

SUPPLEMENTAL AGENDA

REGULAR CITY COUNCIL MEETING

June 8, 2015


5:30 p.m.

CITY HALL COUNCIL CHAMBER
313 COURT STREET
THE DALLES, OREGON

**Item to be Added to Action Items
June 11, 2015**

5. ACTION ITEMS

- D. Approval of Insurance Renewals for Fiscal Year 2015-16



Julie Krueger, MMC, City Clerk



CITY of THE DALLES

313 COURT STREET
THE DALLES, OREGON 97058

(541) 296-5481
FAX (541) 296-6906

AGENDA STAFF REPORT
CITY OF THE DALLES

| MEETING DATE | AGENDA LOCATION | AGENDA REPORT # |
|--------------|-----------------|-----------------|
| | | |

TO: Honorable Mayor and City Council

FROM: Kate Mast, Finance Director

THRU: Nolan K. Young, City Manager *ny*

DATE: June 2, 2015

ISSUE: **Insurance Renewals for FY15/16 - Report by Mike Luebke, Oregon Trail Insurance, LLC**

BACKGROUND: Mike Luebke, Oregon Trail Insurance, LLC, the City's Agent of Record for Property, Auto, Liability, and Workers Compensation Insurance, will be presenting information to the Council on the renewal of Property, Liability and Auto Insurance for the upcoming fiscal year. We are not including the multi-paged individual insurance schedules (lists of each individual building, piece of equipment, and vehicle, etc.) in the agenda packet. Please contact either Nolan or me prior to the meeting if you would like to see those schedules.

Mr. Luebke will also discuss the estimates for Worker's Compensation Insurance for FY15/16. There are three options for payment: Plan 1 is to pay quarterly with a 2.5% prepay discount; Plan 2 is to pay for the entire year in July with a 4% prepay discount; and Plan 3 is to pay monthly with no discount. We have traditionally prepaid the annual fee to take advantage of the deepest discount, and so have only included the information on Plan 2 in the agenda packets.

BUDGET IMPLICATIONS: The approved budget contains sufficient funds for the renewal of the SAIF Workers Comp insurance estimates.

The approved budget does not contain sufficient funds for the renewal of the CIS insurance in the General Fund (short \$1,238.67) or in the Wastewater Fund (short \$461.99). However, the shortages within each fund are so small that we do not recommend any changes to the proposed budget, as the total of each Materials & Services category affected should not be over-expended.

ALTERNATIVES:

- A. **Staff Recommendation:** Move to approve the renewal of the City's Property, Liability Auto, and Workers Compensation Insurance coverages as presented.
- B. Council may choose to decline to approve the proposed renewals and direct Mr. Luebke to pursue alternatives for coverage.

Oregon Trail Insurance



409 West Fourth Street
The Dalles, OR 97058
541-296-2395 Tel
541-296-6143 Fax

May 28, 2015

Mr. Nolan Young, City Manager
City of The Dalles
313 Court Street
The Dalles, OR 97058

Re: City County Insurance Services Renewal Proposal - Effective July 1, 2015

Dear Nolan,

Below are listed several items relative to the July 1 insurance renewal. The renewal documents are attached from City County Insurance Services (CIS) for the next policy year from July 1, 2015 to July 1, 2015.

Workers' Compensation: The Experience Modification Factor has increased from 1.22 to 1.69 due to the claims history from last year. The frequency of claims is down slightly for this year and the severity of the claims for this year is down substantially.

Property: Buildings and Contents values were "trended" upwards by 2% for this coming year to maintain Replacement Values using the CIS-provided appraisal dated 11/30/2011. Approximately \$1,688,520 of additional property values are included in this proposal.

Liability: There is a separate proposal for the addition of Excess Cyber Liability Coverage. This premium is not included in the Property and Liability Proposal Summary. The City's current coverage provides \$50,000 of coverage for Cyber Liability Claims.

Claims: During the current fiscal year there have been 9 reported claims (down from 18 last year) with only 3 claims remaining "open" as of May 29, 2015.

Risk Management: The City has received a \$1,000 Bonus Credit for participation in the CIS 2014-15 Bonus Program. This credit is included on the Property and Liability Proposal Summary.

We continue to recommend coverage with CIS and Saif Corporation.

At Oregon Trail Insurance we continue to appreciate the working relationship with your staff at City of The Dalles and allowing us to serve efficiently as your agent. Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Colleen Clark".

Colleen Clark



**Workers' compensation insurance proposal for
CITY OF THE DALLES**

**MIKE COURTNEY
COURTNEY INSURANCE AGENCY INC
P: 541.296.4604
F: 541.298.5351
mike@courtneyinsure.com**



May 11, 2015

MIKE COURTNEY
PO BOX 580
THE DALLES, OR 97058-0580

Re: CITY OF THE DALLES

Policy: 488236

Dear MIKE COURTNEY:

This business's workers' compensation policy with SAIF Corporation renews on 07/01/2015. I authorized the rates and plan(s) shown on the enclosed premium estimate(s).

To elect coverage

Sign and return the *Notice of Election* before the effective date of 07/01/2015.

To elect a premium prepayment discount

Remit the first payment to SAIF by 07/10/2015 along with the enclosed prepay installment form. The business will not receive the prepay discount if the payment is late.

Verifiable time records

Oregon Administrative Rules require you to report wages under the highest rated classification applicable to any part of the worker's duties if you choose not to keep verifiable time records.

In most instances, if you have more than one classification on your insurance policy and your workers shift duties between those classifications, you can use verifiable time records to separate the payroll of the workers and report it in more than one classification on the payroll report.

Verifiable time records must be supported by original entries from other records, including, but not limited to, timecards, calendars, planners, or daily logs prepared by the employee or the employee's direct supervisor or manager. Estimated percentages or ratios will not be accepted. For more information on how to keep verifiable time records, go to saif.com / *Employer Guide / Reporting payroll / Verifiable time records*.

SAIF Corporation strives to provide our customers with the best services available at the lowest possible cost. We appreciate your confidence in us and look forward to working with you and our mutual customers to achieve this goal. Please feel free to contact me whenever you need assistance.

Sincerely,

Deserie Staats
Underwriter
P: 503.373.8833 or 800.285.8525
F: 503.584.8833
dessta@saif.com

400 High Street SE
Salem, OR 97312
P: 800.285.8525
F: 503.373.8020



CITY OF THE DALLES

Premium estimate for Guaranteed Cost Plan

Period: 07/01/2015 - 07/01/2016

Policy: 488236

Plan: 2

| Class | Description | Estimated Payroll | Rate | Estimated Premium |
|--------|---|-------------------|------|-------------------|
| 5506 | Street/Rd Const-Fnl Grad/Pve/Rep/Dr | \$415,880 | 9.49 | \$39,467 |
| 7382 | Limousine Co/Scheduled-Dr | \$12,320 | 5.47 | \$674 |
| 7520 | Waterworks Operation-Dr | \$999,312 | 3.88 | \$38,773 |
| 7580 | Sewage Disposal Plant Oper-Dr | \$499,164 | 4.39 | \$21,913 |
| 7720 | Police Officers & Dr | \$1,617,375 | 4.05 | \$65,504 |
| 8380 | City/County-Veh/Equip Repr Shop-Dr | \$100,254 | 4.59 | \$4,602 |
| 8411 | Vol Plcmm @ 2400/Qtr Ea | \$67,200 | 1.84 | \$1,236 |
| 8742 | Field Representatives | \$399,093 | .36 | \$1,437 |
| 8810 | Office Clerical | \$772,046 | .20 | \$1,544 |
| 8810 | Library/Museum-Public-Prof Emp&Cler | \$465,331 | .20 | \$931 |
| 8820 | Attorney & Cler/Messenger/Dr | \$254,562 | .20 | \$509 |
| 8831 | Dog Pounds-Incl Dog Catcher/Dr | \$27,294 | 1.99 | \$543 |
| 9015 | Buildings-Ops By Owner/Lessee & Drivers | \$94,020 | 4.42 | \$4,156 |
| 9410 | Municipal/Twn/Cnty/State Emp-Noc | \$511,850 | 2.09 | \$10,698 |
| 5507 | Street/Rd Const-Rdbed/Subase-Dr | \$0 | 6.60 | \$0 |
| 6826 F | Marinas/Boathouses Oper-Inc-Dr | \$0 | 8.16 | \$0 |
| 6836 | Marinas-Inc SlS/Prts Dr-State Act | \$0 | 8.08 | \$0 |
| 7720 | Trapping-Forest Animals/Dr | \$0 | 4.05 | \$0 |
| 9102 | Park Noc-All Employees & Dr | \$0 | 4.68 | \$0 |
| 9402 | Snow Removal-Streets/Roads-Dr | \$0 | 7.00 | \$0 |
| 9403 | Garbage/Ash/Refuse Collectn Dr | \$0 | 7.31 | \$0 |
| 8810 | Vol Library Prof Emp & Cler VOL@\$9.10/hour | \$0 | .20 | \$0 |

Total Payroll \$6,235,701

Manual Premium \$191,986

Part Two Coverage (Increased Limits Factor 1.004) + \$768

Subject Premium \$192,754

Experience Rating Modification x 1.69

Modified Premium \$325,755

Annual Prepay Discount (4.0%) - \$13,030

Standard Premium \$312,725

Premium Discount - \$48,850

Discounted Premium \$263,876

USLHW Expense Constant + \$100

Terrorism Premium + \$624

Catastrophe Premium + \$624

DCBS Premium Assessment @ 6.2% + \$16,372



CITY OF THE DALLES

Premium estimate for Guaranteed Cost Plan

Period: 07/01/2015 - 07/01/2016

Policy: 488236

Plan: 2

Total Premiums and Assessments \$281,595

Annual Prepay Installment \$281,595

Premium discount schedule

| | | |
|-------|-----------|-------|
| First | \$3,500 | 0.0% |
| Next | \$14,500 | 10.0% |
| Next | \$82,000 | 15.0% |
| Over | \$100,000 | 16.5% |

Payroll Reporting Frequency: Annual

Part Two coverage at limits of \$1,000,000/\$1,000,000/\$1,000,000 with \$120 minimum premium.

Terrorism premium = total payroll / 100 x .01

Catastrophe premium = total payroll / 100 x .01

DCBS Premium Assessment excludes Part Two coverage and federal premium.

Premium and rating factors will change on your anniversary rating date to those in effect at that time.

Your policy premium is based on your current estimated premium and may be prorated for policies issued for less than a full year or adjusted based on actual payroll by classification.



CITY OF THE DALLES

Notice of Election for Guaranteed Cost Plan

Period: 07/01/2015 - 07/01/2016

Policy: 488236

Plan: 2

Agency: COURTNEY INSURANCE AGENCY INC

Producer: MIKE COURTNEY

Premium Estimate:

| | |
|--------------------------------|-----------|
| Modified premium | \$325,755 |
| Annual prepay discount (4.0%) | \$13,030 |
| Standard premium | \$312,725 |
| Premium discount | \$48,850 |
| Total premiums and assessments | \$281,595 |

Payroll reporting frequency: Annual

Please visit saif.com and choose *Safety and health* for information about safety or choose *Employer Guide* for information about reporting payroll, paying online, filing and managing a claim, and coverage.

I, the undersigned, as a legal representative of the company listed above, do hereby authorize SAIF Corporation to issue the policy and determine workers' compensation premiums according to the plan selection on this form. I have read, understand, and agree to the terms and conditions of this plan as set forth in the proposal.

Authorized signature of insured

Date signed

Please return this page to:

**SAIF CORPORATION
400 High St SE
Salem, OR 97312-1000**



CITY OF THE DALLES

Plan description for Guaranteed Cost Plan

Period: 07/01/2015 - 07/01/2016

Policy: 488236

Guaranteed Cost Plan

SAIF Corporation's Guaranteed Cost Plan is a simple, no-risk plan that allows purchasers to know their insurance costs throughout the policy period. It may provide a premium discount based on volume.

Premium payment terms – Plan 3

We will send a payroll report to you at the end of each reporting period. Return the completed payroll report to us by the indicated due date or you may go to **saif.com** to submit payroll figures online where SAIF makes it easy by doing all the calculations for you.

Your premium, including the terrorism premium, catastrophe premium, and the Department of Consumer and Business Services premium assessment, is payable with each payroll report.

SAIF adds interest at the rate of one percent per month to any past due balance.

The Prepay advantage and payment terms - Plan 1, 2

SAIF Corporation offers additional savings in exchange for paying premiums in advance. A 4 percent discount is offered for annual prepay plans and a 2.5 percent discount is offered for quarterly prepay plans.

SAIF uses estimated premium paid in advance during the policy year to calculate the prepay discount even when your standard premium changes during the policy period.

The terrorism premium, catastrophe premium, and the Department of Consumer and Business Services (DCBS) premium assessment will also be estimated and paid with your prepay installments. The prepay discount does not apply to the terrorism premiums or the DCBS premium assessment.

If SAIF does not receive your first installment in our office on or before the 10th day of the new policy period, you will not receive the prepay discount. SAIF does not use postmark dates in determining date received.

If you choose a quarterly prepay, the estimated premium will be billed in four equal installments. Subsequent quarterly installments are due by the 25th day following the bill date of the installment.

Because the prepayment installments are based on estimated payroll and premium, your final premium, including terrorism and catastrophe premiums and DCBS premium assessment, cannot be determined until you report the actual subject payroll. A payroll report will be sent to you at the end of the policy year. SAIF must receive your completed payroll report by the indicated due date or you may go to **saif.com** to submit your payroll online. We will calculate the premium and assessment amounts and compare them to the payments you made based on the estimate. We will then send you a reconciliation statement showing the difference in these two amounts.

SAIF adds interest at the rate of one percent per month to any past due balance.

Excess Cyber Security Expense Coverage Proposal



citycounty insurance services

CIS
1212 Court St NE
Salem, OR 97301

Named Member
City of The Dalles
313 Court St.
The Dalles, OR 97058

Agent of Record
Oregon Trail Insurance
409 W 4th Street
The Dalles, OR 97058

This Proposal Does Not Bind Coverage
Refer to Coverage Forms for terms, conditions, and limitations of coverage

| | |
|---|--------------------|
| Coverage Period: 7/1/2015 to 7/1/2016 | 5/21/2015 |
| Excess Cyber Security Expense Coverage | \$1,000,000 |
| Coverage Limits excess of \$50,000 coverage provided under the CIS General & Auto Liability Coverage Agreement * | |
| Notification Costs | Included |
| Third Party Liability | Included |
| Penalties | Included |
| Extortion | Included |
| Breach Coaching | Included |
| Public Relations Consulting | Included |
| Credit Monitoring | Included |

* This represents only a brief summary of coverages. Please refer to the Cyber Security Expense Coverage section of the CIS General & Auto Liability Coverage Agreement for detailed coverages, exclusions, and conditions that may apply.

Deductible \$5,000

Contribution: \$5,040.00

Forms Applicable: CIS General & Auto Liability Coverage Agreement - CIS GL/LAL (7/1/2015)

Accepted by: _____

Authorized Representative / Agent

Date: _____

Property and/or Liability Proposal Summary



citycounty insurance services

Member

City of The Dalles
313 Court St.
The Dalles, OR 97058

Agent

Oregon Trail Insurance
409 W 4th Street
The Dalles, OR 97058

| Member Number | Effective Date | Termination Date | Proposal Date |
|---------------|----------------|------------------|---------------|
| 10212 | 7/1/2015 | 7/1/2016 | 5/20/2015 |

| Coverage | Description | Amount | Total Due |
|-----------------------------------|---------------------------------|---------------------|--------------|
| General Liability (Standard Plan) | Contribution Limit: \$5,000,000 | \$170,013.61 | |
| | Multi-Line Credit | (\$5,100.41) | |
| | Bonus Program Credits (1)* | (\$1,000.00) | \$163,913.20 |
| Auto Liability | Contribution | \$24,831.46 | |
| | Multi-Line Credit | (\$744.94) | \$24,086.52 |
| Auto Physical Damage | Contribution | \$20,061.65 | |
| | Multi-Line Credit | (\$601.85) | \$19,459.80 |
| Property | Contribution | \$102,759.82 | |
| | Multi-Line Credit | (\$3,082.79) | |
| | Bonus Program Credits (0)* | \$0.00 | \$99,677.02 |
| Optional Excess Liability | Contribution | Not Purchased | \$0.00 |
| Optional Excess Quake | Contribution | Not Purchased | \$0.00 |
| Optional Excess Flood | Contribution | Not Purchased | \$0.00 |
| Optional Excess Crime | Contribution | Not Purchased | \$0.00 |
| Optional Excess Cyber Liability | Contribution | Not Purchased | \$0.00 |
| Difference in Conditions | Contribution | Not Purchased | \$0.00 |
| Summary | Contribution | \$317,666.54 | |
| | Multi-Line Credit | (\$9,529.99) | |
| | Bonus Program Credit | (\$1,000.00) | |

* Each Bonus Program Credit equals 1% of GL and PR Contribution, up to \$1,000.

This is not an Invoice. Information Only

| | |
|---------------|---------------------|
| Total: | \$307,136.54 |
|---------------|---------------------|

CIS Liability Coverage Proposal



citycounty insurance services

CIS
1212 Court St NE
Salem, OR 97301

Named Member
City of The Dalles
313 Court St.
The Dalles, OR 97058

Agent of Record
Oregon Trail Insurance
409 W 4th Street
The Dalles, OR 97058

This Proposal Does Not Bind Coverage
Refer to Coverage Forms for terms, conditions, and limitations of coverage

| Coverage Period: 7/1/2015 to 7/1/2016 | | 5/20/2015 | | |
|---|-----------------------|-------------------|----------------------------------|----------------------|
| Coverage* | Per Occurrence Limit* | Annual Aggregate* | Per Occurrence Deductible / SIR* | Agg/Retro Deductible |
| Public Entity Liability Coverage (Including Auto Liability) as described in CIS General & Auto Liability Coverage Agreement | \$200,000 | \$600,000 | None | None |

Forms Applicable: CIS General & Auto Liability Coverage Agreement - CIS GL/JAL (7/1/2015)

| Coverage* | Per Occurrence Limit | Annual Aggregate | | |
|--|----------------------|------------------|--|--|
| Excess Public Entity Liability Coverage as described in the CIS Excess Liability Coverage Agreement (limits shown are excess of primary coverage limits) | \$4,800,000 | \$14,400,000 | | |

Forms Applicable: CIS Excess Liability Coverage Agreement - CIS XS/GL (7/1/2015)

| Coverage** | Per Occurrence Limit | Annual Aggregate | | |
|----------------|----------------------|------------------|--|--|
| Torus National | | | | |

* Refer to the CIS General & Auto Liability Coverage Agreement and CIS Excess Liability Coverage Agreement and endorsements (if any) for detailed coverages, special deductibles, limits, sublimits, exclusions, and conditions that may apply.
Excess Liability Coverage does not provide Uninsured Motorist coverage.

** Refer to Torus National Insurance Company Policy for details on coverage limitations and exclusions in this layer.

| Coverage | Contribution |
|------------------------|---------------------|
| General Liability | \$170,013.61 |
| Auto Liability | \$24,831.46 |
| Liability Total | \$194,845.07 |

To effect coverage, please sign, date and return this form before requested effective date. Fax is acceptable

Accepted by: _____

Authorized Representative / Agent

Date: _____

CIS Auto Physical Damage Coverage Proposal



citycounty insurance services

CIS
1212 Court St NE
Salem, OR 97301

Named Member
City of The Dalles
313 Court St.
The Dalles, OR 97058

Agent of Record
Oregon Trail Insurance
409 W 4th Street
The Dalles, OR 97058

This Proposal Does Not Bind Coverage
Refer to Coverage Forms for terms, conditions, and limitations of coverage

| Coverage Period: 7/1/2015 to 7/1/2016 | | 5/20/2015 | | |
|--|-----------------------------|--------------------------|----------------------|--------------|
| Autos Covered* | Coverage Limit | Comprehensive Deductible | Collision Deductible | Contribution |
| Scheduled Autos | Per Schedule** | Per Schedule** | Per Schedule** | \$20,061.65 |
| Rented or Leased Autos (60 days or less) | ACV Not to Exceed \$100,000 | \$100 | \$500 | Included |
| Newly Acquired Autos | Included | \$100 | \$500 | Included |

* This represents only a brief summary of coverages. Please refer to CIS Auto Physical Damage Coverage Agreement for detailed coverages, exclusions, and conditions that may apply.

Total Contribution: \$20,061.65

Forms Applicable: CIS Auto Physical Damage Coverage Agreement - CIS APD (7/1/2015)

**Current CIS Auto Schedule

To effect coverage, please sign, date and return this form before requested effective date. Fax is acceptable

Accepted by:

Authorized Representative / Agent

Date:

CIS Property Coverage Proposal



citycounty insurance services

CIS
1212 Court St NE
Salem, OR 97301

Named Member
City of The Dalles
313 Court St.
The Dalles, OR 97058

Agent of Record
Oregon Trail Insurance
409 W 4th Street
The Dalles, OR 97058

This Proposal Does Not Bind Coverage
Refer to Coverage Forms for terms, conditions, and limitations of coverage

Coverage Period: 7/1/2015 to 7/1/2016

5/20/2015

Coverage Limits (Per Occurrence):*

| | |
|---|---|
| Building and Contents and PIO | Per current CIS Property Schedule |
| Mobile Equipment | Per current CIS Mobile Equipment Schedule |
| Earthquake | \$5,000,000 |
| Excess Earthquake - Coverage applies only if coverage limit is shown. | None |
| Flood | \$5,000,000 |
| Excess Flood - Coverage applies only if coverage limit is shown. | None |
| Combined Loss of Revenue and Rental Value | \$150,000 |
| Combined Extra Expense and Rental Expense | \$250,000 |
| Property in Transit | \$150,000 |
| Hired, Rented or Borrowed Equipment | \$150,000 |
| Restoration/Reproduction of Books, Records, etc. | \$100,000 |
| Electronic Data Restoration/Reproduction | \$250,000 |
| Pollution Cleanup | \$25,000 |
| Crime Coverage | \$50,000 |
| Police Dogs (if scheduled) | \$15,000 |
| Off Premises Service Interruption | \$100,000 |
| Miscellaneous Coverage | \$50,000 |
| Personal Property at Unscheduled Locations | \$15,000 |
| Personal Property of Employees or Volunteers | \$15,000 |
| Unscheduled Fine Arts | \$100,000 |
| Temporary Emergency Shelter Restoration | \$50,000 |
| Difference in Conditions - Earthquake & Flood (if any): | \$0 |
| Extra Items (if any): | |

* This represents only a brief summary of coverages. Please refer to the CIS Property Coverage Agreement for detailed coverages, exclusions, and conditions that may apply.

Locations Covered: Per current CIS Property Schedule.

Perils Covered: Risks of Direct Physical Loss subject to the terms, conditions and exclusions contained in the coverage forms listed below under Forms Applicable.

Deductibles: \$5,000 Per occurrence except as noted and as follows (if any).

\$1,000 Per occurrence on scheduled mobile equipment items.

Earthquake and Flood: Special deductibles and restrictions per Section 2 of the CIS Property Coverage Agreement.

Total Contribution: \$102,759.82 (Property)

\$0.00 (Excess Earthquake)

Forms Applicable: CIS Property Coverage Agreement - CIS PR (7/1/2015)

To effect coverage, please sign, date and return this form before requested effective date. Fax is acceptable

Accepted by:

Authorized Representative / Agent

Date: _____

CIS Equipment Breakdown Coverage Proposal



citycounty insurance services

CIS
1212 Court St NE
Salem, OR 97301

Named Member
City of The Dalles
313 Court St.
The Dalles, OR 97058

Agent of Record
Oregon Trail Insurance
409 W 4th Street
The Dalles, OR 97058

This Proposal Does Not Bind Coverage
Refer to Coverage Forms for terms, conditions, and limitations of coverage

Coverage Period: 7/1/2015 to 7/1/2016

5/20/2015

Coverage Limits:*

| | |
|--|--|
| Property Damage | Per current CIS Property Schedule or \$100,000,000, whichever is less. |
| Rental Value/Rental Expense | Included in Property Damage |
| Extra Expense | Included in Property Damage |
| Service Interruption | Included in Property Damage |
| Drying out following a flood | Included in Property Damage |
| Course of Construction | Included in Property Damage |
| Computer Equipment | Included in Property Damage |
| Portable Equipment | Included in Property Damage |
| CFC Refrigerants | Included in Property Damage |
| Hazardous Substance | \$2,000,000 |
| Data Restoration | \$250,000 |
| Perishable Goods | \$2,000,000 |
| Expediting Expense | \$2,000,000 |
| Demolition | \$2,000,000 |
| Ordinance or Law | \$2,000,000 |
| Off Premises Property Damage | \$250,000 |
| Contingent Rental Value/Rental Expense | \$250,000 |
| Newly Acquired Locations | \$1,000,000 / 365 days max. |
| Extended Period of Restoration | 30 Days |

* This represents only a brief summary of coverages. Please refer to CIS Equipment Breakdown Coverage Agreement for detailed coverages, exclusions, and conditions that may apply.

Locations Covered: Per current CIS Property Schedule.

Deductible: \$1,000 All Coverages: 24 hour waiting period applies for service interruption.

Contribution: Included

Forms Applicable: Equipment Breakdown Coverage Agreement - CIS BM (7/1/2015)

To effect coverage, please sign, date and return this form before requested effective date. Fax is acceptable

Accepted by: _____

Authorized Representative / Agent

Date: _____