DeKalb (the "City") is a home rule unit of local government which may exercise any power and perform any function pertaining to its government and affairs pursuant to Article VII, Section 6, of the Illinois Constitution of 1970; and

WHEREAS, the City's independent insurance broker has recommended the approval and execution of insurance coverage agreements for the 2021 Fiscal Year in the total amount of \$578,428; and

WHEREAS, the City's Corporate Authorities find that it is in the City's best interests of the City's welfare, public health, and safety to approve and execute insurance coverage agreements in the total amount of \$578,428 for the effective period beginning January 1, 2021 through December 31, 2021; and

NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE CITY OF DEKALB, ILLINOIS:

SECTION 1: The City's Corporate Authorities authorize and approve the City Manager to execute the insurance coverage agreements recommended by the City's independent insurance broker in the total amount of \$578,428 for the effective period beginning January 1, 2021 through December 31, 2021. The City's Corporate Authorities further authorize the City Manager to take all acts necessary to administer and maintain the City's insurance coverage agreements for the 2021 Fiscal Year.

SECTION 2: This Resolution shall be in full force and effect from and after its passage and approval as provided by law.

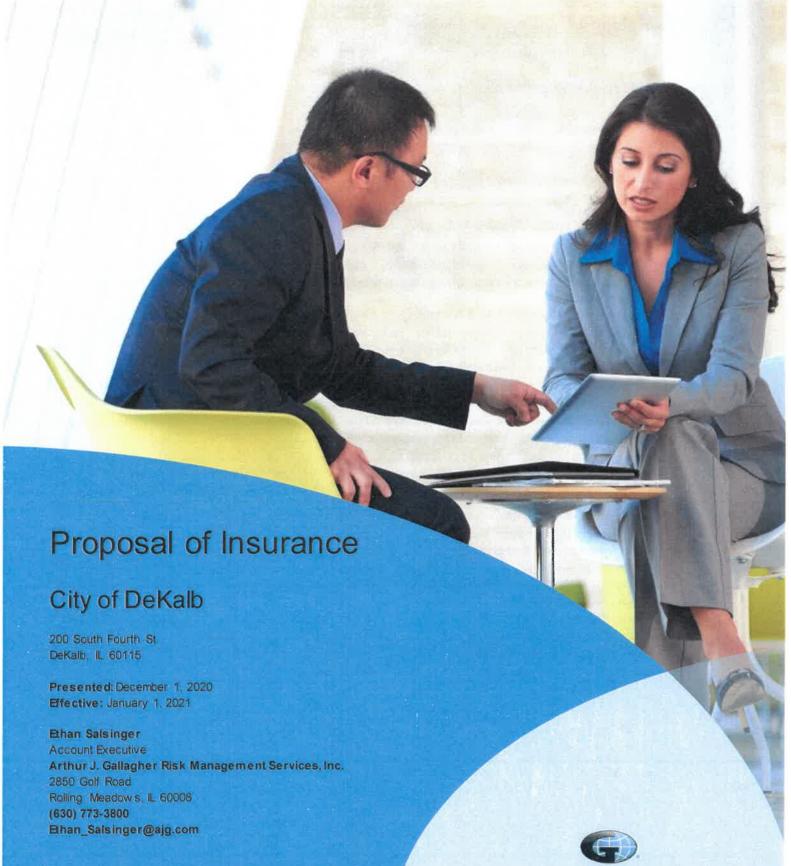
PASSED BY THE CITY COUNCIL of the City of DeKalb, Illinois at a Regular meeting thereof held on the 11th day of January 2021 and approved by me as Mayor on the same day. Passed by an 8-0 roll call vote. Aye: Morris, Finucane (Remote), Smith, Perkins, McAdams, Verbic, Faivre, Mayor Smith. Nay: None.

ATTEST:

RUTH A. SCOTT, Executive Assistant

JERRY SMITH, Mayor

PASSED: JANUARY 11, 2021





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Risk Management | Consulting Insurance



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Service Team

Ethan Salsinger has primary service responsibility for your company. We operate using a team approach. Your Service Team consists of:

| NAME / TITLE | PHONE / ALT. PHONE | EMAIL | ROLE |
|----------------------------------------------|--------------------|-------------------------|------------------------|
| Ethan Salsinger Account Executive | (630) 285-3651 | Ethan_Salsinger@ajg.com | Producer |
| Caitlin Murin, ARM Client Service Manager | (630) 694-5462 | Caitlin_Murin@ajg.com | Client Service Manager |

Arthur J. Gallagher Risk Management Services, Inc.

Main Office Phone Number: (630) 773-3800



Program Structure





Named Insured

| | | | | | | | | Tank |
|-------------------------------------------------------|---------|----------|------------------------------------------------------------------------------------|------------------------------------|-----------------|---------|-----------------------------------------------------------|------|
| Named Insured | Package | Property | Excess Excess Law operty Workers' Enforcement Crime C Compensation Liability | Workers' Enforcement Crime Cyber L | Cyber Liability | Airport | Advantage Pollution Liability (Storage Tanks) | |
| City of DeKalb | X | X | X | X | X | X | | X |
| City of DeKalb and DeKalb Taylor Municipal Airport | | | | | | | х | |

Note: Any entity not named in this proposal, may not be an insured entity. This may include affiliates, subsidiaries, LLCs, partnerships and joint ventures.





Market Review

We approached the following carriers in an effort to provide the most comprehensive and cost effective insurance program.

| INSURANCE COMPANY | LINE OF COVERAGE | RESPONSE | PREMIUM |
|-----------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------------------------|--------------|
| Lloyd's Syndicate 2987 | BRIT Package | Did not provide Quote | |
| Federal Insurance Company | Property | Recommended Quote | \$74,634.00 |
| Safety National Casualty Corporation | Package (GL, AL, POL, LEL, Excess) – \$10MM, \$5M LEL, \$250k SIR LEL | Recommended Quote | \$250,046.00 |
| Safety National Casualty Corporation | Package (GL, AL, POL, LEL, Excess) – \$5MM, \$250K SIR LEL | Quoted | \$226,846.00 |
| Safety National Casualty Corporation | Package (GL, AL, POL, LEL, Excess) – \$5MM, \$250K SIR All Lines | Quoted | \$195,098.00 |
| The Travelers Companies, Inc. | General Liability | Declined to Quote - Does Not Fit Underwriting Requirement | |
| Argonaut Insurance Company | Package (No LEL) | Quoted | \$185,890.00 |
| The Travelers Companies, Inc. | Package | Declined to Quote - Does Not Fit Underwriting Requirement | |
| Underwriters at Lloyd's London | Cyber Liability - \$3M, 250k Cyber Deception | Quoted | \$15,038.00 |
| Underwriters at Lloyd's London | Cyber Liability - \$3M, 100k Cyber Deception | Recommended Quote | \$14,121.00 |
| BCS Insurance Company | Cyber Liability - \$3M | Quoted | \$13,243.00 |
| QBE Insurance Corporation | Airport Liability | Recommended Quote | \$18,906.00 |
| Nautilus Insurance Company | Tank Advantage Pollution Liability (Storage Tanks) | Recommended Quote | \$11,861.00 |
| Indian Harbor Insurance Company | Excess Police Professional Liability | Recommended Quote | \$45,581.00 |
| Safety National Casualty Corporation | Excess Workers' Compensation | Recommended Quote | \$697,465.00 |



Location Schedule

| LINE OF COVERAGE | LOC #/ BLDG # | LOCATION ADDRESS |
|-------------------|---------------|-----------------------------------------------|
| Airport Liability | 1/1 | 200 South Fourth St. DeKalb, IL 60115 |
| | 1/1-2 | 1106 West Fairview DR, Dekalb, IL 60115 |
| | 2/1-2 | 1119 Oak Street, Dekalb, IL 60115 |
| * | 3/1-3 | 1154 S 7TH Street Dekalb, IL 60115 |
| | 4/1-7 | 1216 Market Street Dekalb, IL 60115 |
| | 5/1-4 | 1505 W Lincoln Hwy Dekalb, IL 60115 |
| | 6 | 1510 State Street Dekalb, IL 60115 |
| | 7 | 1685 County Farm Road Dekalb, IL 60115 |
| | 8 | 21156 Nelson Road Dekalb, IL 60115 |
| | 9 | 223 S 4TH Street Dekalb, IL 60115 |
| Demonto | 10/1-2 | 2650 N Annie Glidden Road Dekalb, IL 60115 |
| Property | 11/1-2 | 2851 Corporate DR Dekalb, IL 60115 |
| | 12/1-2 | 3232 Pleasant Street Dekalb, IL 60115 |
| | 13 | 330 Grove Street Dekalb, IL 60115 |
| | 14/1-2 | 680 Haish Blvd Dekalb, IL 60115 |
| | 15/1-2 | 700 Pine Street Dekalb, IL 60115 |
| | 16/1-2 | 700 W Lincoln Hwy Dekalb, IL 60115 |
| | 17/1-2 | 900 W Dresser Road Dekalb, IL 60115 |
| | 18/1-2 | 950 W Dresser Road Dekalb, IL 60115 |
| | 19 | 1202 S 7th Street Dekalb, IL 60115 |
| | 20 | 2850 Pleasant Street Dekalb, IL 60115 |



| INE OF COVERAGE | LOC #/ BLDG # | LOCATION ADDRESS |
|------------------------------------|---------------|------------------------------------------|
| | 21 | 2860 Pleasant Street Dekalb, IL 60115 |
| | 22 | 2910 Pleasant Street Dekalb, IL 60115 |
| | 23 | 2920 Pleasant Street Dekalb, IL 60115 |
| | 24 | 3030 Pleasant Street Dekalb, IL 60115 |
| | 25 | 3040 Pleasant Street Dekalb, IL 60115 |
| | 26 | 624 N 11th Street Dekalb, IL 60115 |
| | 27 | 912 Edgebrook DR Dekalb, IL 60115 |
| | 28 | 524 Clifford DR Dekalb, IL 60115 |
| | 29 | 2100 Pleasant Street Dekalb, IL 60115 |
| | 30 | 2200 Pleasant Street Dekalb, IL 60115 |
| | 31 | 3140 Pleasant Street Dekalb, IL 60115 |
| | 32 | 164 E Lincoln Hwy Dekalb, IL 60115 |
| | 33 | 3331 Pleasant Street Dekalb, IL 60115 |
| Tank Advantage Pollution Liability | 2 | 1316 Market Street DeKalb, IL 60115 |
| | 3 | 1216 Market St DeKalb, IL 60115 |
| | 4 | 2200 Pleasant Street DeKalb, IL 60115 |
| | 5 | 3232 Pleasant Street ĎeKalb, IL 60115 |



Program Details

Coverage:

Property

Carrier:

Federal Insurance Company

Policy Period: 1/1/2021 to 1/1/2022

| LOCATION DETAILS | SUBJECT OF INSURANCE | AMOUNT |
|------------------------------------|------------------------------------------------------------------|--------------|
| See Blanket Schedule | Blanket 1: Building, Personal Property, EDP Property on Premises | \$81,890,156 |
| See Blanket Schedule | Blanket 2: Business Income with Extra Expense | \$1,000,000 |
| See Blanket Schedule | Blanket 3: Valuable Papers on Premises | \$1,000,000 |
| See Blanket Schedule | Blanket 4: Debris Removal Expense | \$1,000,000 |
| See Blanket Schedule | Blanket 5: Fungus Clean-Up or Removal | \$50,000 |
| See Blanket Schedule | Blanket 6: Pollutant Clean-Up or Removal | \$50,000 |
| See Blanket Schedule | Building | Blanket 1 |
| See Blanket Schedule | Personal Property | Blanket 1 |
| See Blanket Schedule | EDP Property on Premises | Blanket 1 |
| See Blanket Schedule | Business Income with Extra Expense | Blanket 2 |
| See Blanket Schedule | Valuable Papers on Premises | Blanket 3 |
| See Blanket Schedule | Debris Removal Expense | Blanket 4 |
| See Blanket Schedule | Fungus Clean-Up or Removal | Blanket 5 |
| See Blanket Schedule | Pollutant Clean-Up or Removal | Blanket 6 |
| See Blanket Schedule | Weather Station | \$175,000 |
| Loc. #/Bldg. #: 4/7 | Building | \$13,640 |
| Loc. #: 6-9, 13, 19-26, 29-33 Each | Building | Blanket 1 |
| Loc. #: 7-9, 13, 19, 29-33 Each | Personal Property | Blanket 1 |
| Loc. #: 6-9, 13, 19-26 Each | EDP Property on Premises | Blanket 1 |
| Loc. #: 6-9, 13, 19-26, 29-33 Each | Business Income with Extra Expense | Blanket 2 |
| Loc. #: 6-9, 13, 19-26, 29-33 Each | Valuable Papers on Premises | Blanket 3 |
| Loc. #: 6-9, 13, 19-26, 29-33 Each | Debris Removal Expense | Blanket 4 |
| Loc. #: 6-9, 13, 19-26, 29-33 Each | Fungus Clean-Up or Removal | Blanket 5 |
| Loc. #: 6-9, 13, 19-26, 29-33 Each | Pollutant Clean-Up or Removal | Blanket 6 |
| Loc. #/Bldg. #: 16/2 | Building | \$80,000 |
| Loc. #: 27 | Building | \$206,000 |
| Loc. #: 28 | Building | \$92,700 |
| | Machinery Breakdown | Included |
| Earthquake: | | |





| LOCATION DETAILS | SUBJECT OF INSURANCE | AMOUNT |
|------------------------------------------|----------------------------------------------------|--------------|
| | - Policy Annual Aggregate Limit | \$10,000,000 |
| Loc. #: 1-33 | - Premises Annual Aggregate Limit | \$10,000,000 |
| Loc. #: 1-33 | - Per Occurrence Limit | \$10,000,000 |
| Flood: | | |
| | - Policy Annual Aggregate Limit | \$10,000,000 |
| | Flood (Inundation, Back-Up and Mud Flow Included): | |
| Loc. #: 2, 4, 5-15, 17, 18, 20-27, 29-33 | - Premises Annual Aggregate Limit | \$10,000,000 |
| Loc. #: 2, 4, 5-15, 17, 18, 20-27, 29-33 | - Per Occurrence Limit | \$10,000,000 |
| Loc. #: 1, 3, 19 | - Premises Annual Aggregate Limit | \$5,000,000 |
| Loc. #: 1, 3, 19 | - Per Occurrence Limit | \$5,000,000 |

Deductibles / Self-Insured Retention

| COVERAGE | AMOUNT |
|--------------------------------------------------------------------------------------------|-----------|
| Policy Deductible | \$10,000 |
| Waiting Period | 72 Hours |
| Mobile Communication Property - Minimum Deductible | \$3,500 |
| Dependent Prem BI - Waiting Period | 72 Hours |
| Mobile Equipment- Unscheduled | \$2,500 |
| Mobile Equipment | \$2,500 |
| Earthquake: | |
| - Property Damage Per Premises/Per Occurrence Dollar Deductible - Loc. #: 1-33 | \$50,000 |
| - Waiting Period Per Premises/Per Occurrence (Consecutive Hours) - Loc. #: 1-33 | 72 Hours |
| Flood (Inundation, Back-Up and Mud Flow Included): | |
| - Per Occurrence Waiting Period (Consecutive Hours) - Loc. #: 1-15, 17-27, 29-33 | 72 Hours |
| - Per Occurrence Dollar Deductible - Loc. #: 2, 4, 5-15, 17, 18, 20-27, 29, 30, 31, 32, 33 | \$50,000 |
| - Per Occurrence Dollar Deductible - Loc. #: 1, 3, 19 | \$100,000 |

Additional Coverage:

| DESCRIPTION | AMOUNT |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Extended Period - The Information Shown Above Applies to: all Premises Coverages; all Additional Coverages; And Debris Removal Coverage, And all Premises, Unless Corresponding Specific Information is Shown as Applicable to a Specific Premises or Coverage | Unlimited |
| Blanket Limit of Insurance - The Automatic Blanket Limit Applies to: Accounts Receivable, Electronic Data Processing Property, Fine Arts, Leasehold Interest - Bonus Payment, Prepaid Rent, Sublease Profit, Tenants' Lease Interest, Leasehold Interest - Undamaged Tenant's Improvements & Betterments, Non-Owned Detached Trailers, Outdoor Trees, Shrubs, Plants or Lawns, Pair and Set, Personal Property of Employees, Public Safety Service Charges, Research and Development Property, Valuable Papers | \$250,000 |
| Dependent Prem Bi | \$250,000 |





Additional Coverage:

| DESCRIPTION | AMOUNT |
|----------------------------------------------------------|-------------|
| EDP Property in Transit | \$250,000 |
| Errors or Omissions | \$1,000,000 |
| Mobile Communication Property | \$250,000 |
| Mobile Equipment - Unscheduled | \$250,000 |
| Mobile Equipment | \$2,373,862 |
| Ocean Cargo - Goods In Transit | \$50,000 |
| Personal Property - Any Other Location | \$100,000 |
| Personal Property in Transit | \$250,000 |
| Prohibition of Access - Per Occurrence Limit | \$50,000 |
| Prohibition of Access - Annual Aggregate Limit | \$100,000 |
| Any Other Location for: | |
| - Accounts Receivable | \$50,000 |
| - Building Components | \$50,000 |
| - EDP Property | \$50,000 |
| - Fine Arts | \$50,000 |
| - Personal Property | \$50,000 |
| - R&D Property | \$50,000 |
| - Valuable Papers | \$50,000 |
| Debris Removal 25% of Direct Damage Loss, Plus: | |
| - Premises Shown in the Declarations | \$100,000 |
| - Any Other Location | \$25,000 |
| - In Transit | .\$25,000 |
| Deferred Payments | \$25,000 |
| Exhibition, Fair or Trade Show: | |
| - EDP Property | \$50,000 |
| - Fine Arts | \$50,000 |
| - Personal Property | \$50,000 |
| Extra Expense | \$100,000 |
| Fungus Clean-Up or Removal | \$25,000 |
| Impairment of Computer Services - Malicious Programming: | |
| - Inside Attack | \$1,000 |
| - Outside Attack - Per Occurrence | \$1,000 |
| - Outside Attack - Annual Aggregate | \$1,000 |
| Installation: | |
| - Any Job Site | \$25,000 |
| - In Transit | \$25,000 |



Additional Coverage:

| DESCRIPTION | AMOUNT |
|---------------------------------------------------------------------------------|---------------------------|
| In Transit for: | |
| - Accounts Receivable | \$25,000 |
| - Building Components | \$25,000 |
| - EDP Property | \$50,000 |
| - Fine Arts | \$25,000 |
| - Personal Property | \$25,000 |
| - Valuable Papers | \$25,000 |
| Loss of Master Key | \$15,000 |
| Loss Prevention Expenses | \$15,000 |
| Mobile Communication Property | \$15,000 |
| Money & Securities: | |
| - On Premises | \$15,000 |
| - Off Premises | \$15,000 |
| Pollutant Cleanup or Removal | \$25,000 |
| Processing Water | \$10,000 |
| Preparation of Loss Fees | \$10,000 |
| Newly Acquired Premises Or Newly Acquired Or Constructed Property for 180 Days: | |
| - Building | \$2,500,000 |
| - Personal Property | \$1,000,000 |
| - Personal Property at Existing Premises | \$100,000 |
| - EDP Equipment | \$1,000,000 |
| - Bectronic Data | \$50,000 |
| - Communication Property | \$50,000 |
| - Fine Arts | \$25,000 |
| Business Income: | |
| - Any Other Location | \$25,000 |
| - Contractual Penalties | \$10,000 |
| - Loss of Utilities (Excludes Overhead Trans. Lines) | \$15,000 |
| - Exhibition, Fair or Trade Show | \$10,000 |
| - Ingress & Egress | \$25,000 |
| - New ly Acquired Premises - Business Income | \$100,000 for 180 Days |
| - Pollutant Clean-up or Removal | \$10,000 |
| - Preparation of Loss Fees | \$10,000 |
| - Worldwide Dependent Business Premises | \$100,000 |



Valuations:

| DESCRIPTION | LIMITATIONS |
|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Replacement Cost | Cost of Replacement at any Location, Personal Property of Others, Business Personal Property You Lease and Personal Property of Employees, Research and Development Property if Repaired, Replaced or Reproduced, 24 Months to Decide to Repair or Replace |
| Selling Price | Finished Stock and Sold Personal Property |
| Actual Cash Value | Tenants' i & B w hen not Replaced |
| Actual Cash Value | Building, Loc. #: 27, 28 |

Endorsements include, but are not limited to:

| DESCRIPTION |
|----------------------------------------------------------------------------------------------|
| Additional Peril-Earthquake Limit/Deductible Or Waiting Period - 80-02-1303 03-19 |
| Additional Peril-Flood Limit/ Deductible Or Waiting Period Per Occurrence - 80-02-1428 03-19 |
| Property Declarations - 80-02-0005 01-18 |
| Property Supplementary Declarations - 80-02-0210 01-15 |
| Property Supplementary Declaration-Business Income - 80-02-0215 07-03 |
| Supplemental Declarations - Impairment Of Computer Services - 80-02-0315 05-20 |
| Building And Personal Property - 80-02-1000 03-19 |
| Business Income With Extra Expense- 80-02-1004 03-19 |
| Extra Expense - 80-02-1018 03-19 |
| Mobile Equipment - 80-02-1047 07-03 |
| Impairment Of Computer Services-Malicious Program - 80-02-1095 07-03 |
| Property/Business Income Conditions & Definitions - 80-02-1097 03-19 |
| Scheduled Personal Property Coverage - 80-02-1300 03-19 |
| Cap On Certified Terrorism Losses (Selected Locations) - 80-02-1667 01-15 |
| Unintentional Errors Or Omissions - 80-02-1690 06-05 |
| Illinois Mandatory Amended Conditions - 80-02-1776 09-05 |
| Special Waiting Period Provision Added - 80-02-5355 01-15 |
| Ocean Cargo Coverage Added - 80-02-5407 03-19 |
| IL - Important Notice - 99-10-0874 04-07 |
| Important Notice-NY Location Inspections - 99-10-0996 04-18 |
| How To Report A Loss - 80-02-9001 06-98 |
| Common Policy Conditions - 80-02-9090 06-05 |
| IL Mandatory Cancellation & When We Do Not Renew - 80-02-9763 10-06 |
| Condition - Civil Unions Or Domestic Partnerships - 80-02-9790 03-12 |
| Insuring Agreement - 80-02-9800 12-08 |
| Notice To Policyholders-TRIPRA - 99-10-0732 01-15 |
| Important Notice - OFAC - 99-10-0792 09-04 |



Endorsements include, but are not limited to:

DESCRIPTION

Illinois Policy Information Notice - 99-10-0838 05-05

AOD Policyholder Notice - 99-10-0872 06-07

Exclusions include, but are not limited to:

DESCRIPTION

Earth Movement Exclusion

Flood Exclusion

Government Action Exclusion

War Exclusion

Nuclear Hazard, Power Failure

Exclusions - 80-02-1313 03-19

Malicious Programming Exclusion Added - 80-02-0045 03-20

Exclusion For Certified Terrorism Losses/Premise - 80-02-1669 01-15

Binding Requirements:

DESCRIPTION

Subject To Signed Rejection of Terrorism Insurance

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION

Total Premium Includes Machinery Breakdown Premium, TRIA: \$2,282, Ensuing Fire: \$443

Other Peril Modifications - Exclusions - Inundation, Back-up, Mudflow, Loc. #/Bldg.: 16/1, 16/2, 28/1

Premium \$74,634.00

ESTIMATED PROGRAM COST \$74,634.00

TRIA/TRIPRA PREMIUM

INCLUDED (+ Additional Surcharges, Taxes and Fees as applicable)

Subject to Audit: N/A





Coverage:

Public Entity Package - General Liability

Carrier:

Safety National Casualty Corporation

Policy Period:

1/1/2021 to 1/1/2022

Form Type:

| COVERAGE | FORM TYPE | RETROACTIVE DATE | PENDING & PRIOR DATE |
|-----------------------------|-------------|------------------|----------------------|
| General Liability | Occurrence | Not Applicable | Not Applicable |
| Employee Benefits Liability | Claims Made | 5/1/2012 | |

Coverage:

| DESCRIPTION | AMOUNT |
|-----------------------------------------------------------------------|-------------|
| General Aggregate Limit | \$4,000,000 |
| Products/Completed Operations Aggregate Limit | \$4,000,000 |
| Each Occurrence Limit | \$2,000,000 |
| Personal and Advertising Injury Limit | \$2,000,000 |
| Damages to Premises Rented to You Limit - Including Fire Damage Legal | \$1,000,000 |
| Employee Benefits Liability - Aggregate | \$4,000,000 |
| Employee Benefits Liability - Each Employee | \$2,000,000 |

Deductibles / Self-Insured Retention

| TYPE | COVERAGE | AMOUNT |
|-----------|-----------------------------------|-----------|
| Retention | CGL - Each Occurrence | \$100,000 |
| Retention | Personal and Advertising Injury | \$100,000 |
| Retention | Damages to Premises Rented to You | \$100,000 |
| Retention | Employee Benefits Liability | \$100,000 |
| Retention | Annual Aggregate Deductible | \$275,000 |

Any Other Continuity or Specific Dates/Limits applicable to the Claims-Made Conditions:

| COVERAGE | CONTINUITY DATE | LIMITS | CONDITIONS |
|-----------------------------|-----------------|--------|------------|
| Employee Benefits Liability | | | |

Claims Made Coverage:

Should you elect to change carriers (if a new retroactive date is provided) or non-renew this policy, a supplemental extended reporting endorsement may be available subject to policy terms and conditions. You must request the extended reporting period in writing to the carrier within ([Days To Extend]) days of the expiration date. The cost of this extended reporting period is [Percent Cost]% of the annual premium and is fully earned. The extended reporting period extends only to those claims made during the extended reporting period for wrongful acts that occurred prior to the expiration date and would have been covered by the policy. Claims must be reported to the carrier within ([Days To Report]) days of the end of the policy period. The extended reporting period does not increase the limits of liability and is subject to all policy terms, conditions and exclusions.





Definition of Claim:

DESCRIPTION

Refer to attached policy form

Incident or Claim Reporting Provision:

DESCRIPTION

Refer to attached policy form

Run Off Provisions:

| DESCRIPTION | PREMIUM AMOUNT | PREMIUM DUE DATE | LENGTH | % OF EXPIRING PREMIUM |
|-------------------------------|----------------|------------------|--------|-----------------------|
| Refer to attached policy form | | | | |

Endorsements include, but are not limited to:

| DESCRIPTION |
|-----------------------------------------------------------------------------|
| CGL Coverage Form - CG 00 01 |
| Coverage Retention Form - SNGL 024 |
| Amended Definition of Bodily Injury - SNGL 004 |
| Unintentional Failure to Disclose Hazards or Occurrences - SNGL 021 |
| Co-Employee Exclusion Deleted - SNGL 012 |
| Deletion of Premium Audit Condition - SNGL 053 |
| Designated Additional Insured (Broad Form) - SNGL 022 |
| Governmental Subdivisions Endorsement - CG 24 09 |
| Employee Benefits Liability Coverage with Self-Insured Retention - SNGL 054 |
| Self-Insured Retention Endorsement - SNGL 024 |
| Sexual Abuse or Molestation Coverage - GLM 007-2 |
| Basket Aggregate Retention - Manuscript |

Exclusions include, but are not limited to:

| COVERAGE TYPE | DESCRIPTION | | | |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| General Liability | Bodily Injury and Property Damage from pollutants - Absolute Exclusion | | | |
| General Liability | Losses arising from the ownership maintenance or use of aircraft (including drones), autos, or watercraft, with some minor exceptions including certain contractual obligations | | | |
| General Liability | Employment Related Practices Exclusion | | | |
| General Liability | Liquor Liability Exclusion | | | |
| General Liability | Aircraft Products Exclusion | | | |
| General Liability | Professional Liability Exclusion | | | |
| General Liability | Real Property in Your Care, Custody, and Control Exclusion | | | |
| General Liability | Absolute Asbestos Exclusion | | | |
| General Liability | Absolute Lead Exclusion | | | |





Exclusions include, but are not limited to:

| COVERAGE TYPE | DESCRIPTION | | | |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| General Liability | War and Nuclear Hazard | | | |
| General Liability | Mold / Fungus | | | |
| BL | Dishonest, fraudulent, criminal or malicious act or omission | | | |
| ⊞L | Bodily Injury or Property Damage or Personal Injury | | | |
| ⊞L | Failure of performance of contract | | | |
| EBL | Failure of any investment to perform as represented by you | | | |
| EBL | Failure to comply with mandatory provisions of any law concerning Workers' Compensation, unemployment insurance, social security or disability benefits | | | |
| EBL | Wrongful termination of an employee | | | |
| EBL | Coercion, demotion, reassignment, discipline or harassment of an employee | | | |
| EBL | Discrimination against an employee | | | |
| General Liability | Total Pollution Exclusion W/ Hostile Fire Exception - CG 21 55 | | | |
| General Liability | Nuclear Energy Liability Exclusion - IL 00 21 | | | |
| General Liability | Fungi or Bacteria Exclusion - CG 21 67 | | | |
| General Liability | Silica Exclusion - CG 21 96 | | | |
| General Liability | Asbestos Exclusion - SNGL 044 | | | |
| General Liability | Lead Exclusion - SNGL 043 | | | |
| General Liability | Employment Related Practices Exclusion - CG 21 47 | | | |
| General Liability | Law Enforcement Exclusion - CG 22 51 | | | |
| General Liability | ERISA Exclusion - SNGL 002 | | | |
| General Liability | Failure to Supply Exclusion - CG 22 50 | | | |
| General Liability | Injury to Volunteer Firefighters Exclusion - CG 22 56 | | | |
| General Liability | Access or Disclosure of Confidential or Personal Information And Data-Related Liability Exclusion - CG 21 07 | | | |
| General Liability | Coverage C- Medical Payments Exclusion - CG 21 35 | | | |

Binding Requirements:

| | | ON |
|--|--|----|
| | | |
| | | |

Subject to Signed TRIA Form

| Premium | \$35,708.00 |
|-----------------------------------------------------------------------------|-------------|
| ESTIMATED PROGRAM COST | \$35,708.00 |
| TRIA/TRIPRA PREMIUM (+ Additional Surcharges Taxes and Fees as applicable) | \$1,428.00 |

Subject to Audit: Not Auditable





Coverage:

Public Entity Package - Business Auto

Carrier:

Safety National Casualty Corporation Safety Specialty Insurance Company

Policy Period: 1/1/2021 to 1/1/2022

Coverage:

| DESCRIPTION | AMOUNT | COVERED AUTOS | BASIS |
|-----------------------------------------------------|----------------------|------------------|--------------------------------------------------------|
| Auto Liability - Any One Accident | \$2,000,000 | 1 | Combined Single Limit -Bodily Injury & Property Damage |
| Uninsured/Underinsured Motorist (UM/UIM) | \$70,000 | | |
| Physical Damage Coverage - Comprehensive | Actual Cash Value | 2 | |
| Physical Damage Coverage - Collision | Actual Cash Value | 2 | |
| Garage keepers Legal Liability - Legal Liability | \$1,000,000 | | Per Location |

Deductibles / Self-Insured Retention

| TYPE | COVERAGE | AMOUNT |
|--------------------------|-----------------------------------|-----------|
| Retention | Auto Liability - Any One Accident | \$100,000 |
| Retention | Comprehensive Coverage | \$10,000 |
| Retention | Collision Coverage | \$10,000 |
| Retention Garage keepers | | \$100,000 |
| Retention | Annuai Aggregate Deductible | \$275,000 |

Covered Autos:

| SYMBOL | SYMBOL NAME | DESCRIPTION OF COVERED AUTO DESIGNATION SYMBOLS | | | |
|--------|--------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| 1 | Any Auto | | | | |
| 2 | Owned Autos Only | Only those autosyou own (and for Liability Coverage any trailers you don't own while attached to power units you own). This includes those autos you acquire ownership of after the policy begins. | | | |
| 3 | Owned Private Passenger Autos Only | Only the private passenger autos you own. This includes those private passeng autos you acquire ownership of after the policy begins. | | | |
| 4 | Owned Autos Other Than Private Passenger Autos Only | Only those autosyou own that are not of the private passenger type (and for Liability Coverage any trailers you don't own while attached to power units you own). This includes those autos not of the private passenger type you acquire ownership of after the policy begins. | | | |
| 5 | Owned Autos Subject To No-Fault | Only those autosyou own that are required to have No-Fault benefits in the state where they are licensed or principally garaged. This includes those autosyou acquire ownership of after the policy begins provided they are required to have No Fault benefits in the state where they are licensed or principally garaged. | | | |





Covered Autos:

| SYMBOL | SYMBOL NAME | DESCRIPTION OF COVERED AUTO DESIGNATION SYMBOLS | | |
|--------|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| 6 | Owned Autos Subject To A Compulsory Uninsured Motorists Law | Only those autosyou own that because of the law in the state where they are licensed or principally garaged are required to have and cannot reject Uninsured Motorists Coverage. This includes those autosyou acquire ownership of after the policy begins provided they are subject to the same state uninsured motorists' requirement. | | |
| 7 | Specifically Described Autos | Only those autos described in Item Three of the Declarations for which a premium charge is shown (and for Liability Coverage any trailers you don't own while attached to any power unit described in Item Three). | | |
| 8 | Hired Autos Only | Only those autosyou lease, hire, rent or borrow. This does not include any auto you lease, hire, rent, or borrow from any of your employees, partners (if you are a partnership), members (if you are a limited liability company) or members of their households. | | |
| 9 | Nonowned Autos Only | Only those autosyou do not own, lease, hire, rent or borrow that are used in connection with your business. This includes autos owned by your employee partners (if you are a partnership), members (if you are a limited liability com or members of their households but only while used in your business or your personal affairs. | | |
| 19 | Mobile Equipment Subject To Compulsory Or Financial Responsibility Or Other Motor Vehicle Insurance Law Only | Only those autos that are land vehicles and that would qualify under the definition of mobile equipment under this policy if they were not subject to a compulsory or financial responsibility law or other motor vehicle insurance law where they are licensed or principally garaged. | | |

Endorsements include, but are not limited to:

| DESCRIPTION |
|----------------------------------------------------------------------------------------------------|
| Self-Insured Retention Endorsement - SNCA 022 |
| Public Entity Endorsement - SNCA 029 |
| Broad Form Named Insured - SNCA 038 |
| Unintentional Failure to Disclose Material Facts - SNCA 028 |
| Unintentional Failure to Provide Notice of Accident or Loss - SNCA 030 |
| Audio, Visual, & Data Electronic Equipment Coverage- Fire, Police, & Emergency Vehicles - CA 20 02 |
| Amphibious Vehicles - CA 23 97 |
| Public Transportation Autos - CA 24 02 |
| Hired Autos Specified as Covered Autos you Own- CA 99 16 |
| Waiver of Premium Audit Condition - Manuscript |
| Auto Physical Damage Deductibles Applies to Fire & Lightning - Manuscript |
| Annual Aggregate Deductible - Manuscript |

Exclusions include, but are not limited to:

| DESCRIPTION | | |
|----------------------------------------------------------------------------------------|--|--|
| See Attached Policy Form – PDF Page 122 | | |
| Exclusion of Federal Employees Using Autos in Government Business - CA 04 42 | | |
| Emergency Services - Volunteer Firefighters' and Workers' Injuries Excluded - CA 20 30 | | |
| Silica Exclusion - CA 23 94 | | |
| Nuclear Energy Liability Exclusion - IL 00 21 | | |





Binding Requirements:

DESCRIPTION

Subject to If the insured's intent is to reject UM/UIM, PIP, and/or Med Pay coverage in states that allow total rejection and the state mandatory forms are not signed, dated and returned prior to a loss, the insured's SIR will apply to the claim, if payments are made.

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION

Premium Break downs:

Commercial Automobile Liability Coverage \$43,337

Commercial Automobile Physical Damage Coverage \$23,801

Auto Disclaimer:

Commercial Auto policies utilize a set of coverage symbols to stipulate a category of covered autos. One or more symbols are assigned to each coverage purchased indicating which autos that coverage applies to. Please refer to your policy and make certain that you read and understand the various auto symbols and associated descriptions. Specific symbols may apply to either a particular kind of vehicle or the vehicle's ownership status. The symbols could also differ depending upon whether the coverage is for liability or physical damage. Also, in certain circumstances, an insurance company may agree to provide coverage for an auto scenario that is not described in the auto symbols. When this occurs, a unique symbol and related description is used. If you have any questions regarding the auto symbols or associated descriptions contained in your policy, please contact us.

Premium \$67,138.00

ESTIMATED PROGRAM COST

\$67,138.00

Subject to Audit: Annually





Public Entity Package -

Coverage: Public Entity Package - Public Officials & Employment Practices Liability

Carrier: Safety Specialty Insurance Company

Policy Period: 1/1/2021 to 1/1/2022

Form Number: POEPCM 0416

Form Type:

| COVERAGE | FORM TYPE | RETROACTIVE DATE | PENDING & PRIOR DATE |
|------------------------------------------------------------|-------------|------------------|----------------------|
| Public Officials Liability/ Employment Practices Liability | Claims Made | 5/1/2012 | |

Coverage:

| DESCRIPTION | LIMIT TYPE | AMOUNT |
|------------------------|------------|-------------|
| Annual Aggregate Limit | Limit | \$2,000,000 |
| Each Wrongful Act | Limit | \$2,000,000 |

Deductibles / Self-Insured Retention

| TYPE | COVERAGE | AMOUNT |
|------------|-----------------------------------|-----------|
| Retention | Each Wrongful Act (including LAE) | \$100,000 |
| Deductible | *Annual Aggregate Deductible | \$275,000 |

Any Other Continuity or Specific Dates/Limits applicable to the Claims-Made Conditions:

| COVERAGE | CONTINUITY DATE | LIMITS | CONDITIONS |
|------------------------------------------------------------|-----------------|--------|------------|
| Public Officials Liability/ Employment Practices Liability | | | |

Claims Made Coverage:

Should you elect to change carriers (if a new retroactive date is provided) or non-renew this policy, a supplemental extended reporting endorsement may be available subject to policy terms and conditions. You must request the extended reporting period in writing to the carrier within ([Days To Extend]) days of the expiration date. The cost of this extended reporting period is [Percent Cost]% of the annual premium and is fully earned. The extended reporting period extends only to those claims made during the extended reporting period for wrongful acts that occurred prior to the expiration date and would have been covered by the policy. Claims must be reported to the carrier within ([Days To Report]) days of the end of the policy period. The extended reporting period does not increase the limits of liability and is subject to all policy terms, conditions and exclusions.

Definition of Claim:

DESCRIPTION

Refer to attached policy form

Incident or Claim Reporting Provision:

DESCRIPTION

Refer to attached policy form





Run Off Provisions:

| DESCRIPTION | PREMIUM AMOUNT | PREMIUM DUE DATE | LENGTH | % OF EXPIRING PREMIUM |
|-------------------------------|----------------|------------------|--------|-----------------------|
| Refer to attached policy form | | | | |

Endorsements include, but are not limited to:

| DESCRIPTION | | | | |
|-----------------------------|-------------------------------|--------------------|-------------|--|
| Public Officials Liability/ | Employment Practices Liabilit | ty Coverage Form - | POEPCM 0416 | |
| Coverage Retention For | m - ILSIR 0716 | | | |
| Mandatory State Forms | | | | |
| Non-Stacking of Limits E | Endorsement - ILNONSTACK | 0416 | | |
| Annual Aggregate Deduc | ctible - Manuscript | | | |

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION

*Annual Aggregate Retention is for all coverages written by Safety National other than Workers' Compensation and Auto Physical Damage. It does not include coverage provided by other carriers. Excess Annual Aggregate Retention Protection Limit of \$1,000,000

 Premium
 \$31,430.00

 ESTIMATED PROGRAM COST
 \$31,430.00

Subject to Audit: Not Auditable



Coverage:

Public Entity Package - Law Enforcement Liability

Carrier:

Safety Specialty Insurance Company

Policy Period:

1/1/2021 to 1/1/2022

Form Number:

LELPOF 0416

Form Type:

| COVERAGE | FORM TYPE | RETROACTIVE DATE | PENDING & PRIOR DATE |
|---------------------------|------------|------------------|----------------------|
| Law Enforcement Liability | Occurrence | Not Applicable | Not Applicable |

Coverage:

| DESCRIPTION | LIMIT TYPE | AM OUŅT |
|------------------------|------------|-------------|
| Annual Aggregate Limit | Limit | \$5,000,000 |
| Each Occurrence Limit | Limit | \$5,000,000 |

Deductibles / Self-Insured Retention

| TYPE | COVERAGE | AMOUNT |
|------------|---------------------------------|-----------|
| Retention | Each Occurrence (including LAE) | \$250,000 |
| Deductible | *Annual Aggregate Deductible | \$275,000 |

Endorsements include, but are not limited to:

| DESCRIPTION | |
|------------------------------------------------------|--|
| Law Enforcement Liability Form - LELPOF 0416 | |
| Coverage Retention Form - ILSIR 0716 | |
| Mandatory State Forms | |
| Non-Stacking of Limits Endorsement - ILNONSTACK 0416 | |
| Annual Aggregate Deductible - Manuscript | |

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION

*Annual Aggregate Retention is for all coverages written by Safety National other than Workers' Compensation and Auto Physical Damage. It does not include coverage provided by other carriers. Excess Annual Aggregate Retention Protection Limit of \$1,000,000.

Premium \$71,387.00

ESTIMATED PROGRAM COST \$71,387.00

Subject to Audit: Not Auditable





Coverage:

Public Entity Package - Excess Liability

Carrier:

Safety National Casualty Corporation

Policy Period: 1/1/2021 to 1/1/2022

Form Type:

| COVERAGE | FORM TYPE | RETROACTIVE DATE | PENDING & PRIOR DATE |
|----------|------------|------------------|----------------------|
| Umbrella | Occurrence | Not Applicable | Not Applicable |

Coverage:

| DESCRIPTION | LIMIT TYPE | AMOUNT | |
|-------------------------|------------|--------------|--|
| General Aggregate Limit | Limit | \$8,000,000 | |
| Each Occurrence Limit* | Limit | *\$8,000,000 | |

Underlying Policies:

| COVERAGE | DESCRIPTION | LIMIT | CARRIER NAME | EFFECTIVE DATE | EXPIRATION DATE |
|----------------------------------------|-------------------------|-------------------------|-----------------------------------------|-------------------|--------------------|
| General Liability Coverage | Limits of Liability | \$2,000,000/\$4,000,000 | Safety National Casualty Corporation | 1/1/2021 | 1/1/2022 |
| Automobile | Combine Single Limit | \$2,000,000 | Safety National Casualty Corporation | 1/1/2021 | 1/1/2022 |
| Public Officials Liability Coverage | Limits of Liability | \$2,000,000/\$2,000,000 | Safety Specialty Insurance Company | 1/1/2021 | 1/1/2022 |
| Employers Liability | Limits of Liability | \$2,000,000 | Safety National Casualty Corporation | 1/1/2021 | 1/1/2022 |

Endorsements include, but are not limited to:

DESCRIPTION

DESCRIPTION

Total Pollution Exclusion

Commercial Excess Coverage Form - CX 00 01

Exclusions include, but are not limited to:

| DESCRIPTION | | | |
|------------------------------------------------------------------------------------------|----------------|--------------|------|
| Workers' Compensation, Auto No Fault, Uninsured/ Underinsured Motorists, Disability, and | d Unemployment | Compensation | Laws |
| Polluțion (Hostile Fire Exception) | | | |
| Asbestos | | | |
| Physical Damage to Property in Insured's Care, Custody, or Control | | | |
| Auto First-party Coverage | | | |
| Pollution (Auto) | | | |
| Products Recall | | | |
| Employment Related Practices Exclusion | | | |
| | | | |





Exclusions include, but are not limited to:

DESCRIPTION

Professional Liability Exclusion

Retained Limit

Failure to Supply XLM 001 / Manuscript

(+ Additional Surcharges, Taxes and Fees as applicable)

Binding Requirements:

DESCRIPTION

Subject to Signed TRIA Form

| Premium | | \$59,114.00 |
|---------------------|-------------------------------|-------------|
| ESTIMATED PROGRAM | COST | \$59,114.00 |
| TRIA/TRIPRA PREMIUM | Tayon and Food an applicable) | \$1,773.00 |

Gallagher

Insurance | Risk Management | Consultin



Coverage:

Cyber Liability

Carrier:

Underwriters at Lloyd's London

Policy Period: 1/1/2021 to 1/1/2022

Form Number:

Cyber Wording Edition: January 17, 2020

Coverage:

| DESCRIPTION | AMOUNT |
|---------------------------------------------------------|-------------|
| I. Each Claim Aggregate Limit of Liability | \$3,000,000 |
| II. Each Event Aggregate Limit of Liability | \$3,000,000 |
| Per Claim Sublimit of Liability Includes Claim Expenses | |
| A. Privacy Liability (including Employee Privacy) | \$3,000,000 |
| B. Privacy Regulatory Claims Coverage | \$3,000,000 |
| C. Security Breach Response Coverage | \$3,000,000 |
| D. Security Liability | \$3,000,000 |
| E Multimedia Liability | \$3,000,000 |
| F. Cyber Extortion | \$3,000,000 |
| G. Business Income and Digital Asset Restoration | |
| 1.Business Income Loss | \$3,000,000 |
| 2. Restoration Costs | \$3,000,000 |
| 3. Reputation Business Income Loss | \$3,000,000 |
| 4. Systems integrity Restoration Loss | \$250,000 |
| H. PCI DSS Assessment | \$3,000,000 |
| I. Electronic Fraud | |
| 1. Phishing Loss | \$50,000 |
| 2. Services Fraud Loss | \$100,000 |
| 3. Reward Fund Loss | \$50,000 |
| 4. Personal Financial Loss | \$250,000 |
| 5. Corporate Identify Theft Loss | \$250,000 |
| 6. Telephone Hacking Loss | \$100,000 |
| 7. Direct Financial Loss (Funds Transfer Fraud) | \$100,000 |
| 8. Cyber Deception | \$100,000 |
| Per Claim Sublimit of Liability Includes Claim Expenses | |
| A. Court Attendance Costs | \$100,000 |
| B. Bodily Injury / Property Damage Liability | \$250,000 |
| C. TCPA | \$100,000 |





Coverage:

| DESCRIPTION | AMOUNT |
|---------------------------------------|-----------|
| D. HIPAA Corrective Action Plan Costs | \$50,000 |
| E Post Breach Response | \$25,000 |
| F. Independent Consultant | \$25,000 |
| G. Outsourced Provider | \$250,000 |
| H. Computer System | \$250,000 |

Deductibles / Self-Insured Retention

| COVERAGE | AMOUNT |
|-------------------------------------------------------------------------------------|----------|
| A. Privacy Liability (including Employee Privacy) - Each Claim or Event & Aggregate | \$10,000 |
| B. Privacy Regulatory Claims Coverage - Each Claim or Event & Aggregate | \$10,000 |
| C. Security Breach Response Coverage - Each Claim or Event & Aggregate | \$10,000 |
| D. Security Liability - Each Claim or Event & Aggregate | \$10,000 |
| E. Multimedia Liability - Each Claim or Event & Aggregate | \$10,000 |
| F. Cyber Extortion - Each Claim or Event & Aggregate | \$10,000 |
| G. Business Income and Digital Asset Restoration - Each Claim or Event & Aggregate | \$10,000 |
| H. PCI DSS Assessment - Each Claim or Event & Aggregate | \$10,000 |
| I. ⊟ectronic Fraud: | |
| 1. Phishing Loss - Each Claim or Event & Aggregate | \$10,000 |
| 2. Services Fraud Loss - Each Claim or Event & Aggregate | \$10,000 |
| 3. Reward Fund Loss - Each Claim or Event & Aggregate | \$10,000 |
| 4. Personal Financial Loss - Each Claim or Event & Aggregate | \$10,000 |
| 5. Corporate Identify Theft Loss - Each Claim or Event & Aggregate | \$10,000 |
| 6. Telephone Hacking Loss - Each Claim or Event & Aggregate | \$10,000 |
| 7. Direct Financial Loss (Funds Transfer Fraud) - Each Claim or Event & Aggregate | \$10,000 |
| 8. Cyber Deception - Each Claim or Event | \$5,000 |
| Waiting Period | 12 Hours |

Any Other Continuity or Specific Dates/Limits applicable to the Claims-Made Conditions:

| COVERAGE | CONTINUITY DATE | LIMITS | CONDITIONS |
|-----------------|-----------------|--------|------------|
| Cyber Liability | | | |

Claims Made Coverage:

Should you elect to change carriers (if a new retroactive date is provided) or non-renew this policy, a supplemental extended reporting endorsement may be available subject to policy terms and conditions. You must request the extended reporting period in writing to the carrier within ([Days To Extend]) days of the expiration date. The cost of this extended reporting period is [Percent Cost]% of the annual premium and is fully earned. The extended reporting period extends only to those claims made during the extended reporting period for wrongful acts that occurred prior to the expiration date and would have been covered by the policy. Claims must be reported to the carrier within ([Days To Report]) days of the end of the policy period. The extended reporting period does not increase the limits of liability and is subject to all policy terms, conditions and exclusions.





Definition of Claim:

DESCRIPTION

Claim means:

- 1. A written demand received by You for money or services, including the service of a civil suit or institution of arbitration proceedings;
- 2. Initiation of a civil suit against You seeking injunctive relief;
- 3. Awritten notice of an alleged Privacy Wrongful Act or Security Wrongful Act from a third party.
- 4. Solely with respect to Coverage B.; a Regulatory Claim made against You; or.
- 5. Solely with respect to Coverage H., written notice to You of a PCI DSS Assessment.

Multiple Claims arising from the same or a series of related or repeated Wrongful Acts, acts, errors, or omissions or from any continuing Wrongful Acts, acts, errors, or omissions shall be considered a single Claim for the purposes of this Policy, irrespective of the number of claimants or You involved therein. All such related Claims shall be deemed to have been first made at the time the earliest such Claim was made or deemed made under Section IX.A.

Incident or Claim Reporting Provision:

DESCRIPTION

Refer to attached policy form

Run Off Provisions:

| DESCRIPTION | PREMIUM AMOUNT | PREMIUM DUE DATE | LENGTH | % OF EXPIRING PREMIUM |
|-------------------------------|----------------|------------------|--------|-----------------------|
| Refer to attached policy form | | | | |

Endorsements include, but are not limited to:

DESCRIPTION

Cyber Deception Endorsement (If elected)

Short Rate Cancellation Endorsement (USA) - NMA 45

Several Liability Clause - LSW 1001 (Insurance) 08/94

Premium Payment Clause - LSW3001 September 2008

Breach Response Team Endorsement

Cyber and Privacy Liability Policy Form - Cyber Wording Edition: January 17, 2020

Exclusions include, but are not limited to:

DESCRIPTION

Nuclear Incident Exclusion - NMA 1256

Radioactive Contamination Exclusion - NMA 1477

Sanction Limitation and Exclusion Clause - LMA3100, 15 September 2010

Binding Requirements:

DESCRIPTION

Signed Cyber Insurance Renewal Application.





Other Significant Terms and Conditions/Restrictions:

| DESCRIPTION | |
|-----------------------------------------------------------------|---|
| Premium Includes Cyber Deception Premium: \$450.00 (if Elected) | |
| Territorial Limits Worldwide | |
| Retroactive Date Full Prior Acts | |
| Choice of Law Illinois | V |

| Premium | \$14,121.00 |
|------------------------------|-------------|
| Taxes | |
| Stamping Office Fee - RPSTIL | \$10.59 |
| Surplus Lines Tax - RPSTIL | \$494.24 |
| Total Taxes | \$504.82 |
| ESTIMATED PROGRAM COST | \$14.625.82 |

Optional Coverages:

| DESCRIPTION | PREMIUM |
|-----------------------------------------|-------------|
| Cyber -\$3M, \$250K Cyber Deception | \$15,038.00 |
| Cyber Premium: \$3M, No Cyber Deception | \$13,243.00 |

Subject to Audit: Not Auditable



Coverage:

Airport Liability

Carrier:

QBE Insurance Corporation

Policy Period: 1/1/2021 to 1/1/2022

Form Type:

| COVERAGE | FORM TYPE | RETROACTIVE DATE | PENDING & PRIOR DATE |
|-------------------|------------|------------------|----------------------|
| Airport Liability | Occurrence | Not Applicable | Not Applicable |

Coverage:

| DESCRIPTION | LIMIT TYPE | AMOUNT | BASIS |
|-------------------------------------------------------------------------|------------|--------------|-----------------|
| Bodily Injury & Property Damage resulting from your aviation operations | Limit | \$20,000,000 | |
| Damage to Premises Rented to You | Limit | \$250,000 | |
| Medical Expense Limit | Limit | \$5,000 | Each Person |
| Personal & Advertising Injury | Limit | \$20,000,000 | Aggregate Limit |
| Products/ Completed Operations | Limit | \$20,000,000 | Aggregate Limit |
| Hangar keepers Liability | Limit | \$20,000,000 | Each Aircraft |
| Hangar keepers Liability | Limit | \$20,000,000 | Each Occurrence |
| Airport Liability - Combined Single Limit | Limit | \$20,000,000 | |

Deductibles / Self-Insured Retention

| TYPE | COVERAGE | AMOUNT |
|------------|------------------------------------------|---------|
| Deductible | Hangar keepers Liability - Each Aircraft | \$1,000 |

Endorsements include, but are not limited to:

DESCRIPTION

Additional Insured - Designated Person or Organization (FORM A)-1 - QBAV-2004 (05-11)

Extended Coverage Endorsement (Aviation Liabilities)-1 - AVN-52G IL (10-12)

Airport Expansion Endorsement - 2- 1 - QBAV-2029 (05-11)

Aviation Date Recognition Endorsement with Limited Coverage Grant (Option 4)-1 - QBAV-2047 (05-11)

Non-Owned Aircraft: Liability Endorsement - Coverage A-1 - QBAV-2200 (10-12)

Waiver of Governmental Immunity - QBAV-2281 (05-11)

Cancellation By Us Endorsement (Form B)-1 - QBAV-2347 (05-11)

Policy Form: GL1000

Exclusions include, but are not limited to:

DESCRIPTION

Exception For Certified Act of Terrorism Exclusion Endorsement-1 - QBAV-6004 (02-15)





Binding Requirements:

DESCRIPTION

Subject to Acceptance or Rejection of Terrorism Insurance Coverage

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION

AJG Commission Commission split 50/50 between Aerospace Specialty Group and Gallagher Rolling Meadows, IL

Defense Costs: Yes, outside the policy limits

Total Premium Includes TRIA Premium \$1,719 & Hangar keepers Liability Premium \$7,531

Definition of Claim(s):

An accident during the policy period, including continuous or repeated exposure to substantially the same general harmful conditions which results in Bodily Injury or Property Damage.

Premium \$18,906.00

ESTIMATED PROGRAM COST \$18,906.00

TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable)

INCLUDED

Subject to Audit: Not Auditable



Coverage:

Tank Advantage Pollution Liability

Carrier:

Nautilus Insurance Company

Policy Period:

12/31/2020 to 12/31/2021

Form Number:

ENV CST 101 A CW 03 18

Form Type:

| COVERAGE | FORM | RETROACTIVE | PENDING & |
|------------------------------------------------------------------------------------------------------------------------|----------------|-------------|------------|
| | TYPE | DATE | PRIOR DATE |
| Coverage A & B: Covered Storage Tank Systems Cleanup Costs and Third Party Bodily Injury and Property Damage Liability | Claims Made | | |

Coverage:

| DESCRIPTION | LIMIT TYPE | AMOUNT | BASIS |
|------------------------------------------------------------------------------------------------------------------------|---------------|-------------|---------------------|
| Coverage A & B: Covered Storage Tank Systems Cleanup Costs and Third Party Bodily Injury and Property Damage Liability | Limit | \$1,000,000 | Per Claim |
| Coverage A & B: Covered Storage Tank Systems Cleanup Costs and Third Party Bodily Injury and Property Damage Liability | Limit | \$1,000,000 | Total All Claims |
| Coverage E Defense | Limit | \$250,000 | Per Claim |
| Coverage E Defense | Limit | \$250,000 | Total All Claims |

Deductibles / Self-Insured Retention

| TYPE | COVERAGE | AMOÜNT |
|------------|------------------------------------------------------------------------------------------------------------------------------------|----------|
| Deductible | Coverage A & B: Covered Storage Tank Systems Cleanup Costs and Third Party Bodily Injury and Property Damage Liability - Per Claim | \$25,000 |

Any Other Continuity or Specific Dates/Limits applicable to the Claims-Made Conditions:

| COVERAGE | CONTINUITY DATE | LIMITS | CONDITIONS |
|------------------------------------------------------------------------------------------------------------------------|--------------------|--------|------------|
| Coverage A & B: Covered Storage Tank Systems Cleanup Costs and Third Party Bodily Injury and Property Damage Liability | | | |

Claims Made Coverage:

Should you elect to change carriers (if a new retroactive date is provided) or non-renew this policy, a supplemental extended reporting endorsement may be available subject to policy terms and conditions. You must request the extended reporting period in writing to the carrier within ([Days To Extend]) days of the expiration date. The cost of this extended reporting period is [Percent Cost]% of the annual premium and is fully earned. The extended reporting period extends only to those claims made during the extended reporting period for wrongful acts that occurred prior to the expiration date and would have been covered by the policy. Claims must be reported to the carrier within ([Days To Report]) days of the end of the policy period. The extended reporting period does not increase the limits of liability and is subject to all policy terms, conditions and exclusions.





Definition of Claim:

DESCRIPTION

Refer to attached policy form

Incident or Claim Reporting Provision:

| REPORTING CONDITION TYPE | DESCRIPTION |
|--------------------------|-------------------------------|
| | Refer to attached policy form |

Run Off Provisions:

| DESCRIPTION | PREMIUM AMOUNT | PREMIUM DUE DATE | LENGTH | % OF EXPIRING PREMIUM |
|-------------------------------|----------------|------------------|--------|-----------------------|
| Refer to attached policy form | | | | |

Endorsements include, but are not limited to:

DESCRIPTION

Tank Advantage Pollution Liability Insuring Agreement - ENV CST 101 A CW 03 18

Coinsurance Endorsement - BSUM-1200 (11-18) (This Amendment Shall Apply to Covered Storage Tank Systems 1 at Covered Location 4, 220 Pleasant Street, Dekalb IL; And Covered Storage Tank Systems 1 and 2 at Covered Location 5, 3232 Pleasant Street, Dekalb, IL)

Binding Requirements:

DESCRIPTION

Subject to Receipt and Review of the Following Information:

- Complete the Diligent Effort Confirmation Form
- Copies of Tank and Line Tightness Tests, Dated Within the Last 12 Months or the Last 6 Consecutive Months of Line and Tank Leak Detection Results for all Underground Tank Systems Greater than 20 Years Old. Required Prior to Binding
- Signed Acceptance or Rejection of Terrorism Insurance Coverage Form

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION

Deposit Premium - 100% & Minimum Premium - 100%



| Premium | \$11,861.00 |
|-----------------------------------------------------------------------------|-------------|
| Taxes | |
| Surplus Lines Tax | \$239.60 |
| Total Taxes | \$239.60 |
| Fees | |
| Regulatory Fee | \$59.90 |
| Total Fees | \$59.90 |
| ESTIMATED PROGRAM COST | \$12,160.50 |
| Minimum Earned Premium - | 25.00 % |
| TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable) | \$119.00 |

Schedule:

| Location No. | Location Name | Location Address | No. of Tanks | | Policy Premium | |
|-----------------|-----------------------------------|----------------------------------------|-----------------|-----------|-------------------------------------|-----------------------------------|
| 2 | City of DeKalb Street Division | 1316 Market Street DeKalb, IL 60115 | 3 | | 1,772.00 | |
| Tank No. | Tank Type | Installation | Capacity | Contents | Retroactive . Date Coverage A | Retroactive Date Coverage B |
| 1 | UST | 1/19/1995 | 10,000 | Diesel | 5/1/2016 | 5/1/2016 |
| 2 | UST | 11/15/2002 | 550 | Waste Oil | 5/1/2016 | 5/1/2016 |
| 3 | UST | 1/19/1995 | 12,000 | Gas | 5/1/2016 | 5/1/2016 |

| Location No. | Location Name | Location Address | No. of Tanks | Policy Premium | | |
|-----------------|--------------------------------|-------------------------------------|-----------------|-----------------|-----------------------------------|-----------------------------------|
| 3 | City of DeKalb Public Works | 1216 Market St. DeKalb, IL 60115 | 6 | \$1,686.00 | | |
| Tank No. | Tank Type | Installation | Capacity | Contents | Retroactive Date Coverage A | Retroactive Date Coverage B |
| 1 | AST | 1/1/2003 | 280 | New Lube Oil | 5/1/2016 | 5/1/2016 |
| 2 | AST | 1/1/2003 | 280 | New Lube Oil | 5/1/2016 | 5/1/2016 |
| 3 | AST | 1/1/2003 | 280 | New Lube Oil | 5/1/2016 | 5/1/2016 |
| 4 | AST | 1/1/2003 | 280 | Hydraulic fluid | 5/1/2016 | 5/1/2016 |
| 5 | AST | 1/1/2003 | 280 | Other | 5/1/2016 | 5/1/2016 |
| 6 | AST | 1/1/2003 | 280 | Waste Oil | 5/1/2016 | 5/1/2016 |

| Location No. | Location Name | Location Address | No. of Tanks | Policy Premium | | |
|-----------------|------------------------------------|------------------------------------------|-----------------|-------------------|--|-----------------------------------|
| 4 | DeKalb Taylor Municipal Airport | 2200 Pleasant Street DeKalb, IL 60115 | 1 | \$4,609.00 | | |
| Tank No. | Tank Type | Installation | Capacity | Contents Date Dat | | Retroactive Date Coverage B |



UST



Jet fuel 9/17/2016 9/17/2016

| Location No. | Location Name | Location Address | No. of Tanks | Policy Premium | | |
|-----------------|------------------------------------|------------------------------------------|-----------------|----------------|-----------------------------------|-----------------------------------|
| 5 | Dekalb Taylor Municipal Airport | 3232 Pleasant Street DeKalb, IL 60115 | 2 | \$3,794.00 | | |
| Tank No. | Tank Type | Installation | Capacity | Contents | Retroactive Date Coverage A | Retroactive Date Coverage B |
| 1 | UST | 1/1/1989 | 12,000 | Aviation fuel | 9/17/2016 | 9/17/2016 |
| 2 | UST | 1/1/1989 | 12,000 | Jet fuel | 9/17/2016 | 9/17/2016 |

12,000

1/19/1981



Coverage:

Excess Police Professional Liability

Carrier:

Indian Harbor Insurance Company

Policy Period: 1/1/2021 to 1/1/2022

Form Type:

| COVERAGE | FORM TYPE | RETROACTIVE DATE | PENDING & PRIOR DATE |
|--------------------------------------|-----------|------------------|----------------------|
| Excess Police Professional Liability | | | |

Coverage:

| DESCRIPTION AMOUNT | |
|--------------------------------------|-----------------------------------|
| Excess Police Professional Liability | \$5,000,000 Excess Of \$5,000,000 |

Deductibles / Self-Insured Retention

| TYPE | COVERAGE | AMOUNT |
|-----------|--------------------------------------|-----------|
| Retention | Excess Police Professional Liability | \$250,000 |

Endorsements include, but are not limited to:

| DESCRIPTION | |
|----------------------------------------------------------------------------------------------------------------|--|
| Notice to Policyholders - Illinois - PN IL 02 | |
| Excess Professional Liability Policy Declarations - PGUXS 03 19 | |
| In Witness - IL MP 9104 0314 IHIC | |
| Schedule of Endorsements -PGUXS 148 0319 | |
| Underlying Schedule -PGUXS 149 0319 | |
| Excess Claims Reporting - PGUXS 150 0319 | |
| Excess Depletion of Underlying Limits -PGUXS 151 0319 | |
| Service of Process - XL-ILSOP | |
| Notice to Policyholders - Fraud Notice - PN CW 01 0915 | |
| Notice to Policyholders - Privacy Policy -PN CW 02 1015 | |
| Notice to Policyholders - U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") - PN CW 05 0914 | |

Binding Requirements:

DESCRIPTION

Subject to As Your Agency is Responsible for the Surplus Lines Filings, We Require the Name of Licensee, Agency Name, Address, And Surplus Lines License Number Prior to Binding, As Well as, A Copy of the License

Subject to Copy of Underlying Binder and Policies when Issued

Subject to Copy of underlying signed and dated application.





| Premium | \$45,581.00 | |
|--------------------------|-------------|--|
| Fees | | |
| Policy Fee | \$245.00 | |
| Total Fees | \$245.00 | |
| ESTIMATED PROGRAM COST | \$45,826.00 | |
| Minimum Earned Premium - | 25.00 % | |



Coverage:

Excess Workers' Compensation

Carrier:

Safety National Casualty Corporation

Policy Period: 1/1/2021 to 1/1/2023

Coverage:

| DESCRIPTION | LIMIT TYPE | AMOUNT | BASIS | |
|---------------------------|------------|-------------|----------------|--|
| Employers Liability Limit | Limit | \$1,000,000 | Per Occurrence | |
| Specific Limit | | Statutory | | |

Deductibles / Self-Insured Retention

| TYPE | COVERAGE | AMOUNT |
|------------------------|-----------------------|-----------|
| Self-Insured Retention | Workers' Compensation | \$650,000 |

Experience Modification Factor(s):

| DESCRIPTION | FACTOR |
|-------------|--------|
| L | 1 |

States:

| DESCRIPTION | STATE |
|------------------|----------------|
| States Covered: | IL . |
| States Excluded: | OH, ND, WA, WY |

Endorsements include, but are not limited to:

DESCRIPTION

General Endorsements applicable to all quote options: Employer - Binding Acts - 0216 00 1291 (XWC)

Option 8708255313 Illinois Mandatory Endorsement(s), If Applicable: Terrorism Risk Insurance Program Reauthorization Act Endorsement - 6000 00 0121 (XWC)

Exclusions include, but are not limited to:

| DESCRIPTION |
|-----------------------------------------------------------------|
| Voluntary Compensation |
| Longshore & Harbor Workers' Act |
| Ow ners or Officers |
| Bodily Injury to an Employee While Employed in Violation of Law |
| Bodily Injury Intentionally Caused by Insured |
| Federal Employers' Liability Act |
| Assumptions under Contract |





Other Significant Terms and Conditions/Restrictions:

DESCRIPTION

Deposit Premium: \$109,900

Premium \$697,465.00

ESTIMATED PROGRAM COST \$697,465.00

Minimum Premium - \$202,629.00

TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable)

Subject to Audit: Voluntary Auditable Exposures:

| STÁTE | CLASS CODE | DESCRIPTION | EXPOSURE | RATE PER \$100 |
|------------|---------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------|-------------------|
| <u>I</u> L | 3724 | Machinery or Equipment Erection or Repair NOC & Drivers | \$244,327 | 5.88 |
| IL | 5506 | Street or Road Construction: Paving or Repaving & Drivers | \$1,224,131 | 8.85 |
| L | 7403 Aircraft/Helicopter Operation: Air Carrier Scheduled/Supplemental: All Other Employees | | \$262,984 | 8.66 |
| L | 7520 | Waterworks Operation & Drivers | \$812,970 | 3.38 |
| L | 7710 | Firefighters & Drivers | \$6,194,225 | 5.80 |
| L | 7720 | Police Officers & Drivers | \$7,043,092 | 2.27 |
| IL | 8810 | Clerical Office Employees NOC | \$2,314,593 | 0.12 |
| IL. | 9410 | Municipal, Township, County or State Employee NOC | \$65,896 | 3.93 |



Premium Summary

The estimated program cost for the options are outlined in the following table:

| LINE OF COVERAGE | | EXPIRING PROGRAM | | PROPOSED PROGRAM | |
|-------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------|
| | | CARRIER EXPIRING COST | | CARRIER | ESTIMATED COST |
| Public Entity Package | Premium Taxes & Fees Total Estimated Cost | Safety National Casualty Corporation (Tokio Marine Holdings, Inc.) | \$168,177.00 \$1,758.44 \$169,935.44 | Safety National Casualty Corporation (Tokio Marine Holdings, Inc.) | \$250,046.00 TBD \$250,046.00 |
| | TRIA Premium | | \$2,348.00 | | \$2,759.00 |
| Excess Law Enforcement Liability | Premium Taxes & Fees Total Estimated Cost | N/A | 4 | Indian Harbor Insurance Copmany | \$4 5 ,581.00 \$245.00 \$45,826.00 |
| | TRIA Premium | | | | N/A |
| Property | Total Estimated Cost TRIA Premium | Federal Insurance Company (Chubb Group of Insurance Companies) | \$61,047.00 Included | Federal Insurance Company (Chubb Group of Insurance Companies) | \$74,634.00 Included |
| Excess Workers' | Total Estimated Cost | Safety National Casualty | \$106,647.00 | Safety National Casualty | \$109,900.00 |
| Compensation | TRIA Premium | Corporation (Tokio Marine Holdings, Inc.) | Included | Corporation (Tokio Marine Holdings, Inc.) | Included |
| Crime | Total Estimated Cost TRIA Premium | Citizens Insurance Company of America (Hanover Insurance Companies) | \$3,103.00 Included | Citizens Insurance Company of America (Hanover Insurance Companies) | \$3,103.00 Included |
| Cyber Liability | Premium Taxes & Fees Total Estimated Cost | Underw riters at Lloyd's London (Underw riters at Lloyd's London) | \$8,743.00 \$313.00 \$9,056.00 | Underw riters at Lloyd's London (Underw riters at Lloyd's London) | \$14,121.00 \$504.82 \$14,625.82 |
| | TRIA Premium | | Included | | Included |
| Airport Liability | Total Estimated Cost | QBE insurance | \$15,125.00 | QBE Insurance Corporation | \$18,906.00 |
| | TRIA Premium | Corporation | Included | (QBE Insurance Group) | Included |





| | | EXPIRING PI | ROGRAM | PROPOSED F | ROGRAM |
|-------------------------------------------------------|-------------------------|----------------------------------------------|-------------------------|-----------------------------------------------------|-------------------------|
| LINE OF CO | VERAGE | CARRIER | EXPIRING COST | CARRIER | ESTIMATED COST |
| Tank Advantage Pollution Liability (Storage Tanks) | Premium Taxes & Fees | Nautilus Insurance Company (W. R. Berkley | \$11,048.00 \$395.00 | Nautilus Insurance Company (W. R. Berkley Group) | \$11,861.00 \$299.50 |
| | Total Estimated Cost | Group) | \$11,443.00 | | \$12,160.50 |
| | TRIA Premium | | \$109.00 | | \$119.00 |
| Gallagher Compensation Ag | reement | | \$47,793.00 | market state of the Winds | \$49,227.00 |
| Total Estimated Program Co. | st | | \$424,149.44 | | \$578,428.30 |

Quote from Underwriters at Lloyd's London (Underwriters at Lloyd's London) is valid until 1/1/2021

Quote from Federal Insurance Company (Chubb Group of Insurance Companies) is valid until 12/6/2020

Quote from Nautilus Insurance Company (W. R. Berkley Group) is valid until 12/31/2020

Quote from QBE Insurance Corporation (QBE Insurance Group) is vaid until 1/1/2021

Quote from Safety National Casualty Corporation (Tokio Marine Holdings, Inc.), etc... is valid until 1/1/2021

Quote from Safety National Casualty Corporation (Tokio Marine Holdings, Inc.) is valid until 2/1/2021

Quote from Citizens Insurance Company of America (Hanover Insurance Companies) is valid until 1/1/2021

Quote from Lloyd's Syndicate 2987 is valid until 1/1/2021

Quote from Safety National Casualty Corporation (Tokio Marine Holdings, Inc.) is valid until 1/1/2021

Quote from Safety National Casualty Corporation (Tokio Marine Holdings, Inc.) is valid until 1/1/2021

Quote from Safety Specialty Insurance Company (Tokio Marine Holdings, Inc.) is valid until 1/1/2021

Quote from Safety Specialty Insurance Company (Tokio Marine Holdings, Inc.) is valid until 1/1/2021

Quote from Indian Harbor Insurance Company (XL Group pIc) is valid until 1/1/2021

Quote from BCS Insurance Company (BCS Insurance Company) is valid until 1/1/2021

Gallagher is responsible for the placement of the following lines of coverage:

BRIT Package

Property

Crime

General Liability

Umbrella

Public Entity Package

Cyber Liability

Airport Liability

Tank Advantage Pollution Liability (Storage Tanks)

Public Officials & Employment Practices Liability

Law Enforcement Liability

Excess Police Professional Liability

Excess Workers' Compensation

It is understood that any other type of exposure/coverage is either self-insured or placed by another brokerage firm other than Gallagher. If you need help in placing other lines of coverage or covering other types of exposures, please contact your Gallagher representative.





Payment Plans

| CARRIER / PAYABLE CARRIER | LINE OF COVERAGE | PAYMENT SCHEDULE | PAYMENT METHOD |
|-----------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------|-------------------|
| Federal Insurance Company (Chubb Group of Insurance Companies) | Property | Annual | Agency Bill |
| Citizens Insurance Company of America (Hanover Insurance Companies) | Crime | Premium Due Annually for 3 Years | Agency Bill |
| Safety National Casualty Corporation (Tokio Marine Holdings, Inc.) | Public Entity Pacakge | Annual Pay Plan. Premiums due within 30 days of binding. Premiums are fully earned when bound. | Agency Bill |
| Underwriters at Lloyd's London (Underwriters at Lloyd's London) | Cyber Liability | Annual | Agency Bill |
| QBE insurance Corporation (QBE insurance Group) | Airport Liability | Full Premium Due 30 Days from Date of Inception | Agency Bill |
| Nautilus Insurance Company (W. R. Berkley Group) | Tank Advantage Pollution Liability (Storage Tanks) | Annual Premium is Due 20 Days from the Effective Date of Coverage | Agency Bill |
| Indian Harbor Insurance Company (XL Group plc) | Excess Police Professional Liability | Annual | Agency Bill |
| Safety National Casualty Corporation (Tokio Marine Holdings, Inc.) | Excess Workers' Compensation | Annual Payment | Agency Bill |



Carrier Ratings and Admitted Status

| PROPOSED INSURANCE COMPANIES | A.M. BEST'S RATING & FINANCIAL SIZE CATEGORY * | ADMITTED/NON-ADMITTED ** |
|---------------------------------------|---------------------------------------------------|--------------------------|
| Argonaut Insurance Company | A-XIV | Admitted |
| BCS Insurance Company | A-VIII | Admitted |
| Citizens Insurance Company of America | A XV | Admitted |
| Federal Insurance Company | A++ XV | Admitted |
| Indian Harbor Insurance Company | A+ XV | Non-Admitted |
| Lloyd's Syndicate 2987 | A XV | Non-Admitted |
| Nautilus Insurance Company | A+ XV | Non-Admitted |
| QBE Insurance Corporation | A XV | Admitted |
| Safety National Casualty Corporation | A+ XV | Admitted |
| Safety Specialty Insurance Company | A+XV | Non-Admitted |
| Underwriters at Lloyd's London | A XV | Non-Admitted |

^{*}Gallagher companies use A.M. Best rated insurers and the rating listed above was verified on the date the proposal document was created.

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A Best's Financial Strength Rating is an independent opinion of an insurer's financial strength and ability to meet its ongoing insurance policy and contract obligations. It is not a warranty of a company's financial strength and ability to meet its obligations to policyholders. Best's Credit Ratings™ are under continuous review and subject to change and/or affirmation. For the latest Best's Credit Ratings™ and Guide to Best's Credit Ratings, visit the A.M. Best website at http://www.ambest.com/ratings.

**If coverage placed with a non-admitted carrier, it is doing business in the state as a surplus lines or non-admitted carrier, and is neither subject to the same regulations as an admitted carrier nor do they participate in any state insurance guarantee fund.

Gallagher companies make no representations and warranties concerning the solvency of any carrier, nor does it make any representation or warranty concerning the rating of the carrier which may change.



Proposal Disclosures





Proposal Disclosures

The following disclosures are hereby made a part of this proposal. Please review these disclosures prior to signing the Client Authorization to Bind or e-mail confirmation.

Proposal Disclaimer

IMPORTANT: The proposal and/or any executive summaries outline certain terms and conditions of the insurance proposed by the insurers, based on the information provided by your company. The insurance policies themselves must be read to fully understand the terms, coverages, exclusions, limitations and/or conditions of the actual policy contract of insurance. Policy forms will be made available upon request. We make no warranties with respect to policy limits or coverage considerations of the carrier.

Compensation Disclosure

- 1. Gallagher Companies are primarily compensated from the usual and customary commissions, fees or, where permitted, a combination of both, for brokerage and servicing of insurance policies, annuity contracts, guarantee contracts and surety bonds (collectively "insurance coverages") handled for a client's account, which may vary based on market conditions and the insurance product placed for the client.
- 2. In placing, renewing, consulting on or servicing your insurance coverages, Gallagher companies may participate in contingent and supplemental commission arrangements with intermediaries and insurance companies that provide for additional compensation if certain underwriting, profitability, volume or retention goals are achieved. Such goals are typically based on the total amount of certain insurance coverages placed by Gallagher with the insurance company, not on an individual policy basis. As a result, Gallagher may be considered to have an incentive to place your insurance coverages with a particular insurance company. If you do not wish to have your commercial insurance placement included in consideration for additional compensation, contact your producer or service team for an Opt-out form.
- 3. Gallagher Companies may receive investment income on fiduciary funds temporarily held by them, or from obtaining or generating premium finance quotes, unless prohibited by law.
- 4. Gallagher Companies may also accessor have an ownership interest in other facilities, including wholesaters, reinsurance intermediaries, captive managers, underwriting managers and others that act as intermediaries for both Gallagher and other brokers in the insurance marketplace some of which may earn and retain customary brokerage commission and fees for their work.

If you have specific questions about any compensation received by Gallagher and its affiliates in relation to your insurance placements, please contact your Gallagher representative for more details.

In the event you wish to register a formal complaint regarding compensation Gallagher receives from insurers or third-parties, please contact Gallagher via e-mail at Compensation_Complaints@ajg.comor by regular mail at:

Chief Compliance Officer Gallagher Global Brokerage Arthur J. Gallagher & Co. 2850 Golf Rd. Rolling Meadows, IL 60008

TRIA/TRIPRA Disclaimer

If this proposal contains options to purchase TRIA/TRIPRA coverage, the proposed TRIA/TRIPRA program may not cover all terrorism losses. While the amendments to TRIA eliminated the distinction between foreign and domestic acts of terrorism, a number of lines of coverage excluded under the amendments passed in 2005 remain excluded including commercial automobile, burglary and theft insurance; surety insurance, farm owners multiple perils and professional liability (although directors and officers liability is specifically included). If such excluded coverages are required, we recommend that you consider purchasing a separate terrorism policy. Please note that a separate terrorism policy for these excluded coverages may be necessary to satisfy loan covenants or other contractual obligations. TRIPRA includes a \$100 billion cap on insurers' aggregate liability.

The TRIPRA program increases the amount needed in total losses by \$20 million each calendar year before the TRIPRA program responds from the 2015 trigger of \$100 million to \$200 million by the year 2020.

TRIPRA is set to expire on December 31, 2020. There is no certainty of extension, thus the coverage provided by your insurers may or may not extend beyond December 31, 2020. In the event you have loan covenants or other contractual obligations requiring that TRIA/TRIPRA be maintained throughout the duration of your policy period, we recommend that a separate "Stand Alone" terrorism policy be purchased to satisfy those obligations.





Property Estimator Disclaimer

These property values were obtained using a desktop Property Estimator software operated by non-appraisal professionals. These property values represent general estimates which are not to be considered a certified appraisal. These property values include generalities and assumptions that may produce in accurate values for specific structures.



Client Signature Requirements





Coverages for Consideration

Overview

- · A proposal for any of the coverages can be provided.
- The recommendations and considerations summarized in this section are not intended to identify all exposures.
- Since Gallagher does not handle your complete insurance program, these recommendations only reflect items within our scope of responsibility.



Client Authorization to Bind Coverage

After careful consideration of Gallagher's proposal dated 12/18/2020, we accept the following coverage(s). Please check the desired coverage(s) and note any coverage amendments below:

| | COVERAGE/CARRIER | DESCRIPTION / MAJOR DIFFERENCES |
|---------------------|----------------------------------------------------|-----------------------------------------------------------------|
| Accept Reject | Property | 以中央公司产生(公司支付金)等 (1) |
| | Federal Insurance Company | |
| □ Accept X Reject | TRIA | |
| Accept Reject | Public Entity Package | |
| X Option # 1 | Safety National Casualty Corporation | Recommended: \$10MM Except \$5MM LEL, \$250k LEL SR (\$250,046) |
| □ Option # 2 | Safety National Casualty Corporation | \$5MM, \$250k LBL SIR (226,846) |
| □ Option #3 | Safety National Casualty Corporation | \$5MM, \$250k SIR All Line |
| ☐ Accept X Reject | TRIA | 原设的。 \$745 55 0 00 5 56 6 56 6 10 10 10 |
| Accept Reject | Cyber Liability | |
| Option #1 | Underwriters at Lloyd's London | Recommended: \$3M, \$100K Cyber Deception (\$14,121) |
| □ Option # 2 | Underwriters at Lloyd's London | \$3M, \$250k Cyber Deception (\$15,038) |
| □ Option #3 | BCS Insurance Company | \$3M, No Cyber Deception (\$13,243) |
| □ Accept Reject | TRIA | |
| Accept Re hot | Airport Liability | THE SERVEY PROPERTY OF |
| | QBE Insurance Corporation | |
| □ Accept XReject | TRIA | |
| Accept Reject | Tank Advantage Pollution Liability (Storage Tanks) | |
| | Nautilus Insurance Company | |
| Accept Reject | TRIA | |
| Accept Reject | Excess Police Professional Liability | Service of the service of the service of |
| | hdian Harbor Insurance Company | |
| ☐ Accept XReject | TRIA | |
| Accept Reject | Excess Workers' Compensation | |
| | Safety National Casualty Corporation | |
| TRIA Cannot Be Reje | ected | |





The above coverage may not necessarily represent the entirety of available insurance products. If you are interested in pursuing additional coverages other than those addressed in the coverage considerations included in this proposal, please list below:

Producer/ Insured Coverage Amendments and Notes:

Exposures and Values

We confirm the payroll, values, schedules, and other data contained in the proposal, and submitted to the underwriters, are compiled from information provided by you and we acknowledge it is our responsibility to see that such information is updated and maintained accurately. For renew alpolicies, if no updates were provided to Gallagher, the values, exposures and operations used were based on the expiring policies.

Provide Quotations or Additional Information on the Following Coverage Considerations:

Gallagher recommends that you purchase the following additional coverages for which you have exposure. By rejecting a quotation for this valuable coverage, you understand that there will be no coverage and agree to hold Gallagher harmless in the event of a loss.

Other Services to Consider

□ Yes MNo- CORE360™ Loss Control Portal
□ Yes MNo- eRiskHub

Gallagher's liability to Client arising from any acts or ornissions of Gallagher shall not exceed \$20 million in the aggregate.

Gallagher shall only be liable for actual damages incurred by Client, and shall not be liable for any indirect, consequential or punitive damages or attorneys' fees. No claim or cause of action, regardless of form (tort, contract, statutory, or otherwise), arising out of, relating to or in any way connected with this Agreement or any Services provided hereunder may be brought by either party any later than two (2) years after the accrual of such claim or cause of action.

Gallagher has established security controls to protect Client confidential information from unauthorized use or disclosure. For additional information, please review Gallagher's Privacy Policy located at https://www.ajg.com/privacy-policy/.





I have read, understand and agree that the above information is correct and has been disclosed to us prior to authorizing Gallagher to bind coverage and/or provide services to us.

| Copy of DeKalb Company Signature | East Welles | Print Name (Specify T | itie) | U |
|------------------------------------|-------------|-----------------------|----------|---|
| Day Tulks | Signature | City o | F DeKalb | |
| | Signature | | ~~~ | |
| | Signature | a | y Olehan | |
| oldi istoi e | in 1 1 | Signature | | |

CLIENT SERVICES AGREEMENT

This Client Services Agreement (this "Agreement") is made and entered into as of the 31st day of December, 2020 (the "Effective Date") by and between CITY OF DEKALB, an Illinois Municipality ("Client"), and Arthur J. Gallagher Risk Management Services, Inc., an Illinois corporation, and its licensed brokerage affiliates ("Gallagher"). Client and Gallagher shall each be referred to herein as a "Party" and collectively as the "Parties."

WHEREAS, Gallagher is a global insurance brokerage and risk management services firm, and Client desires to retain Gallagher to provide certain services, as further described on <u>Exhibit A</u> attached hereto (collectively, the "Services").

NOW, THEREFORE, in consideration of the mutual promises contained herein, Gallagher and Client hereby agree as follows:

I. TERM AND TERMINATION

This Agreement shall commence on the Effective Date and continue for a term of one (1) year. This Agreement shall automatically renew on the first anniversary of the Effective Date and annually thereafter for consecutive additional periods of one (1) year each. This Agreement may be terminated by either Party at any time upon thirty (30) days' prior written notice. In the event of any such termination, Gallagher will work with Client during such 30-day period to transition its account as directed.

II. SERVICES

Gallagher will provide the Services for Client as set forth on Exhibit A and incorporated herein, which Exhibit A may be amended from time to time as agreed upon in writing by the Parties. For Services that specifically include insurance placement by Gallagher as the broker, Client hereby authorizes Gallagher to represent and assist Client in all discussions and transactions with insurance companies relating to the lines of insurance set forth on Exhibit A when acting as Client's insurance broker, provided that Gallagher shall not place any insurance on behalf of Client unless so authorized by Client in writing. In addition, Services that include the placement of insurance coverage require the following:

- A. Client shall provide Gallagher with all information and documentation that may be relevant to the applicable risks that Client would like to insure, as requested by Gallagher and/or underwriters from which Gallagher intends to secure quotes. This information shall include any facts material to a fair assessment of the risk by underwriters, including risk exposures and loss experience, and shall be updated as information changes or is discovered after inception of coverage. Client's failure to fully and completely disclose all such information could result in a carrier declining coverage for a specific loss or voiding Client's insurance coverage altogether.
- B. Gallagher will consult with Client regarding the terms of the insurance quotes received, and Client shall have sole discretion in the selection of the ultimate insurance markets and policies chosen, as well as any other decisions involving Client's risk management, risk transfer and/or loss prevention needs. Gallagher will use reasonable efforts to secure insurance coverages on Client's behalf and as directed by Client. Client must read all coverage proposals and policies carefully, as actual coverage is determined by the applicable policy language. Gallagher will provide guidance to Client regarding Client's policy or coverage inquiries. In the event an insurer cancels or refuses to issue a particular policy, Gallagher will use reasonable efforts to obtain replacement coverage from another insurer.
- C. Client is responsible for notifying applicable insurance companies directly in connection with any claims, demands, suits, notices of potential claims or any other matters in accordance with the terms and conditions of Client's policies. Upon request, Gallagher will assist Client in determining applicable claim reporting requirements.

D. Client has no obligation to purchase an insurance product through Gallagher.

III. COMPENSATION, TAXES AND FEES

- A. Client shall pay Gallagher fees for the Services set forth on Exhibit A. Where permitted, the Services may include fees in lieu of or in addition to commission for placement of insurance. If Gallagher receives fees for insurance placement, the policy(ies) will be listed in Exhibit A, along with the fee for that insurance placement. Fees for post insurance placement Services may also be included in Exhibit A.
- B. Gallagher's fees under this Agreement shall be fully earned on the Effective Date (and any anniversary thereof). All amounts shall be due and payable to Gallagher in U.S. dollars, within thirty (30) days after Client's receipt of the applicable invoice. Any amounts not paid when due will accrue interest at the rate of one and one-half percent (1.5%) per month or the highest rate permitted by applicable law, whichever is less. Client shall inform Gallagher in the event that Client's business operations change substantially, including the applicable risks insured. Under such circumstances, Client and Gallagher will negotiate in good faith to adjust the amount of commission and/or fees to be paid to Gallagher hereunder.
- C. Where applicable, insurance coverage placements and other Services provided by Gallagher may require the payment of federal excise taxes, surplus lines taxes, stamping or other fees to the internal Revenue Service, various State(s) departments of revenue, state regulators, boards or associations. In such cases, Client is responsible for the payment of such taxes and/or fees, which Gallagher will separately identify on related invoices. Under no circumstances will these taxes or other related fees or charges be offset against fees or, commissions due to Gallagher hereunder.

IV. ADDITIONAL COMPENSATION AND FEES

- A. In addition to the fees and/or commissions set forth in <u>Exhibit A</u> or otherwise described herein, Gallagher may also receive interest or other investment income on funds temporarily held by it, such as premiums or return premiums. Other parties, such as excess and surplus lines brokers, wholesalers, reinsurance intermediaries, underwriting managers, captive managers and similar parties, some of which may be owned in whole or in part by Gallagher's corporate parent, may earn and retain usual and customary commissions and fees in the course of providing insurance products to clients.
- B. Any compensation that Gallagher receives from insurance carriers may differ depending on the market and the insurance product placed on Client's behalf. Gallagher may receive additional compensation from insurance carriers in the form of contingent and supplemental commissions, bonus commissions, overrides or expense reimbursaments. Any such fees or commission will not constitute compensation to Gallagher per Section III above.
- C. Client is responsible for payment of premiums for all insurance placed by Gallagher on its behalf. If any amount is not paid in full when due, including premium payments to insurance companies or premium finance companies, such nonpayment will constitute a material breach of this Agreement that will allow Gallagher to immediately terminate this Agreement upon written notice to Client, at its sole option. Further, the applicable insurance carrier may terminate the associated coverage for nonpayment in addition, and not in lieu of the right to terminate, Gallagher reserves the right to apply return premiums or any other payment received by Gallagher on Client's behalf to any amounts owed by Client to Gallagher unless, and solely to the extent that, such return premiums or other payments are disputed by Client.

V. CONFIDENTIALITY & DATA PRIVACY

A. As used in this Agreement, Confidential Information means any nonpublic, proprietary or personal data and information furnished by either Party or its agents or representatives to the other Party or its agents and representatives, whenever furnished and regardless of the manner or media in which

such information is furnished, which the receiving Party knows or reasonably should know to be confidential. Each Party shall treat Confidential Information as confidential and only use it in the performance of its obligations under this Agreement.

- B. The Parties acknowledge that Confidential Information includes personal data provided to Gallagher by Client for the benefit of Client and/or its employees to facilitate the placement of insurance and/or the Services set forth in Exhibit A. Both Parties also agree that the Confidential Information may include information that alone, or in combination with other information, uniquely identifies an individual. Client agrees that Gallagher is permitted to disclose and transfer Client's Confidential Information to Gallagher's affiliates, agents or vendors that have a need to know the Confidential Information in connection with the Services provided under this Agreement (including insurance carriers, as necessary, for quoting and/or placing insurance coverages). In addition, Gallagher may also utilize anonymized/de-identified Client data in connection with data analytics, service enhancement initiatives and similar business purposes. Either Party may also disclose such information to the extent required to comply with applicable laws or regulations or the order of any court or tribunal. Gallagher has established security controls to protect Client confidential information from unauthorized use or disclosure. For additional information, please review Gallagher's Privacy Policy located at https://www.ajg.com/privacy-policy/.
- C. Both Gallagher and Client agree to comply with all state and federal laws, rules, and orders that relate to privacy and data protection which are, or which in the future may be, applicable to Confidential Information, the Services or the performance of obligations under this Agreement. Upon request, Gallagher will cooperate with Client pursuant to applicable law(s) to comply with requests from individuals regarding their personal information.

VI. DISPUTE RESOLUTION

- A. In the event a dispute between the Parties arising out of or relating to this Agreement or the relationship created by this Agreement ("Dispute"), the Parties agree to resolve that Dispute by mediation. If mediation fails to resolve the Dispute, the Parties agree to binding arbitration. The Parties waive any and all rights they may have to commence litigation in court to resolve a Dispute, and specifically waive any and all rights to pursue relief by class action or mass action in court or through arbitration. For the avoidance of doubt, consistent with the provisions that follow, the Parties do not waive the ability to seek a court order of injunction in aid of the mediation and arbitration required by this Agreement.
- B. A Party wishing to assert a Dispute shall do so by providing a written notice ("Notice") of the claim to the American Arbitration Association ("AAA") in accordance with its Commercial Arbitration Rules and Mediation Procedures, unless specifically excluded under Section VI.A of this Agreement. All Dispute resolutions shall take place in Chicago, IL, unless otherwise agreed by the Parties. The Parties will equally divide all costs of the mediation and arbitration proceedings and will each pay their own attorney fees. All matters will be before a neutral, impartial and disinterested mediator or arbitrator(s) that have at least 20 years' experience in commercial and insurance coverage disputes, which may be based in legal practice, insurance company or insurance brokerage practice, or a combination thereof.
- C. Mediation will occur within sixty (60) days of filing the Notice with the AAA. Mediation results will be reduced to a Memorandum of Understanding signed by both Parties and the mediator. A Dispute that is not resolved in mediation will commence to binding arbitration. For Disputes in excess of \$500,000, either Party may elect to have the Dispute heard by a panel of three (3) arbitrators. The award of the arbitrator(s) shall be accompanied by a reasoned opinion prepared and signed by the arbitrator(s). Except as may be required by law, neither a Party nor a mediator or arbitrator may disclose the existence, content or results of any Dispute or its dispute resolution proceeding without the prior written consent of both Parties.

VII. LIABILITY LIMITATIONS

Gallagher's liability to Client arising from any acts or omissions of Gallagher shall not exceed \$20 million in the aggregate. Without limiting the foregoing, each Party shall only be liable for actual damages incurred by the other Party, and shall not be liable for any indirect, special, exemplary, consequential, reliance, or punitive damages or for any attorneys' fees other than as described in Section VIII.A below (whether incurred in a dispute or an action against the other, or as alleged damages that any Party incurred in any insurance coverage dispute, or otherwise). No claim or cause of action, regardless of form (tort, contract, statutory, or otherwise), arising out of, relating to or in any way connected with this Agreement or any Services provided hereunder may be brought by either Party any later than two (2) years after the accrual of such claim or cause of action.

VIII. MISCELLANEOUS

- A. <u>Indemnification</u>. Each Party agrees to defend, Indemnify and hold the other Party and its affiliates and their respective directors, officers, employees and agents harmless from any and all losses, liabilities, exposures, damages, and all related costs and expenses, including reasonable legal fees, to the extent arising from or relating to any third party claims, demands, suits, allegations, or causes or threats of action based on the Indemnifying Party's: (i) breach of any representation, warranty or covenant made by such Party hereunder, or (ii) grossly negligent acts or omissions or intentional misconduct provided, however, that the indemnifying Party's Indemnification obligations hereunder shall be reduced to the extent that such losses and damages arise from the acts or omissions of the other Party or its employees or agents.
- B. <u>Advisory Services</u>. The Services provided by Gallagher, its employees and affiliated companies do not constitute legal or tax advice. Client must consult with its own legal and financial advisors to become fully apprised of any legal or financial implications to its business.
- C. <u>Assignment</u>. This Agreement shall apply to and bind the successors and assigns of the Parties hereto, including, in the event of a Party's insolvency, debtors-in-possession and any appointed trustee or administrator. This Agreement shall not be assignable by either Party, except with the prior written consent of the other Party; provided, however, that either Party may assign this Agreement to an affiliate or in the event of a merger or sale, provided the assignee is willing and able to assume such Party's obligations hereunder.
- D. <u>Independent Contractor</u>. Gallagher is engaged to perform Services as an independent contractor of Client and not as an employee or agent of Client, and will not be operating in a fiduciary capacity.
- E. <u>Governing Law & Venue</u>. This Agreement and any Dispute relating to or arising out of this Agreement shall be governed by the laws of the State of Illinois, without regard to its conflict of law rules. Any litigation under Section VI.A of this Agreement shall be brought in federal or state court in Cook County, Illinois.
- F. Force Majeure. Neither Party shall be liable to the other for any delay or failure to perform any of its obligations under this Agreement (other than payment obligations) as a result of flood, earthquake, storm, other act of God, fire, derailment, accident, labor dispute, explosion, war, act of terrorism, sabotage, insurrection, riot, embargo, court injunction or order, act of government or governmental agency or other similar cause beyond its reasonable control.
- G. <u>Counterparts</u>. This Agreement may be executed in multiple counterparts (including by scanned image or electronic signature), each of which shall be considered one and the same agreement, and shall become effective when signed by each of the Parties hereto and delivered to the other Party.
- H. <u>Warranties</u>. Except as expressly set forth in this Agreement, Gallagher makes no other warranties of any kind with respect to the Services, including, without limitation, warranties that may be implied from a course of performance, dealing or trade usage.

- I. Severability. If a court/arbitrator of competent jurisdiction determines that any provision of this Agreement is void or unenforceable, that provision will be severed from this Agreement, and the court/arbitrator will replace it with a valid and enforceable provision that most closely approximates the intent of the Parties, and the remainder of this Agreement will otherwise remain in full force and effect.
- J. <u>Entire Agreement</u>. This Agreement and the exhibits attached hereto constitute the entire agreement between the Parties with respect to the subject matter hereof, and supersede all prior negotiations, agreements and understandings as to such matters.
- K. Non-Waiver. The Parties agree that any delay or forbearance by either Party in exercising any right or remedy under this Agreement or otherwise afforded by applicable law shall not be a waiver of or preclude the exercise of any such right or remedy. No change, waiver or discharge hereof shall be valid unless in writing and executed by the Party against whom such change, waiver or discharge is sought to be enforced.

IN WITNESS WHEREOF, the Parties have caused this Agreement to be executed as of the Effective Date.

| | J. GALLAGHER RISK MENT SERVICES, INC. | CITY OF DEKALB |
|--------|------------------------------------------|---------------------|
| Ву: | Centy da Monten | By: By Julia |
| Name: | Cindy LaMantia | Name: Bril Nicklas |
| Title: | President-Great Lakes Region | Title: CPLY manager |

EXHIBIT A

The following outlines Services provided by Gallagher over the term of this Agreement

Fees for Services: \$49,227.00

Arthur J. Gallagher Risk Management Services, Inc. will provide services to manage the day-to-day needs of your program (Public Entity Package, Property, Excess Workers Compensation, Crime, Cyber Liability, Airport Liability, Storage Tank Liability). We believe it is our responsibility not only to react to your needs, but to anticipate what you may need and why. These services include, but are not limited to, the following:

- Adjust coverages to respond to any new or change in exposure new operations, acquisitions, and new locations.
- Proper processing of invoices for insurance placement and service providers. Cost allocations and audit summary to be included on an annual basis.
- Analyze market trends and report to you in advance of any developments that could impact your current markets or future renewals.
- Complete review of all policies as issued. We will complete our Error & Omission checklist to
 assure that all terms and conditions are correct, and request any corrections that are needed.
- Provide immediate response to daily inquiries.
- Provide all Certificates of Insurance requests within 24 hours and provide copies directly to you.
- Coordinate all claim questions between you and the claims adjuster, when necessary.
- Coordinate the renewal process each year develop and compile data into a comprehensive review and prepare formal proposal outlining all terms and options.

Client Signature _

Date



POLICYHOLDER DISCLOSURE OF TERRORISM INSURANCE COVERAGE NOTICE

You are hereby notified that under the Terrorism Risk Insurance Act, that you have a right to purchase insurance coverage for losses resulting from acts of terrorism, as defined in Section 102(1) of the Act: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury 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.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

You have a right to purchase insurance coverage for losses arising from terrorism, as defined in the Act. Unless you elect to purchase the coverage, we will attach exclusion for Acts of Terrorism, as defined in the Act, to your policy.

YOU HAVE Thirty (30) DAYS TO CONSIDER THIS OFFER OF COVERAGE FOR ACTS OF TERRORISM, AS DEFINED IN THE ACT. FAILURE TO RETURN THIS SIGNED FORM INDICATING AN ELECTION TO

ACCEPTANCE OR REJECTION OF TERRORISM INSURANCE COVERAGE

PURCHASE TERRORISM COVERAGE, AS DEFINED IN THE ACT WILL BE DEEMED YOUR REJECTION OF TERRORISM COVERAGE, AS DEFINED IN THE ACT. Acceptance or Rejection of Terrorism Insurance

Coverage

I hereby elect to purchase terrorism coverage for a prospective premium of
I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.

Coverage for losses resulting from certified acts of terrorism.

QBE INSURANCE CORPORATION
Insurance Company
Insurance Company

100000962

QBAV-7000 (02-15)

Print Name

Date

Page 1 of 2

Policy Number

This endorsement changes the policy to which it is attached and is effective on the date shown below. Endorsement No:000 Endorsement Effective: 01/01/2021 Policy No: 100000962 Insured: City Of DeKalb & DeKalb Taylor Municipal Airport Insurance Company: QBE INSURANCE CORPORATION Page 2 of 2 QBAV-7000 (02-15)



POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

Coverage for acts of terrorism is included in your policy. You are hereby notified that under the Terrorism Risk Insurance Act, as defined in Section 102(1) of the Act: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury 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. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally reimburses 85% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The portion of your annual premium that is attributable to coverage for acts of terrorism is \$0.00, and does not include any charges for the portion of losses covered by the United States government under the Act.

I ACKNOWLEDGE THAT I HAVE BEEN NOTIFIED THAT UNDER THE TERRORISM RISK INSURANCE ACT, AS AMENDED, ANY LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM UNDER MY POLICY COVERAGE MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT, MAY BE SUBJECT TO A \$100 BILLION CAP THAT MAY REDUCE MY COVERAGE AND I HAVE BEEN NOTIFIED OF THE PORTION OF MY PREMIUM ATTRIBUTABLE TO SUCH COVERAGE.

| An Malle- | QBE INSURANCE CORPORATION |
|------------------------------------|---------------------------|
| Policyholder/Applicant's Signature | Name of Insurer |
| Bill Nicklas | 100000962 |
| Print Name | Policy Number |
| Deta | |

This endorsement changes the policy to which it is attached and is effective on the date shown below.

Endorsement Effective: 01/01/2021

Policy No: 100000962

Endorsement No: 000

Insured: City Of DeKalb & DeKalb Taylor Municipal Airport Insurance Company: QBE INSURANCE CORPORATION

QBAV-7001 (02-15)

Page 1 of 1

Cyber Insurance Renewal Application

No. S-50188425M/1

Insurer/Underwriters:

Certain Underwriters at Lloyd's of London ("We" or "Us")

Insured:

City of DeKalb ("You" or "Your")

It is very important that You carefully read all of this Statement.

Before We agree to underwrite Your Policy, You provided information to Us (through Your Insurance Broker) as part of Your application for this Policy.

You have confirmed to us, that:

- Your business activities are not one of the following: Social Media, Adult Content, Technology Company, Payment Processing, Business Process Outsourcing, Debt Collector.
- You agree that the statements contained below, including any attachments thereto and all other information and materials submitted by You or on Your behalf to Us are Your agreements and representations, that they shall be deemed material to the risk assumed by Us, and that this Policy is issued in reliance upon the truth thereof.
- The misrepresentation or non-disclosure of any matter by You in the application for coverage or any supplemental materials submitted therewith will render the Policy rull and void and relieve Us from all liability under the Policy.
- This Application, together with any other information provided by You, is incorporated in and forms the basis of Your insurance Policy and We have relied on this information in offering this Policy to You on its current terms.

WARNING

If any of this information is incorrect, You must contact Your Insurance Broker immediately. We reserve the right in accordance with the terms of Your Policy, to amend the Premium and/or terms and conditions or cancel Your Policy if there is a material inaccuracy in the information.

If You fail to advise Us that the information is inaccurate, We may avoid the cover, with the result that You would not have insurance for any Claims during the Policy period. If You are in any doubt whether a fact is material, You should disclose it. Insured's Duty of Disclosure

You have a duty to disclose to the Underwriters, before the Policy is entered into, every matter that is known to You, being a matter that:

- 1. You knows to be a matter relevant to the decision of the Underwriters whether to accept the risk and, if so, on what terms; or
- 2. a reasonable person in the circumstances could be expected to know to be a matter so relevant.

This duty of disclosure also applies to any renewal, extension, variation or reinstatement of the Policy. The Underwriters are entitled to refuse to cover the additional exposure or charge a reasonable additional premium or, if the nature of the change in circumstances entails a substantially different risk, whether in type or degree, from that previously envisaged, to avoid the contract.

Throughout the Period of Insurance You shall give Your Insurance Broker notice, as soon as reasonably practical, of any material change in any fact, activity or circumstance as described in Your application for this Policy.

"You", "Your Organization", and "Applicant" mean all corporations, organizations or other entities, including subsidiaries, proposed for this insurance.

| | , | | | |
|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------|---------|
| | I. APPLICANT INFORMATION | | | |
| Nam | e of insured | City of DeKalb | | |
| Addr | ress | 200 South Fourth Stree | +164EL | ועלאט ד |
| City | | DeKalb | | |
| State | | Illinois | | |
| ZIP (| Code | 60115 | | |
| Indu | stry | Government | | |
| | | | in de | |
| G _i s | II. REVENUES | | in in the same | |
| Mos | t Recent FYE | \$38,091,969 | | |
| Prior | rFYE ⁻ | \$35,363,599 | | |
| | | | | |
| | III. CYBER DECEPTION | | | |
| 1. | Does the "Applicant" have procedures in place requiring two people, processes devices to verify any changes in transfer details and obtain authorization when transferring funds in excess of \$10,000 to external parties? | , or | Yes 🔀 | No 🗌 |
| 2, | Does the Applicant provide training for staff members who transact funds in ex \$10,000 externally? | cess of | Yes 🔯 | No 🗌 |
| 3. | Have there been any losses for a "Cyber Deception Event" in the past year in ex \$10,000? | cess of | Yes 🗌 | No 🔀 |
| 4. | After inquiry of the "Control Group", as defined, have there been any claims or circumstances arising from "Cyber Deception Events" which may give rise to a that could be covered by the Cyber Deception coverage being applied for? | claim | Yes 🗌 | 'No 🔀 |
| Plea | se note that the Cyber Deception Coverage applied will not attach to those matte | rs identified above that are | e claims or may | be |

Please note that the Cyber Deception Coverage applied will not attach to those matters identified above that are claims or may be reasonably expected to give rise to a claim, under the Cyber Deception Coverage.

"Cyber Deception Event" means:

- The good faith transfer by "You" of "Your Organization's" funds or the transfer of "Your Goods", in lieu of payment, to a third party as
 a direct result of a "Cyber Deception", whereby "You" were directed to transfer "Goods" or pay funds to a third party under false
 pretences; or
- 2. The theft of "Your Organization's" funds as a result of an unauthorized intrusion into or "Security Compromise" of "Your" "Computer System" directly enabled as a result of a "Cyber Deception".

"Control Group" means:

The board members, executive officers, Chief Technology Officer, Chief Information Officer, Risk Manager and General Counsel or their functional equivalents of "Your Organization". This does not include any administrative staff who work in the offices of these named positions.

. 1

Date | Date

Signature of Applicant's Authorized

Representative

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, (the "Act"), you have a right to purchase insurance coverage for losses resulting from acts of terrorism. As defined in Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are 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

Coverage under your policy may be affected as follows:

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 80% BEGINNING ON JANUARY 1, 2020 OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION, IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

| Acceptant | e of Rejection of Terrorism Insurance Cove | |
|-----------|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
| | | age, subject to the limitations of the Act, for acts of terrorism as ium of \$ 119 (Quote No. 523130-1 Option 1). |
| X | I hereby decline to purchase terrorism cov coverage for losses resulting from certifie | verage for certified acts of terrorism. I understand that I will have d acts of terrorism. |
| | Policyholder/Applicant's Signature Bril Nicklas Print Name Date | Nautilus Insurance Company Insurance Company Policy Number |

Assertance of Polestian of Torrorism Insurance Coverage

erstand that I will have no

CHUBB.

425 North Martingale Road, Suite 500, Schaumburg, IL 60173

Telephone (630) 875-6000 Facsimile (630) 875-6060

2020 Chulph

November 6, 2020

City Of Dekalb

In care of Arthur J. Gallagher Risk Mgmt Services, Inc. (PNP)

Licensed Producer:

c/o: Katie Navin

2850 Golf Road

Rolling Meadows, IL 60008

Subject:

City Of Dekalb

Policy Type MOD PROP Policy Number Effective Date 36029320

36029320

01/01/2021 01/01/2021 **Underwriting Company** Federal Insurance Company Federal Insurance Company

ATD PKG Dear Katie:

We are pleased to provide our Commercial Coverage Proposal for City Of Dekalb. This quote is valid for 30 days from today.

To facilitate your discussion of the coverages with the insured, we have outlined some of the features of the form. Please review the coverages carefully. This proposal outlines the extent of coverage that we will provide on the account and is subject to the terms and conditions of the policies. If you do not see a specific coverage listed on this proposal, it is not provided.

Please note that this proposal is subject to several legal requirements and prohibitions, which are described on the cover page of this proposal or within individual sections of the proposal, as appropriate. Please read these descriptions carefully.

Thank you for the opportunity to quote this account. We would be happy to discuss this proposal with you in further detail. Please call us if you have any questions.

Sincerely.

Scott Chalus

Senior Underwriter

Property, Machinery and Marine Practice

Grott a Chaler

Underwriting Service Team Phone Email Scott Chalus-UW 630-875-6073 schalus@chubb.com Rich Lau 630-875-6070 james.lau@chubb.com

COMMERCIAL COVERAGE PROPOSAL

FOR

CITY OF DEKALB COVER PAGE

Submitted to:

ARTHUR J. GALLAGHER RISK MGMT SERVICES, INC. (PNP) 2850 GOLF ROAD ROLLING MEADOWS, IL 60008

Attn: Katie

Information contained in this proposal is descriptive only. This proposal contains highlights or typical features available in our policies. These features are subject to change based upon underwriting and may or may not be available or apply to your policy. The precise coverage afforded is subject to the terms and conditions of the policies issued. The Company reserves the right, in its sole discretion, to amend or withdraw this Proposal if the Company becomes aware of any new, corrected or updated information that the Company reasonably believes would change its underwriting evaluation.

This quotation/proposal contemplates an integrated insurance program that includes all of the lines of business, terms and conditions outlined. The pricing and terms and conditions shown in this quotation/proposal cannot be separated. As such, if you reject individual components of the quote/proposal or any part of the program is cancelled and/or non-renewed, the terms and conditions of the remaining portion of the account are subject to reevaluation by the Company and all elements including program structure, pricing, as well as other terms and conditions will be subject to change.

This information is intended for producers that are properly licensed and authorized in at least one of the writing companies that comprise the Chubb Group of Insurance Companies (Chubb). If you are not a licensed and authorized Chubb producer, please direct this communication to the person in your office that holds such designations and contact Chubb to update the contact information for this policy.

For promotional purposes, Chubb refers to member insurers of the Chubb Group of Insurance Companies underwriting coverage: Federal Insurance Company, Vigilant Insurance Company, Pacific Indemnity Company, Great Northern Insurance Company, Northwestern Pacific Indemnity Company, Chubb Custom Insurance Company, Chubb Indemnity Insurance Company, Chubb Insurance Company of New Jersey, Chubb National Insurance Company, Chubb Lloyds Insurance Company of Texas. Not all insurers do business in all jurisdictions.

| PREMIUM SUMMARY <u>Policy Type</u> | Premium | Commission | Payment Options |
|----------------------------------------------------------------------|----------------------|------------|-----------------------|
| Commercial Property Federal Insurance Company Policy No.: 3602-93-20 | \$74,634 | 0% | Annual/Agency Bill |
| Property | \$74,634 | | |
| Machinery Breakdown | Included in Property | | |
| Taxes and Surcharges | \$0 ⁻ | 0% | Prepaid |
| TOTAL ACCOUNT | | | |
| PREMIUM | \$74,634 | | · |
| | | | |

Please note the underwriting company in which this quote is being offered. All insurers of the Chubb Group of Insurance Companies share the same financial ratings.

The portion attributable to Taxes, Surcharges and Other Charges is an estimate. The Insured is responsible for the total amount, if bound, shown on the premium bill and/or premium summary, regardless of the amount shown above.

Terrorism

Portion of premium attributable for Terrorism - Included in above premium

Property \$2,282
*Ensuing Fire \$443
Machinery Breakdown Included in Property

^{*}If you elect not to purchase coverage for terrorism and your policy provides commercial property insurance in a jurisdiction that has a statutory standard fire policy, the premium shown above for Ensuing Fire is the amount attributable to the insurance provided pursuant to that statutory standard fire policy. This coverage cannot be rejected.

[&]quot;Terrorism" refers to terrorism losses covered by the Terrorism Risk Insurance Act of the United States of America (15 USC 6701 note). Please refer to the Important Notice to Policyholders which outlines both the Federal Government's and the Insurance Company's obligation of payment under the Terrorism Risk Insurance Act.

CUSTOMARO COMMERCIAL COVERAGE

Policy Number:

3602-93-20

Company:

Federal Insurance Company

Effective Date:

January 1, 2021 to January 1, 2022

PREMISES SCHEDULE

- 1106 WEST FAIRVIEW DR, DE KALB, IL 60115
- 1119 OAK ST, DE KALB, IL 60115
- 3. 1154 S 7TH ST, DE KALB, IL 60115
- 4. 1216 MARKET ST, DEKALB, IL 60115
- 1505 W LINCOLN HWY, DE KALB, IL 60115
- 6. 1510 STATE ST, DE KALB, IL 60115
- 7. 1685 COUNTY FARM RD., DE KALB, IL 60115
- 21156 NELSON ROAD, DE KALB, IL 60115
- 223 S 4TH ST, DE KALB, IL 60115
- 10. 2650 N ANNIE GLIDDEN RD, DE KALB, IL 60115
- 11. 2851 CORPORATE DR, DE KALB, IL 60115
- 12. 3232 PLEASANT ST, DE KALB, IL 60115
- 13. 330 GROVE ST, DEKALB, IL 60115
- 14. 680 HAISH BLVD, DE KALB, IL 60115
- 15. 700 PINE ST, DE KALB, IL 60115
- 16. 700 W LINCOLN HWY, DE KALB, IL 60115
- 17. 900 W DRESSER RD, DE KALB, IL 60115
- 18. 950 W DRESSER RD, DE KALB, IL 60115
- 19. 1202 S 7TH ST, DEKALB, IL 60115
- 20. 2850 PLEASANT ST, DEKALB, IL 60115
- 21. 2860 PLEASANT ST, DEKALB, IL 60115
- 22. 2910 PLEASANT ST, DEKALB, IL 60115
- 23. 2920 PLEASANT ST, DEKALB, IL 60115
- 24. 3030 PLEASANT ST, DEKALB, IL 60115
- 25. 3040 PLEASANT ST, DEKALB, IL 60115
- 26. 624 N 11TH ST, DEKALB, IL 60115
- 27. 912 EDGEBROOK DR, DEKALB, IL 60115
- 28. 524 CLIFFORD DR, DEKALB, IL 60115
- 29. 2100 PLEASANT ST, DE KALB, IL 60115
- 30. 2200 PLEASANT ST, DEKALB, IL 60115
- 31. 3140 PLEASANT ST, DEKALB, IL 60115
- 32. 164 E LINCOLN HWY, DE KALB, IL 60115
- 33. 3331 PLEASANT ST, DEKALB, IL 60115

PROPERTY INSURANCE

Deductible:

\$10,000

Waiting Period:

72 Hours

Extended Period: Unlimited

The information shown above applies to:

- all premises coverages;
- all additional coverages; and
 - debris removal coverage,

and all premises, unless corresponding specific information is shown as applicable to a specific premises or coverage.

PREMISES COVERAGES - BLANKET LIMITS

LIMITS OF INSURANCE

| Blanket Number and Coverages | |
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| 1. Building | \$81,890,156 |
| Personal Property EDP Property on Premises | |
| 2. Business Income with Extra Expense | \$1,000,000 |
| 3. Valuable Papers on Premises | \$1,000,000 |
| 4. Debris Removal Expense | \$1,000,000 |
| 5. Fungus Clean-Up or Removal | \$50,000 |
| 6. Pollutant Clean-Up or Removal | \$50,000 |
| C. 1 Ollutant Cical-Op of Removal | \$50,000 |
| PREMISES COVERAGES: If "Blanket" or "Loss Limit" is shown | LIMITS OF INSURANCE |
| under Limits Of Insurance as applicable to a Premises, please refer to | Mill 10: 01 XIII OIGH 1013 |
| the "Premises Coverages - Blanket Limits" section or the "Loss Limits | |
| Of Insurance" section above to determine the Limits Of Insurance | |
| applicable to such Premises. "Blanket" limits are numbered for ease of | |
| reference. If a specific limit is shown under Limits Of Insurance for a | |
| Premises Coverage, that Limit applies to such coverage, even if a "Blanket" limit applies to other Premises Coverage at such premises. | |
| Premises # 1 Bldg # 1: 1106 WEST FAIRVIEW DR, DE KALB, | - 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |
| IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Weather Station | \$175,000 |
| | |
| Premises # 1 Bldg # 2: 1106 WEST FAIRVIEW DR, DE KALB, | |
| IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 . |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| | |
| Premises # 2 Bldg # 1: 1119 OAK ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |

| Debris Removal Expense | Blanket 4 |
|---------------------------------------------------------|-------------|
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 2 Bldg # 2: 1119 OAK ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 3 Bldg # 1: 1154 S 7TH ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 3 Bldg # 2: 1154 S 7TH ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property · | Blanket I |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 3 Bldg # 3: 1154 S 7TH ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | · Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |

| Premises # 4 Bldg # 1: 1216 MARKET ST, DEKALB, IL 60115 | , <u> </u> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Description #4 District Act District Di | P 4 |
| Premises #4 Bldg # 2: 1216 MARKET ST, DEKALB, IL 60115 | Planket 1 |
| Building | Diamet I |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 4 Bldg # 3: 1216 MARKET ST, DEKALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| | Blanket 4 |
| Debris Removal Expense | |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 4 Bldg # 4: 1216 MARKET ST, DEKALB, IL 60115 | 105 to 200 to 100 miles to 100 miles |
| Building | Blanket 1 |
| Personal Property | Blanket I |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 4 Bldg # 5: 1216 MARKET ST, DEKALB, IL 60115 | |
| | Blanket 1 |
| Building Bossess I Bronnests | Blanket 1 Blanket 1 |
| Personal Property Business Income with Extra Expense | Blanket 1 Blanket 2 |

| EDP Property on Premises | Blanket 1 |
|--------------------------------------------------------------|-----------|
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 4 Bldg # 6: 1216 MARKET ST, DEKALB, IL 60115 | 3 |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 4 Bldg # 7: 1216 MARKET ST, DEKALB, IL 60115 | |
| Building ' | \$13,640 |
| | |
| Premises # 5 Bldg # 1: 1505 W LINCOLN HWY, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 5 Bldg # 2: 1505 W LINCOLN HWY, DE KALB, IL | |
| 60115 | |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 5 Bldg # 3: 1505 W LINCOLN HWY, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |

| Blanket 4 |
|------------|
| Blanket 5 |
| Blanket 6, |
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| (II) |
| Blanket 1 |
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| Blanket 5 |
| Blanket 6 |
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| Blanket 4. |
| Blanket 5 |
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| Blanket 4 |
| 3lanket 5 |
| Blanket 6 |
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| Building | Blanket 1 |
|-----------------------------------------------------------------------|-------------|
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | · Blanket 6 |
| Premises # 10 Bldg # 1: 2650 N ANNIE GLIDDEN RD, DE KALB, IL 60115 | , |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| KALB, IL 60115 Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 11 Bldg # 1: 2851 CORPORATE DR, DE KALB, IL 60115 | n |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 11 Bldg # 2: 2851 CORPORATE DR, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |

| EDP Property on Premises | Blanket 1 |
|--------------------------------------------------------------|---------------------------------------|
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| i i | |
| Premises # 12 Bldg # 1: 3232 PLEASANT ST, DE KALB, IL | F F F F F F F F F F F F F F F F F F F |
| 60115 | |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| | |
| Premises # 12 Bldg # 2: 3232 PLEASANT ST, DE KALB, IL 60115 | <i>.</i> |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| | |
| Premises # 13: 330 GROVE ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| | |
| Premises # 14 Bldg # 1: 680 HAISH BLVD, DE KALB, IL 60115 | 1 |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |

| Pollutant Clean-Up or Removal | Blanket 6 |
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| THE COLUMN PRINCIPLE OF THE PRINCIPLE OF | |
| Premises # 14 Bldg # 2: 680 HAISH BLVD, DE KALB, IL 60115 | |
| Building . | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 15 Bldg # 1: 700 PINE ST, DE KALB, IL 60115 | · · · · · · · · · · · · · · · · · · · |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| | |
| Premises # 15 Bldg # 2: 700 PINE ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 16 Bldg # 1: 700 W LINCOLN HWY, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal . | Blanket 6 |
| Premises # 16 Bldg # 2: 700 W LINCOLN HWY, DE KALB, IL | Blanket 6 |

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| Premises # 19: 1202 S 7TH ST, DEKALB, IL 60115 | Blanket 1 |
|---------------------------------------------------|---------------------|
| Building | Blanket 1 Blanket 1 |
| Personal Property | |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 20: 2850 PLEASANT ST, DEKALB, IL 60115 | |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 21: 2860 PLEASANT ST, DEKALB, IL 60115 | · · |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 22: 2910 PLEASANT ST, DEKALB, IL 60115 | |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| D #22, 2020 DI EAGANT ST DEKAID II (0115 | |
| Premises # 23: 2920 PLEASANT ST, DEKALB, IL 60115 | Blanket 1 |
| Building Paris Francis Control Control | Blanket 2 |
| Business Income with Extra Expense | |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |

| Fungus Clean-Up or Removal | Blanket 5 |
|---------------------------------------------------|-------------|
| Pollutant Clean-Up or Removal | Blanket 6 |
| | Zame V |
| Premises #24: 3030 PLEASANT ST, DEKALB, IL 60115 | |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | · Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| A TABLE OF OR ATOLES (OR | Diameter V |
| Premises # 25: 3040 PLEASANT ST, DEKALB, IL 60115 | |
| Building | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Tommer Open Op of Items | |
| Premises # 26: 624 N 11TH ST, DEKALB, IL 60115 | |
| Building | Blanket I |
| Business Income with Extra Expense | Blanket 2 |
| EDP Property on Premises | Blanket 1 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| 2 daniel Olavii Op vi ivalivivi | .1 |
| Premises # 27: 912 EDGEBROOK DR, DEKALB, IL 60115 | |
| Building | \$206,000 |
| Actual Cash Value | |
| | |
| Premises # 28: 524 CLIFFORD DR, DEKALB, IL 60115 | |
| Building | \$92,700 . |
| Actual Cash Value | |
| | |
| Premises #29: 2100 PLEASANT ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |

| Pollutant Clean-Up or Removal | Blanket 6 |
|-----------------------------------------------------|---------------------------|
| THE WAS COOK BY THE CANDER TO THE AT D. IV. COLLE | |
| Premises # 30: 2200 PLEASANT ST, DE KALB, IL 60115 | Blanket 1 |
| Building | Blanket 1 |
| Personal Property | |
| Business Income with Extra Expense | Blanket 2 |
| Valuable Papers on Premises | . Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises #31: 3140 PLEASANT ST, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 32: 164 E LINCOLN HWY, DE KALB, IL 60115 | |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| Premises # 33: 3331 PLEASANT ST, DEKALB, IL 60115 | · · · |
| Building | Blanket 1 |
| Personal Property | Blanket 1 |
| Business Income with Extra Expense | Blanket 2 |
| Valuable Papers on Premises | Blanket 3 |
| Debris Removal Expense | Blanket 4 |
| Fungus Clean-Up or Removal | Blanket 5 |
| Pollutant Clean-Up or Removal | Blanket 6 |
| TOTAL COLUMN A CIPO | T TRAITE OF TRAITE A ROOM |
| PREMISES COVERAGES | LIMITS OF INSURANCE |

Machinery Breakdown

INCLUDED

| ADDITIONAL COVERAGES – SPECIFIC LIMITS | LIMITS OF INSURANCE |
|----------------------------------------|---------------------|
| Dependent Prem - Bi | \$250,000 |
| Waiting Period: 72 Hours | |
| EDP Property in Transit | \$250,000 |
| Errors or Omissions | \$1,000,000 |
| Mobile Communication Property | \$250,000 |
| Mobile Equipment- Unsc | \$250,000 |
| Deductible \$2,500 | |
| Mobile Equipment | \$2,373,862 |
| Deductible \$2,500 | |
| Ocean Cargo | |
| Goods In Transit | \$50,000 |
| Personal Property - Any Other Location | \$100,000 |
| Personal Property in Transit | \$250,000 |
| Prohibition of Access | |
| Per Occurrence Limit | \$50,000 |
| Annual Aggregate Limit | \$100,000 |

| EARTHQUAKE | LIMITS OF INSURANCE |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| Policy Annual Aggregate Limit | \$10,000,000 |
| Earthquake | |
| Premises 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33 | , |
| Premises Annual Aggregate Limit | \$10,000,000 |
| Per Occurrence Limit | \$10,000,000 |
| Property Damage Per Premises/Per Occurrence Dollar Deductible | \$50,000 |
| Waiting Period Per Premises/Per Occurrence (Consecutive Hours) | 72 Hours |
| | |
| FLOOD | LIMITS OF INSURANCE |
| Policy Annual Aggregate Limit | \$10,000,000 |
| Flood | 120 |
| (Inundation, Back-Up and Mud Flow Included) | • |
| Premises 2, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 17, 18, 20, 21, 22, 23, 24, 25, 26, 27, 29, 30, 31, 32, 33 | |
| Premises Annual Aggregate Limit | \$10,000,000 |
| Per Occurrence Limit | \$10,000,000 |
| Per Occurrence Waiting Period (Consecutive Hours) | 72 Hours |
| | \$50,000 |

| Flood | |
|---------------------------------------------------|-------------|
| (Inundation, Back-Up and Mud Flow Included) | |
| Premises 1, 3, 19 | |
| Premises Annual Aggregate Limit | \$5,000,000 |
| Per Occurrence Limit | \$5,000,000 |
| Per Occurrence Waiting Period (Consecutive Hours) | 72 Hours |
| Per Occurrence Dollar Deductible | \$100,000 |
| 1 of Oddard and Domination | |

| OTHER PERIL MODIFICATIONS – EXCLUSIONS | |
|----------------------------------------|--|
| Inundation, Back-up, Mudflow | |
| Premises/Building 16/1, 16/2, 28/1 | |

| POLICY FO | RMS | 26.7 |
|------------|-------|-----------------------------------------------|
| 80-02-1303 | 03-19 | ADD'L PERIL-EQ LIMIT/DED OR WAITING PERIOD |
| 80-02-1313 | 03-19 | EXCLUSIONS |
| 80-02-1428 | 03-19 | ADD'L PERIL-FLOOD LIMIT/DED OR WP PER OCC |
| 80-02-0005 | 01-18 | PROPERTY DECLARATIONS |
| 80-02-0045 | 03-20 | MALICIOUS PROGRAMMING EXCLUSION ADDED |
| 80-02-0210 | 01-15 | PROPERTY SUPPLEMENTARY DECLARATIONS |
| 80-02-0215 | 07-03 | PROPERTY SUPPLEMENTARY DECBUSINESS INCOME |
| 80-02-0315 | 05-20 | SUPP DEC - IMPAIRMENT OF COMP SERVICES |
| 80-02-1000 | 03-19 | BUILDING AND PERSONAL PROPERTY |
| 80-02-1004 | 03-19 | BUSINESS INCOME WITH EXTRA EXPENSE |
| 80-02-1018 | 03-19 | EXTRA EXPENSE |
| 80-02-1047 | 07-03 | MOBILE EQUIPMENT |
| 80-02-1095 | 07-03 | IMPAIRMENT OF COMPUTER SERVICES-MALICIOUS PGM |
| 80-02-1097 | 03-19 | PROPERTY/BI CONDITIONS & DEFINITIONS |
| 80-02-1300 | 03-19 | SCHEDULED PERSONAL PROPERTY COVERAGE |
| 80-02-1667 | 01-15 | CAP ON CERT. TERRORISM LOSSES (SELECTED LOCS) |
| 80-02-1669 | 01-15 | EXCLUSION FOR CERT.TERRORISM LOSSES/PREMISE |
| 80-02-1690 | 06-05 | UNINTENTIONAL ERRORS OR OMMISSIONS |
| 80-02-1776 | 09-05 | ILLINOIS MANDATORY AMENDED CONDITIONS |
| 80-02-5355 | 01-15 | SPECIAL WAITING PERIOD PROVISION ADDED |
| 80-02-5407 | 03-19 | OCEAN CARGO COVERAGE ADDED |
| 99-10-0874 | 04-07 | IL - IMPORTANT NOTICE |
| 99-10-0996 | 04-18 | IMPORTANT NOTICE-NY LOC INSPECTIONS |

CUSTOMARO PROPERTY HIGHLIGHTS

The precise coverage afforded is subject to the terms and conditions of the policies issued. The following features are subject to change based upon underwriting and may or may not be available or apply to your policy.

VALUATION

Replacement Cost

Cost of Replacement at any Location

Brands & Labels

Construction Fees

Customs Duties

Extended Warranties

Ordinance or Law

Selling Price on Finished Stock and Sold Personal Property

Replacement Cost on Personal Property of Others, Business Personal Property You Lease and Personal Property of Employees

Replacement Cost on Research and Development Property if repaired, replaced or reproduced

Valuation on Tenants' I & B when not replaced - ACV

24 Months to Decide to Repair or Replace

\$ 250,000 BLANKET LIMIT OF INSURANCE

The automatic blanket limit applies to:

Accounts Receivable

Electronic Data Processing Property

Fine Arts

Leasehold Interest - Bonus Payment, Prepaid Rent, Sublease Profit, Tenants' Lease Interest

Leasehold Interest - Undamaged Tenant's Improvements & Betterments

Non-Owned Detached Trailers

Outdoor Trees, Shrubs, Plants or Lawns

Pair and Set

Personal Property of Employees

Public Safety Service Charges

Research and Development Property

Valuable Papers

The Blanket Limit of Insurance applies over all of the coverages shown above and may be apportioned at the time of loss. This Blanket Limit of Insurance applies separately at each covered premises shown in the Declarations and is subject to the Property Deductible specified in the Declarations.

Separate specific Limits of Insurance may be purchased for any of these coverages. If purchased, the blanket limit of insurance will apply in addition to the specific limit.

ADDITIONAL PROPERTY COVERAGES

The following Additional Coverages apply separately at each of your premises. In this proposal, any additional limits for these coverages that you have purchased are indicated at the described premises to which the increased limits apply. A policy level deductible applies to each of the Additional Coverages, unless otherwise indicated below or at the described premises

| Any other location for: | |
|----------------------------------------|-------------------|
| Accounts Receivable | \$ 50,000 |
| Building Components | \$ 50,000 |
| EDP Property | \$ 50,000 |
| Fine Arts | \$ 50,000 |
| Personal Property | \$ 50,000 |
| R&D Property | \$ 50,000 |
| Valuable Papers | \$ 50,000 |
| Debris Removal | |
| 25% of direct damage loss, pl | us: |
| Premises Shown in the | |
| Declarations | \$ 100,000 |
| Any Other Location | \$ 25,000 |
| In Transit | \$ 25,000 |
| Deferred Payments | \$ 25,000 |
| Exhibition, Fair or Trade Shor | w: |
| EDP Property | \$ 50,000 |
| Fine Arts | \$ 50,000 |
| Personal Property | \$ 50,000 |
| Extra Expense | \$ 100,000 |
| Fungus Clean-Up | |
| or Removal | \$ 25,000 |
| Impairment of Computer Servingramming: | vices - Malicious |
| Inside Attack Outside Attack - Per | \$ 1,000 |
| Occurrence | \$ 1,000 |
| Outside Attack - Annual | |
| Aggregate | \$ 1,000 |
| Installation: | |
| Any Job Site | \$ 25,000 |
| In Transit | \$_25,000 |

| In Transit for: Accounts Receivable Building Components EDP Property Fine Arts Personal Property Valuable Papers | \$ 25,000 \$ 25,000 \$ 50,000 \$ 25,000 \$ 25,000 \$ 25,000 |
|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| Loss of Master Key | \$ 15,000 |
| Loss Prevention Expenses | \$ 15,000 |
| Mobile Communication Property Minimum Deductible \$3,500 | \$ 15,000 |
| Money & Securities: On Premises Off Premises | \$ 15,000 \$ 15,000 |
| Pollutant Cleanup or Removal | \$ 25,000 |
| Processing Water | \$ 10,000 |
| Preparation of Loss Fees | \$ 10,000 |
| Newly Acquired Premises Constructed Property for 1 | |
| Building | |
| Personal Property Personal Property at | \$1,000,000 |
| Existing Premises | \$ 100,000 |
| EDP Equipment | \$1,000,000 |
| Electronic Data | \$ 50,000 |
| Communication Property | \$ 50,000 |
| Fine Arts | \$ 25,000 |
| | |



BUSINESS INCOME

The limits of insurance shown below are provided for the coverages shown at no additional cost to you. You may purchase increased limits of insurance for an additional premium.

| Lim | Limit of Insurance | | |
|----------------------------------------------------|------------------------|--|--|
| Any Other Location | \$ 25,000 | | |
| Contractual Penalties . | \$ 10,000 | | |
| Loss of Utilities (excludes Overhead Trans. Lines) | \$ 15,000 | | |
| Exhibition, Fair or Trade Show | \$ 10,000 | | |
| Ingress & Egress | \$ 25,000 | | |
| Newly Acquired Premises – Business Income | \$100,000 for 180 days | | |
| Pollutant Clean-Up or Removal | \$ 10,000 | | |
| Preparation of Loss Fees | \$ 10,000 | | |
| Worldwide Dependent Business Premises | \$100,000 | | |
| | | | |

COMMON POLICY CONDITIONS

| POLICY FO | | |
|------------|-------|----------------------------------------------|
| 80-02-9001 | | HOW TO REPORT A LOSS |
| 80-02-9090 | | COMMON POLICY CONDITIONS |
| 80-02-9763 | | IL MAND CANCELLATION & WHEN WE DO NOT RENEW |
| 80-02-9790 | 03-12 | COND - CIVIL UNIONS OR DOMESTIC PARTNERSHIPS |
| 80-02-9800 | 12-08 | |
| 99-10-0732 | 01-15 | NOTICE TO POLICYHOLDERS-TRIPRA |
| 99-10-0792 | 09-04 | IMPORTANT NOTICE - OFAC |
| 99-10-0838 | | ILLINOIS POLICY INFORMATION NOTICE |
| 99-10-0872 | 06-07 | AOD POLICYHOLDER NOTICE |

The state in which this policy is issued may require that we advise you that if available, the following condition is added to your policy:

All references in the policy to "spouse" include a party to a civil union or domestic partnership recognized under the applicable law of the jurisdiction having authority.

This proposal does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit Chubb from offering or providing insurance. To the extent any such prohibitions apply, this proposal is void ab initio.

FATCA COMPLIANCE

The U.S. Foreign Account Tax Compliance Act, commonly known as "FATCA", became the law in the U.S. in March of 2010 and becomes effective July 1, 2014. Pursuant to FATCA, brokers, producers, agents and/or clients may need to obtain withholding certificates from insurance companies. For information on how to obtain the applicable withholding certificate from Chubb U.S. insurance companies, please go to the following web site:

http://www2.chubb.com/us-en/u-s-foreign-account-tax-compliance-act-fatca.aspx

CHUBB.

IMPORTANT ACTION REQUIRED THIS APPLIES TO NEW YORK CITY LOCATIONS ONLY FAILURE TO ACT CAN RESULT IN NYC DOB FINES OF \$1,000 OR MORE PER OBJECT WHICH WILL BE YOUR RESPONSIBILITY

Dear:

The NYC Department of Buildings now has an online technology where boiler inspections and violations will be entered and records stored. DOB NOW Safety will be the new platform for boiler inspections, as well as other DOB safety related inspections of elevators, facades, electrical and various other inspections. The transition to this system has modified the steps related to filing jurisdictional inspections including new requirements of owner email registration.

These steps include:

- Owner registration in the DOB NOW Safety System is required prior to filings being accepted.
- Licensed Professional/Inspector must input the owner registration information prior to filing.

To ensure conformance with the above requirements we are asking all owners of NYC property to register and to ensure that registration information is available to those local management personnel responsible in each building as well as your insurance agent/carrier.

Please provide the registration information for your NYC locations on the attached form. Failure to complete registration and provide Chubb with this information will result in our inability to file inspections and can lead to missed inspection fines of \$1,000 or more per object.

The registration process is quick, taking approximately a total of 5-10 minutes. Supplemental information on the registration process has been included on the attached pages.

Please disregard this letter if you have already completed the registration process with the City of New York for all covered locations and advised Chubb of all building registrant information.

Should you have any questions, please contact your Chubb representative or email us at nycboilers@chubb.com.

Enclosures



Building Registrant Owner Form

Complete this form for all New York City locations within 30 days and send it to Chubb at: nycboilers@chubb.com

November 6, 2019

Customer: CITY OF DEKALB

Policy Number: 36029320

| Location Address | Email Address of Registrant * |
|------------------|-------------------------------|
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^{*} If the same registrant applies to all locations, indicate "All Locations" after the email address on the first line

FAILURE TO RETURN THIS FORM

CAN RESULT IN NYC DOB FINES OF \$1,000 OR MORE PER OBJECT.

CHUBB WILL NOT ACCEPT RESPONSIBILITY FOR FINES LEVIED BY THE CITY

OF NEW YORK DOB RESULTING FROM YOUR FAILURE TO COMPLY.



Tip Sheet:

Owner Registration in eFiling

If you are a Building Owner, Building Manager, or Building Representative, you can:



NOW SAFETY

Enter job applications in DOB NOW: Build

Review and confirm compliance filings in DOB NOW: Safety

Register for DOB NOW: Build or DOB NOW: Safety by creating an eFiling account:

- Go to www.nyc.gov/dobefiling, and click on the link to 'Register for electronic filing.'
- 2. Fill out the Electronic Filing Account Information form.

NOTE: Your address should be your mailing address, not the address of the building you own.

- 3. Read the Agreement section, and click Submit.
- 4. You will receive two (2) emails. Your account will not be active until the second email is received.
 - In the first email, you must click a link to activate your account.
 - b. The second email confirms your enrollment. Once you receive the second email, your registration in eFiling will take effect the next day. You can then use your eFiling email and password at www.nyc.gov/dobnow.

NOTE: If you want to change your account information, such as email, phone, or mailing address, you will have to log in to eFiling.

If you have any questions about DOB NOW, please contact www.nyc.gov/dobnowhelp

Rick D. Chandler P.E., Commissioner

nyc.gov/buildings

build safellive safe

This Notice pertains to the following quotation is sued by an insurer of the Chubb Group of Insurance Companies. If you have more than one Chubb policy, you will receive individual notice(s) for each policy to which the Terrorism Risk Insurance Act applies.

Mailing Date

November 6, 2020

Insured Name

City Of Dekalb 200 S. Fourth Street De Kalb, Illinois 60115

Mailing Street Address Mailing City, State, Zip

| Policy Type | Policy Number | Effective Date | Underwriting Company |] |
|----------------|---------------|----------------|---------------------------|---|
| Property & ATD | 36029320 | 01/01/2021 | Federal Insurance Company | J |

TERRORISM RISK INSURANCE ACT

You are hereby notified that pursuant to the Terrorism Risk Insurance Act (the "Act") we are making available to you insurance for losses arising out of certain acts of terrorism. Terrorism is defined as any act certified by the Secretary of the Treasury 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 an air carrier or vessel 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.

You should know that the insurance provided by your policy for losses caused by acts of terrorism is partially reimbursed by the United States of America under the formula set forth in the Act. Under this formula, the United States of America pays 85% of covered terrorism losses that exceed the statutorily established deductible to be paid by the insurance company providing the insurance. Beginning in 2016, the Federal Share will be reduced by 1% per year until it reaches 80%, where it will remain.

However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to prorate allocation in accordance with procedures established by the Secretary of the Treasury.

The portion of your annual premium that is attributable to insurance for such acts of terrorism is: \$ 2,282

| If you elect not to purchase coverage fo | r terrorism and your policy provides commercial property insurance |
|--------------------------------------------|------------------------------------------------------------------------|
| in a jurisdiction that has a statutory sta | andard fire policy, the premium shown here for Ensuing Fire is the |
| amount attributable to the insurance p | rovided pursuant to that statutory standard fire policy. This coverage |
| | \$ 443 |

| • | | |
|-----------------------------|---------------------------------------------|-------------|
| Important Notice | | |
| Form 99-10-0729 (Rev.01-15) | Property - Important Notice to Policyholder | Page 1 of 3 |

This Notice pertains to the following quotation is sued by an insurer of the Chubb Group of Insurance Companies. If you have more than one Chubb policy, you will receive individual notice(s) for each policy to which the Terrorism Risk Insurance Act applies.

Mailing Date

November 6, 2020

Insured Name

City Of Dekalb

Mailing Street Address Mailing City, State, Zip

200 S. Fourth Street De Kalb, Illinois 60115

| Policy Type | Policy Number | Effective Date | Underwriting Company |
|----------------|---------------|----------------|---------------------------|
| Property & ATD | 36029320 | 01/01/2021 | Federal Insurance Company |

Under the Act, you have thirty (30) days from the date of this notice to consider whether or not you wish to maintain insurance for terrorism losses covered by the Act.

If you elect not to maintain this insurance, please so indicate by placing an "X" in the space provided on the next page, sign and return this disclosure notice to your agent or broker as soon as possible. By electing not to maintain this insurance, you agree that we may attach a terrorism exclusion or sublimits to your policy. If you do not sign and return this disclosure notice, you will be deemed to have decided to maintain this insurance, subject to the next paragraph.

If you elect to maintain this insurance, you must pay the premium disclosed above, otherwise we will avail ourselves of our normal remedies for nonpayment of premium, including cancellation of your policy in accordance with its terms.

This Notice pertains to the following quotation is sued by an insurer of the Chubb Group of Insurance Companies. If you have more than one Chubb policy, you will receive individual notice(s) for each policy to which the Terrorism Risk Insurance Act applies.

Mailing Date

November 6, 2020

Insured Name

City Of Dekalb 200 S. Fourth Street

Mailing Street Address Mailing City, State, Zip

De Kalb, Illinois 60115

| Policy Type | Policy Number | Effective Date | Underwriting Company | |
|------------------------|---------------|----------------|---------------------------------------------------|--|
| Property & ATD | 36029320 | 01/01/2021 | Federal Insurance Company | |
| Hoperty de ALLD | 30027320 | 01/01/2021 | 1 odolotza od do | |
| | | | | |
| Rejection of terrorism | ninsurance: | | | |

| included in my policy. I understand th | ceand elect to have a terrorism exclusion at I will have no, or limited, coverage f | on, sublimit or other limitation or losses arising from acts of | |
|----------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------|---|
| terrorism. | | • | |
| Policyholder/Applicant's Name: | Brignichlas | | |
| Policyholder/Applicant's Signature: | MIC HARRY | " | _ |
| Date | 12-1110/2020 | | |

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE (Excess Liability)

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, as amended, extended, and/or re-authorized, you have a right to purchase insurance coverage for losses resulting from acts of terrorism, as defined in Section 102(1) of the Act: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury – in concurrence with the Secretary of State 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.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 80% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT, AS WELL AS INSURERS' LIABILITY, FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM. IF THE AGGREGATE INSURED LOSS FOR ALL INSURERS EXCEEDS \$100 BILLION IN A CALENDAR YEAR, YOUR COVERAGE MAY THUS BE REDUCED.

Acceptance or Rejection of Terrorism Insurance Coverage with regard to Excess Liability

| I hereb | y elect to purchase terrorism cov | verage for a prospective premium of \$1,331. |
|-----------------------------|-----------------------------------|-----------------------------------------------------------------------------------------------------|
| | | coverage for certified acts of terrorism. I understand that I ing from certified acts of terrorism. |
| Applicant's Signat | Detalb | Safety National Casualty Corporation® Insurance Company |
| Insured Name Date Signed | 2080 | |

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE (General Liability)

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, as amended, extended, and/or re-authorized, you have a right to purchase insurance coverage for losses resulting from acts of terrorism, as defined in Section 102(1) of the Act. The term "act of terrorism" means any act that is certified by the Secretary of the Treasury – in concurrence with the Secretary of State 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.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 80% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT, AS WELL AS INSURERS' LIABILITY, FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM. IF THE AGGREGATE INSURED LOSS FOR ALL INSURERS EXCEEDS \$100 BILLION IN A CALENDAR YEAR, YOUR COVERAGE MAY THUS BE REDUCED.

Acceptance or Rejection of Terrorism Insurance Coverage with regard to General Liability

| | I hereby elect to purchase terrorism | coverage for a prospective premium of \$1,428. |
|-----------|--------------------------------------|----------------------------------------------------------------------------------------------------------|
| X | | m coverage for certified acts of terrorism. I understand that I alting from certified acts of terrorism. |
| | man and | se se |
| 6 | 4 Mallon | Safety National Casualty Corporation® |
| Applicant | 's Signature | Insurance Company |
| City | 's Signature 1 Or Oekulb | |
| Insured N | In 2020 | |
| Date Sign | ed | |



Appendix





Bindable Quotations & Compensation Disclosure Schedule

Client Name: City of DeKalb

| COVERAGE(S) | CARRIER NAME(S) | WHOLESALER, MGA, OR INTERMEDIARY NAME ¹ | EST. ANNUAL PREMIUM ² | COMM.% OR | GALLÄGHER U.S. OWNED WHOLESALER, MGA, OR INTERMEDIARY % |
|----------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------|-----------|---------------------------------------------------------------|
| Property | Federal Insurance Company (Chubb Group of Insurance Companies) | NA | \$74,634.00 | 0% | |
| Public Entity Package | Safety National Casualty Corporation (Tokio Marine Holdings, Inc.) | NA | \$250,046.00 | 0 % | |
| General Liability | Argonaut Insurance Company | Trident Insurance Services | \$185,890.00 | 0 % | |
| Cyber Liability | Underwriters at Lloyd's London (Underwriters at Lloyd's London) | Risk Placement Services | \$14,121.00 | 15% | 7.5% |
| Cyber Liability | Underwriters at Lloyd's London (Underwriters at Lloyd's London) | Risk Placement Services | \$15,038.00 | 15% | 7.5% |
| Cyber Liability | BCS Insurance Company (BCS Insurance Company) | Risk Placement Services | \$13,243.00 | 15% | 7.5% |
| Airport Liability | QBE Insurance Corporation (QBE Insurance Group) | Arthur J Gallagher Aviation - West Chicago | \$18,906.00 | 8.75 % | 8.75 % |
| Tank Advantage Pollution Liability (Storage Tanks) | Nautilus Insurance Company (W. R. Berkley Group) | AmWINS Group Inc. | \$12,160.50 | 12.5% | |
| Excess Police Professional Liability | Indian Harbor Insurance Company (XL Group plc) | Professional Governmental Underwriters | \$45,581.00 | 0 % | · |
| Excess Workers' Compensation | Safety National Casualty Corporation | N/A | \$202,629.00 | . 0% | |



City of DeKalb



| COVERAGE(S) | CARRIER NAME(S) | WHOLESALER, MGA, OR INTERMEDIARY NAME ¹ | EST. ANNUAL PREMIUM ² | COMM.% OR | GALLAGHER U.S. OWNED WHOLESALER, MGA, OR INTERMEDIARY % |
|-------------------------------------|-----------------------------------------------------|-------------------------------------------------------|-------------------------------------|-------------|---------------------------------------------------------------|
| Gallagher Compensation Agreement | Arthur J Gallagher Risk Management Services Inc. | | | \$49,227.00 | |

¹ We were able to obtain more advantageous terms and conditions for you through an intermediary/ wholesaler.

² If the premium is shown as an indication: The premium indicated is an estimate provided by the market. The actual premium and acceptance of the coverage requested will be determined by the market after a thorough review of the completed application.

^{*}A verbal quotation was received from this carrier. We are awaiting a quotation in writing.

 $^{{\}it 3\,The\,commission\,rate\,is\,a\,percentage\,of\,annual\,premium\,excluding\,taxes\,\&\,fees.}$

^{*} Gallagher is receiving ____% commission on this policy. The fee due Gallagher will be reduced by the amount of the commissions received.



Binding Requirements

| COVERAGE (ISSUING CARRIER) | BINDING REQUIREMENT |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Property Federal Insurance Company | Subject to Signed TRIA Form |
| Public Entity Package Safety National Casualty Corporation | Subject to Signed TRIA Form |
| Cyber Liability Underwriters at Lloyd's London | Signed Application |
| Airport Liability QBE Insurance Corporation | Subject to Signed TRIA Form |
| | Signed Acceptance/Rejection Required at Binding |
| Tank Advantage Pollution Liability (Storage Tanks) Nautilus Insurance Company | Copies of Tank and Line Tightness Tests, Dated Within the Last 12 Months or the Last 6 Consecutive Months of Line and Tank Leak Detection Results for all Underground Tank Systems Greater than 20 Years Old. Required Prior to Binding |
| | Updated Signature Page of Application. Required Prior to Binding |





Claims Reporting By Policy

Reporting to Your Third Party Administrator:

Immediately report all claims for the following lines of coverage to CCMSI:

- ▶ □Public Entity Pacakge, Umbrella and Workers' Compensation
- TPA: CCMSI
- By Phone: (630) 649-6007
- By Email: Imittelstaedt@ccmsi.com

Direct Reporting:

Immediately report all claims for the following lines of coverage to the insurance carrier.

- ▶ □Property
- Carrier Name: Federal Insurance Company / Chubb Group
- By Phone: (800) 252-4670 - By Fax: (800) 230-2538
 - > Crime
- Carrier Name: Citizens Insurance Company of America (Hanover)
- By Phone: (800) 628-0250 - By Fax: (800) 399-4734
- By Email: firstreport@hanover.com
 - Cyber Liability
- Carrier Name: Underwriters at Lloyd's, London.
- By Phone#: 1-855-217-5204
- By Email: RPSCyberClaims@bakerlaw.com
 - Tank Advantage Pollution Liability (Storage Tanks)
- Carrier Name: Nautilus Insurance Company
- Phone: (201) 748-3111

Reporting to Gallagher

Immediately report all claims for the following lines of coverage to Arthur J. Gallagher & Co. Aviation Group

- Airport Liability
- ☐QBE Insurance Corporation
- ☐ Direct Phone: (847) 586-0802
- Main Phone: (847) 586-0800
- ☐Fax: (847) 586-0810
- Email: scott bolger@ajg.com
 - > Excess Police Professional Liability
- ☐ Indian Harbor Insurance Company
- ☐Phone# :972.383.7186
- □Fax#: 972.383.7177
- ☐ Email: proclaimnew notices@axaxl.com



CORE360™ Loss Control Portal



Insurance Risk Management Consulting



Reduce Your Risk and Simplify Training

Safety training programs and educational materials for employees are critical for reducing accidents, increasing retention and minimizing your total cost of risk now and in the future.

Gallagher's CORE360™ Loss Control Portal is our proprietary Learning Management System (LMS) that supports your safety program, provides real time access to your loss control plans and keeps employees up to date with the latest safety standards.

Key benefits of CORE360™ Loss Control Portal:

- Access up to 10 modules of your choice from a library of over 100 training and safety shorts. In addition, monthly bulletins are available covering topics such as General and Environmental Safety, Human Resources, and Health and Wellness.
- Save valuable time by assigning employee training and monitoring their latest progress and completion.
- Simplify the process of training to stay in compliance and avoid costly penalties.
- Onboard and train an unlimited number of users while enhancing your overall riskcontrol program.
- Customize your platform with your company's logo, training content and modules tailored to your business, and personalized procedures and forms for an added fee.

Please visit

ajg.com/LossControlPortal to learn more.

Most Popular Training Modules:

- Sexual Harassment and Discrimination
- Slip, Trip and Fall Training
- Electrical Safety Training
- Back Safety Training
- Bloodborne Pathogens
- Safe Lifting Practices
- Defensive Driving Basics
- Fire Prevention Basics
- Personal Protective Equipment
- GHS Hazard Communication













Gallagher CORE360" is our unique, comprehensive approach of evaluating your risk management program that leverages our analytical tools and diverse resources for customized, maximum impact on six cost drivers of





To access the Gallagher | eRiskHub® now:

- Navigate to https://eriskhub.com/ gallegher
- 2 Complete the new user registration at the bottom of the page. Choose your own user ID and password. The access code is 447597.
- 3 After registering, you can access the hub immediately using your newly created credentials in the member login box located at the top right of the page.

The Gallagher Way. Since 1927.

The information contained herein is offered as insurance industry guidance and provided as an overview of current market risks and available coverages and is intended for discussion purposes only. This publication is not intended to offer legal advice or client-specific risk management advice. Any description of insurance coverages is not meant to interpret specific coverages that your company may already have in place or that may be generally available. General insurance descriptions contained herein do not include complete insurance policy definitions, terms, and/or conditions, and should not be relied on for coverage interpretation. Actual insurance policies must always be consulted for full coverage details and analysis.

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eRiskHub® Overview and Login Information

The evolution of the cyber risk landscape has brought with it broad, sweeping regulations to address cybersecurity exposures. This digital transformation also presents new risks, including financial losses, for every industry. Gallagher's Cyber Practice delivers expertise alongside cyber risk management and insurance placement services, as well as a better way to construct risk management solutions. CORE360 to our comprehensive approach of evaluating our client's risk management program—leverages our analytical tools and diverse resources for customized, maximum impact on six cost drivers of their total cost of risk. First, we consult with you to understand all of your actual and potential costs, then find the best options to reallocate these costs based on strategic actionable insights empowering you to know, control and minimize your total costs increasing profitability.

Additionally, our data-driven CORE360™ approach allows us to implement programs for your business that will increase safety, minimize losses, mitigate claims and proactively analyze your cyber risk posture.

Key Features of the Gallagher | eRiskHub®

- Gallagher Cyber Risk Due Diligence A six-step process designed to walk clients through a simple, thought-provoking framework to encourage organizational communication, establish clear direction and highlight priorities to better understand your cyber risk profile.
- Risk Manager Tools A collection of tools with many different purposes such as
 researching known breach events, calculating your potential cost of a breach event
 and downloading free sample policies your organization can use as templates.
- News Center Keeps you up to date on what is going on in the world of cyber risk through handpicked articles, feeds and blogs.
- Learning Center An extensive collection of white papers, articles, webinars, videos
 and blog posts on a variety of topics. (Looking for something specific? Try the search
 box at the top right of the page to search the entire Gallagher | eRiskHub®).
- Security & Privacy Training An overview of best practices for creating an
 effective security training program for employees.
- Strategic Third-Party Relationships and Partner Resources Information on thirdparty vendors that can assist your organization with improving your overall cyber risk.

As cyber risk evolves, so does our commitment to thought leadership. Our global cyber teams focus exclusively on cyber risk, and uniquely position Gallagher to share our knowledge, expertise and experience for the benefit of our clients.

If you have any questions about the Gallagher | eRiskHub®, please reach out to your broker

Cyber Liability



Insurance Risk Management Consulting

City of DeKalb,

As we outlined in our pre-renewal discussion, the global insurance marketplace continues to harden, especially in the public entity space. In addition to the hard market, the City has experienced severe losses in excess of \$1M in the previous policy year.

State of the Insurance Marketplace:

A number of factors are impacting the insurance marketplace. First, there has been a substantial increase in the number of large weather-related loss events. Second, interest rates are at historical lows. Third, the industry is dealing with a rapidly increasing loss trend in liability lines. Each of these factors has helped drive up prices and reduce coverage availability. This hardening market is an underwriting-driven marketplace with the need for underwriters to make a profit from underwriting versus relying on investment income.

Property carriers are continuing to pay for catastrophic claims such as fires, floods, and tornadoes. In the Midwest, insurance carriers are running convective storm analytic reports for severe storms, floods, wind, and hail exposures. Loss trends have continued to outpace pricing models and, as a result, we have seen underwriters accelerate pricing increases, especially over the last year. The average rate increase for a clean account is 22-25%. Accounts with losses or in specific geographic locations have seen rate increases ranging 40-50%.

The casualty marketplace is seeing the effects of social inflation, which is increased costs from rising litigation resulting in larger jury verdicts. For our municipalities that means carriers are seeing more suits involving excessive force under law enforcement and civil unrest; large auto liability claims; large public officials' claims involving alleged sexual harassment; and employment practice claims. Concerned with the litigation environment being favorable to plaintiffs, carriers are pushing rate increases, limit reductions, and coverage exclusions. London for example, does not see the US as stable in regards to law enforcement. There is an alarming number of excessive force issues, discrimination, and other claims on a staggering rise. This is not the case in other countries. Carriers no longer feel there is a pricing matrix that matches the risk. This results in less willingness to provide capacity and higher costs for the capacity they are willing to provide. In addition, COVID-19 has added uncertainty as the liability is still yet to play out. Insurance carriers are beginning to introduce or enhance their communicable disease exclusions in response to COVID-19.

Cyber Liability has been one of the most impacted lines of coverage since the pandemic. The sudden onset of COVID-19 resulted in the majority of the global workforce moving to remote locations, creating an environment that is inherently less



Insurance Risk Management Consulting

secure for organizations. Increases in the frequency and severity of ransomware claims, which manifested in 2019 and into 2020, continues to drive the hardening of the cyber market. Claims in this space are up over 100% since the start of the pandemic.

Below is a summary of our efforts for the 2021 renewal:

Property and Casualty Renewal:

In regards to the package renewal, we approached seven carriers including the incumbent carrier. In years past your incumbent carrier, Safety National, has provided all \$10M of coverage. After Safety National's reinsurance treaty was renewed for 2021, they are no longer able to offer \$10M for Law Enforcement Liability. This led to a strategic approach to work with several law enforcement specific carries to insure different levels of liability to achieve \$10M of full coverage. This strategy is extremely complex, but necessary in finding the most effective solution. Our end result led to finding a carrier, Indian Harbor, to insure the \$5M of coverage above Safety National's \$5M of law enforcement coverage.

Additionally, the City's self-insured retention for law enforcement liability claims increased from \$100,000 to \$250,000. This was expected, as we discussed with the City last year. The City has a cap of \$275,000 across all lines of liability, including law enforcement. If the City were to exceed this amount, there is an excess annual aggregate retention protection limit for \$1,000,000.

Your property rate increased in line with the marketplace, but was also marketed to multiple carriers to ensure we secured the best rate possible. The City's property premium this renewal is \$74,634. Competing markets were in excess of \$90,000.

The City's workers compensation rates remained relatively flat, with a slight increase of 3%. The City has performed well in containing losses within your SIR (self-insured retention).

We have met with City staff to address certain claims trends and potential risk management solutions to address in 2021.

As Gallagher enters its 14th year with the City, in a global pandemic, we would like to thank Stephanie and Josh for their dedication and cooperation in helping us achieve the most competitive renewal offered in today's marketplace. Their pro activeness and detailed submission gatherings played a large factor in obtaining favorable terms. Following this summary contains your premium comparison, premium history, and large open claims to date effecting this year's renewal.

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Insurance | Risk Management | Consulting

Premium Comparison

| | 2020 | | 2021 | Delta |
|------------|---------------|------|------------|-------|
| Package | \$ 169,935.44 | \$ | 250,046.00 | 47% |
| Excess LEL | \$ | \$ | 45,826.00 | N/A |
| Property | \$ 61,047.00 | \$ | 74,634.00 | 22% |
| Excess WC | \$ 106,647.00 | \$ | 109,900.00 | 3% |
| Crime | \$ 3,103.00 | \$ | 3,103.00 | 0% |
| Cyber | \$ 9,056.00 | \$ | 14,625.80 | 62% |
| Airport | \$ 15,125.00 | > \$ | 18,906.00 | 25% |
| Pollution | \$ 11,443.00 | \$ | 12,160.50 | 6% |
| Fee | \$ 47,793.00 | \$ | 49,227.00 | 3% |
| | \$ 424,149.44 | \$ | 578,428.30 | 36% |

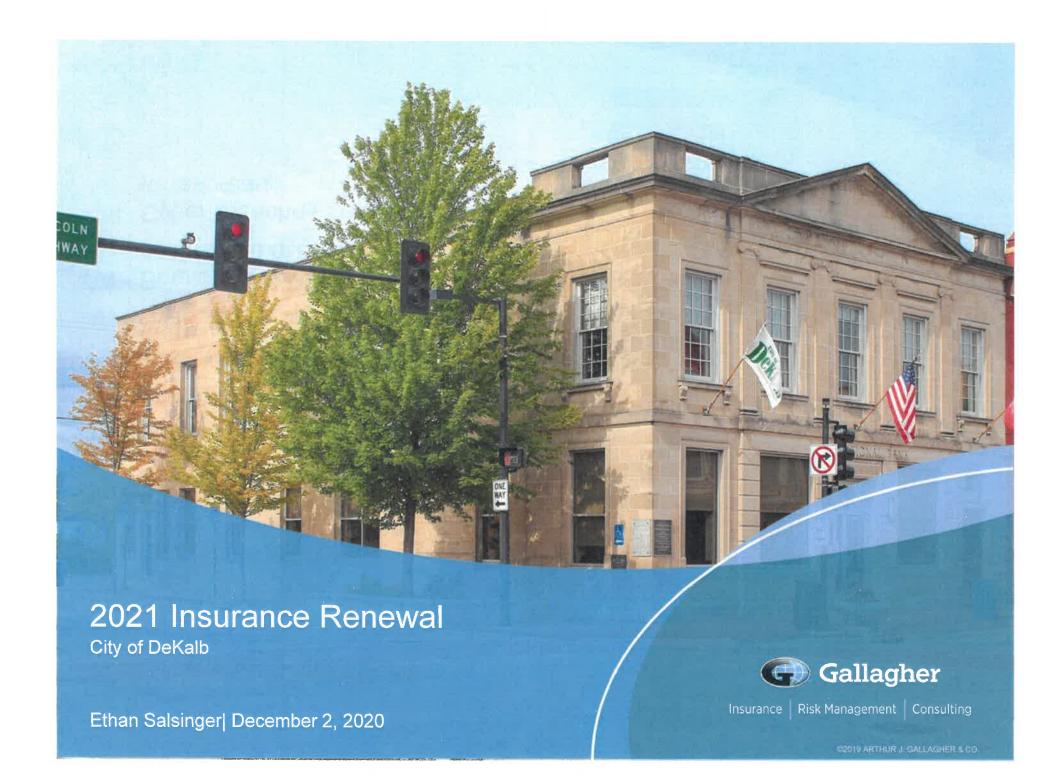
Large Open Claims

| 4/22/2019 | USDC Complaint at Law | \$142,459 |
|-----------|--------------------------------|-------------|
| 8/24/2019 | Use of force | \$52,743 |
| 8/24/2019 | Federal Civil Rights violation | \$1.035.435 |

Premium History

| <u>Year</u> | <u>Carrier</u> | <u>Premium</u> |
|-------------|-----------------|----------------|
| 2017 | BRIT | \$471,655 |
| 2018 | BRIT | \$470,168 |
| 2019 | BRIT | \$469,554 |
| 2020 | Safety National | \$424,149 |
| 2021 | Safety National | \$578.428 |

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Marketplace Conditions

Fall 2020

- Midwest Property experiencing major losses past 2 years from wind, hail, and floods
- II. Current Law Enforcement landscape
- III. Reinsurance drought
- IV. Low interest rates
- V. Civil Unrest
- VI. Employment Practices claims continue to rise
- VII. Cyber breaches and hacks widespread



10.1%

7.6% 3.9%

022020

Q3-2019



02019 ARTHUR J GALLAGHER & CO.



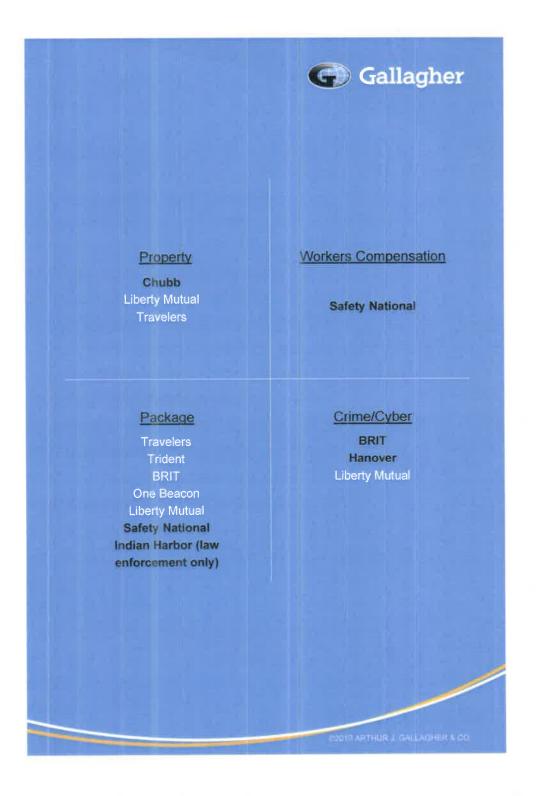


2020 Strategy

Your incumbent carriers remain the most competitive. This is mainly due to the current state of the marketplace and severe law enforcement claims experienced by the City. We do a complete marketing of your account every 3 years, unless we find it more advantageous to do so earlier. Given the City's loss experience combined with the marketplace, we decided to fully market your program to ensure the most competitive terms and pricing. We were able to leverage your current carriers to a more favorable renewal than any other carriers were able to offer.

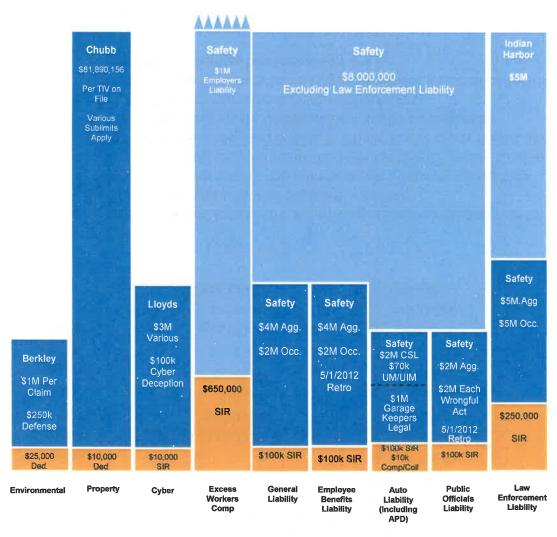
Marketplace Review

• These are carriers who took a look at your program this year. Our recommended options are in bold. There are no changes in your carriers, aside from the addition of Indian Harbor. Since Safety National can only now provide \$5M of law enforcement liability, Indian Harbor is providing the additional \$5M. Additionally, your Law Enforcement Liability SIR went from \$100K to \$250K. This was the minimum achieved retention in the marketplace. We discussed this likely outcome at last year's renewal as a projected marketplace trend for large Cities.





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Please note annual aggregate retention of \$275,000 for all coverages written by Safety National other than Workers Compensation and Auto Physical Damage. It does not include coverage provided by other carriers. Excess Annual Aggregate Retention Protection Limit of \$1,000,000.

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Premium Comparison

| | 2020 | 2021 | Delta |
|------------|---------------|---------------|-------|
| Package | \$ 169,935.44 | \$ 250,046.00 | 47% |
| Excess LEL | \$ - | \$ 45,826.00 | N/A |
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| Pollution | \$ 11,443.00 | \$ 12,160.50 | 6% |
| Fee | \$ 47,793.00 | \$ 49,227.00 | 3% |
| | \$ 424,149.44 | \$ 578,428.30 | 36% |

- ➤ Law Enforcement losses are the driving factor in increase due to purchasing excess LEL and package increase
- > Property increase falls in line with Midwest Property rate trends
- Cyber and Airport premiums are large %, smaller \$ value. Driving factors here are increased claims in Public Entity cyber hacks and COVID-19's effect on the aviation insurance marketplace
- > Workers Compensation remained relatively flat
- ➤ Gallagher is compensated on a brokerage fee instead of collecting commissions. Our fee has increased 3%



Large Open Claims

 4/22/2019
 USDC Complaint at Law
 \$142,459

 8/24/2019
 Use of force
 \$52,743

 8/24/2019
 Federal Civil Rights violation
 \$1,035,435

- > Law Enforcement losses are the driving loss factor
- > Property losses have become more stable over years past
- > Workers Compensation claims remain to stay within the City's SIR



Premium History

| <u>Year</u> | <u>Carrier</u> | Premium |
|-------------|-----------------|-----------|
| 2017 | BRIT | \$471,655 |
| 2018 | BRIT | \$470,168 |
| 2019 | BRIT | \$469,554 |
| 2020 | Safety National | \$424,149 |
| 2021 | Safety National | \$578,428 |

- ➤ After a 5 year relationship with BRIT, Safety National began a new Public Entity package last year. This provided the City \$45K in savings last year, and we moved the program.
- ➢ Given the increase this year, Safety National was still the most competitive in both terms and pricing.



Risk Management & Preventing Claims

- Continuing to utilize loss control services, online training, webinars, etc.
- Safety Committee Status
- Law Enforcement landscape Frontline PSS Police cam audit
- > Employee Handbook

> Are there any specific areas or trainings on your mind that you'd like us to

coordinate?







Loss Control & Claims Advocacy

| ccid | ent Analysis | Program Development | t in the second | Supervis | ory Skill Development |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------|
| | | Safety rules | | | Fraud prevention |
| | First-aid log | | handhook | | Insurance 101 |
| | Investigation report | Employee salety | | | |
| | OSHA log | | e, program | | Personal liability awareness |
| | Loss runs | Salety Illaniua | | | Hazard awareness |
| | Root cause | Safety committe | 6 | | Managing safety and culture |
| | Benchmarking | Work method | | | Incident investigation |
| | | Early return to w | ork | • | Safety meetings and communication |
| | | OSHA complian | ce | | Selling safety to management |
| | i amanta | | | | Workplace violence |
| 5565 | ssments | | | | Sexual harassment |
| | Slip, trip and fall | ALC: MINISTER | | | COMMON TICK CONTROLL |
| | Sprain and strain | Safety Training | | | |
| | Security | 10- and 30-hour | outreach training | | |
| | Ergonomic | OSHA 300 log r | | Property | Fire Protection Engineering |
| | Workplace | Hezard awarene | | | Property loss control advocacy |
| | | I MACHINE HAARLOLK | | | Evaluate fire protection systems |
| | Machine safeguarding | | g | | Provide property risk reports |
| | Job safety | Ergonomics | | | |
| | Safety program | | | | Account engineering coordination |
| | Mock OSHA | | | | Evaluate loss expectancies |
| | OSHA regulatory compliance | OSHA Citation Assista | ance | | HPR guidance and assistance |
| | Personal protective equipment | | | • | Flood exposure assessments |
| | Emergency response plan | Consultation set | | | |
| | Entergency reaportate prairi | Participation in s | settlement meeting | | |
| | | Abatement serv | | | |
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| CLA | Me | | | | |
| | | TOA DED/DEO | | Usellie | are Provider Selection |
| taim | ns Need Analysis | TPA RFP/RFQ | | певинса | |
| | Interview client | Client needs an | alvsis | | Review medical providers |
| | Determine goals and exposures | TPA alternatives | | | Tour client facility or plant |
| | Outline carrier requirements | Develop RFP at | | | Discuss RTW requirements |
| | | | | | Implement needed changes |
| | Develop service plan and timeline | Allalysis of toop | | | |
| | Ensure accountability | HIRELANDIA CHILCH | | | Evaluate NCM |
| | | Prepare compa | | | Job descriptions to doctor |
| | | Assist client in c | ecision | • | Video workstation assessments |
| nec | ial Handling Instructions | | | | |
| | The project of the second seco | | | | |
| | Client needs analysis | CAT Management | | Complet | c Claims Consulting |
| | Negotiation with carrier regarding claims | | | | |
| | handling instructions | | es/immediate responders | | Analysis and strategy development |
| 1 | Implement instructions | Off-site coordinate | | | Troubleshooting/intervention |
| , | Ensure compliance | | lient | | Damage control |
| | Endaro (Artifoliginos | | djuster | | Cost control |
| | | | Consultant | | Timely and appropriate vendor list |
| | | | | | Negotiation/resolution strategy |
| | | - 6 | orensic accountant | | |
| talm | s Reviews | | construction manager | | Mediation and pretrial preparation |
| talm | | | | | |
| | Coverage advocacy | | Others as necessary | | and participation |
| | Coverage advocacy Reserve adequacy/reduction | Facilitating adva | Others as necessary | | and participation Subrogation |
| | Coverage advocacy Reserve adequacy/reduction Aggressive plan of action | Facilitating adva | Others as necessary ance payments | | |
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Next Steps

- Insurance 101 with appropriate staff
- Claim review status with CCMSI
- Demo with Frontline PSS
- OSHA Audit awareness
- > 2021 Meeting/Update timeline



Thank you!

