



ORDINANCE NO. 1899-18

AN ORDINANCE AUTHORIZING THE CHIEF OPERATING OFFICER TO ENTER INTO AN AGREEMENT WITH ARTHUR J. GALLAGHER RISK MANAGEMENT SERVICES

BE IT ORDAINED by the Mayor and Board of Trustees of the Village of Hawthorn Woods, Illinois, that the Chief Operating Officer be, and the same is, hereby authorized and directed to enter into an Agreement between the Village of Hawthorn Woods, a municipal corporation located in Lake County, Illinois and Arthur J. Gallagher Risk Management Services, in substantially the form attached hereto as Exhibit "A", and, by this reference, made a part hereof, with such changes as are approved by the Mayor and Village Attorney.

BE IT ORDAINED by the Mayor and Board of Trustees of the Village of Hawthorn Woods, Lake County, Illinois, that the Chief Operating Officer is authorized to expend funds for the purchase of property, casualty and workers compensation insurance coverage from Underwriters at Lloyd's, London, BCS Insurance Company, Starr Indemnity & Liability Company, Hanover Insurance Company and the Illinois Public Risk Fund for the period January 1, 2019 to December 31, 2019 in an amount not to exceed \$169,331 as outlined in the attached Proposal of Insurance, a copy of which is attached hereto as Exhibit "A", and, by this reference, made a part hereof, with such changes as are approved by the Mayor and the Village Attorney.

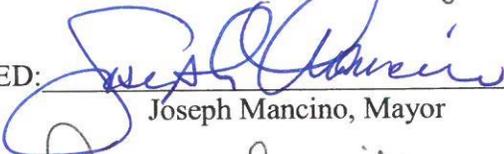
The foregoing Ordinance was adopted by the Village Board of the Village of Hawthorn

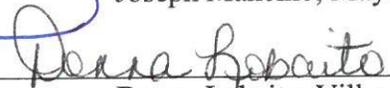
Woods, Illinois on November 26, 2018:

AYES: Kaiser, Kosik, Riess, David

NAYS: 0

ABSENT AND NOT VOTING: Corrigan, Dimaggio

APPROVED: 
Joseph Mancino, Mayor

ATTEST: 
Donna Lobaito, Village Clerk

ADOPTED: November 26, 2018

APPROVED: November 26, 2018

Village of Hawthorn Woods

2 Lagoon Drive
Hawthorn Woods, IL 60047

Proposal of Insurance

Presented: November 9, 2018

Effective: December 31, 2018

PUBLIC SECTOR PRACTICE



Arthur J. Gallagher & Co.

Marcus Henthorn CLCS
Area Vice President
Arthur J. Gallagher Risk Management Services, Inc.
Public Sector
2850 Golf Road
Rolling Meadows, IL 60008
Marcus_Henthorn@ajg.com
www.ajg.com

Village of Hawthorn Woods

Executive Summary

Arthur J. Gallagher Risk Management Services, Inc. appreciates the opportunity to present this proposal for your consideration.

The entire staff at Arthur J. Gallagher Risk Management Services, Inc. would like to thank the Village of Hawthorn Woods for the opportunity to present our background, experience, and qualifications as they pertain to the Village's insurance and risk management needs.

The Village of Hawthorn Woods will directly benefit from utilizing our collective knowledge and experience of serving as broker to many Public and Governmental Entities. Nationally, we provide services to over 5,000 schools, municipalities, and counties encompassing over 500,000 employees and \$30,000,000,000 in property values. The Arthur J. Gallagher Risk Management Services, Inc. division of Arthur J. Gallagher & Co. is solely focused on this segment of the market and our expanding client list, market relationships, and personnel reflect that commitment.

We are confident that our proposal will demonstrate our ability to service the risk management needs and confirm our commitment to the Village of Hawthorn Woods based on:

- Our office's strong national presence, which includes clients from New Hampshire to Idaho, and
- Our expertise in governmental entities.

Our company has the expertise and breadth of services to meet all of your risk management needs. We have an experienced team that will work as an extension of your risk management department and will be committed to ensure your program's success.

We again thank you for this opportunity and look forward to be of service to you

Below is an exposure comparison from expiring to renewal term. It is important to point out that around 10 changes were submitted throughout the current term adding vehicles and equipment for which BRIT did not bill any Additional premium due to their Limited Midterm Adjustment Policy.

Coverage	2017-2018	2018-2019	% Change
Total Values	\$14,863,588	\$14,913,588	.003 %
# Autos	29	29	0 %
Payrolls	3,072,000	3,303,697	7.54%
Contractors Equipment	\$1,115,466	\$1,080,075	-3.2%

In the following pages, we will demonstrate what makes our company the best fit for your insurance placement and risk management needs. Thank you again for allowing us to be your partner in this placement.

Marcus Henthorn

Friday, November 09, 2018

Village of Hawthorn Woods

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Village of Hawthorn Woods

Our Team and Commitment

Village of Hawthorn Woods

Service Team

Marcus Henthorn 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
Marcus Henthorn, CLCS Area Vice President	630-694-5152	Marcus_Henthorn@ajg.com	Producer
Deb Canning Client Service Manager	630-647-3102	Deb_Canning@ajg.com	Client Service Manager

Arthur J. Gallagher Risk Management Services, Inc.
Main Office Phone Number: (630) 773-3800

Service Commitment

Account Service

At Arthur J. Gallagher & Co., our goal is to provide you with an exceptional insurance and risk management program delivered by a world class service organization. Gallagher is committed to partnering with our clients to ensure we consistently deliver the highest quality service possible.

Renewals

We use a standard Renewal Timeline and start early to make sure your needs are met and we are able to offer you the most comprehensive and competitively priced insurance program. At each renewal, we will meet with you to establish a renewal game plan, determine how many markets should be approached, discuss pricing in the insurance marketplace, and identify what specific needs must be addressed. We will then approach markets that we feel will offer the best alternatives. These alternatives will be presented at renewal as an option, even if we feel the incumbent program is strongest. We will demonstrate how we have created competition within the marketplace to ensure that you receive the best renewal terms.

We make ourselves accountable by working with you to develop a written service schedule that meets your needs. You can track our service by referring to our written service commitment. Service becomes especially important as your type of organization continues to change and prosper.

As a top national broker, we have access to over 150 insurance companies and wholesalers. This maximizes your insurance options in any given policy year situation. In addition, our integrity and influence in the marketplace have resulted in excellent relationships with our markets. These factors are especially important to consider as the insurance needs of your organization become more complex and require more sophisticated solutions.

Acquisitions

On request, we will perform an insurance due-diligence review on all products and acquisitions.

Profit Center Premium Allocations

We will provide premium breakdown by entities and/or location schedule.

Automobile Identification Cards

ID cards will be issued upon binding of coverage.

Phone Calls

Phone calls will be returned within one working day of receipt.

Village of Hawthorn Woods

Service Commitment (Cont.)

Certificates of Insurance

Certificates of Insurance will be issued within one working day of request.

Quarterly Account Review

Quarterly account reviews will include review of claims, exposures, audits, and service.

Loss Control

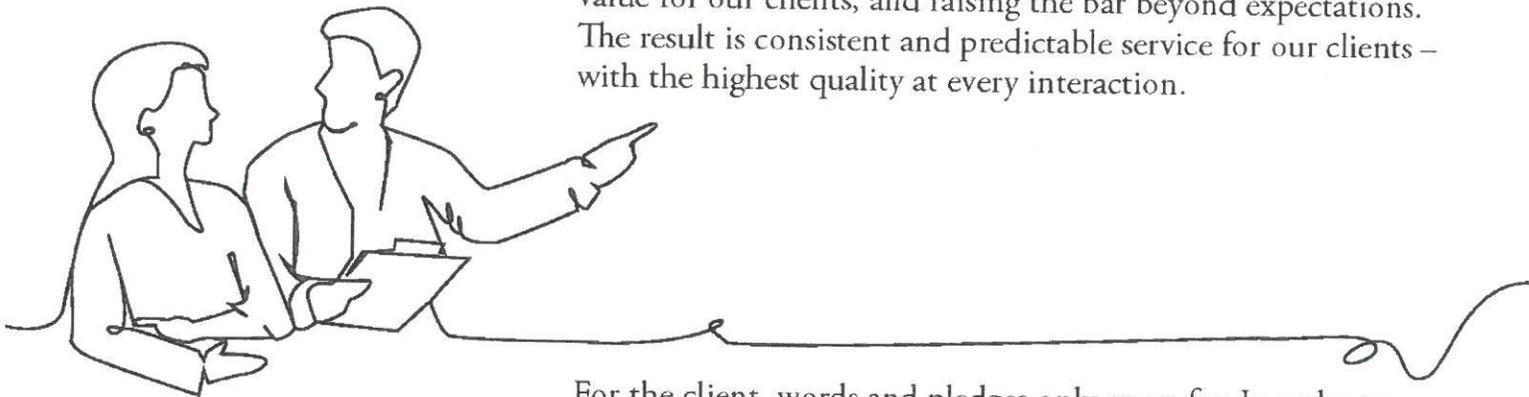
We will coordinate all loss control activities between you and the carrier. We recommend that service be provided on a quarterly basis.

Our Service Commitment

Our clients repeatedly tell us the most important thing that we can do as their broker is to protect their assets while providing a comprehensive and tailored insurance program with the most competitive terms. We also know that a critical component of every customer experience is receiving an accurate and timely response to their day to day business needs and challenges.

At Arthur J. Gallagher and Co. our goal is to provide every client with an exceptional insurance and risk management program delivered by a world-class service organization.

We're on a journey to set a new standard for service within our industry – utilizing innovative technology and tools that create value for our clients, and raising the bar beyond expectations. The result is consistent and predictable service for our clients – with the highest quality at every interaction.



For the client, words and pledges only go so far. In order to deliver on our promise, Gallagher is committed to partnering with our clients to ensure we consistently deliver the highest quality service possible:

- **Clients get what they need, when they need it** – as a result of managing our work more effectively, your needs and requests are addressed promptly and professionally at all times
- **Our service team is able to focus on you**, and the solutions needed to support your unique business needs
- **We proactively manage your renewal cycle**, delivering a predictable timeline that creates time for thorough decision-making
- **You play a role in this too** – we're asking for more information ahead, so that you receive the best outcome, every time

Village of Hawthorn Woods

Your Program

Village of Hawthorn Woods

Named Insured

Named Insured Schedule:

Add / Change / Delete	Named Insured	Package	Automobile	Umbrella	Cyber Liability	Accidental Death and Dismemberment	Workers Compensation	Crime
	Village of Hawthorn Woods	X	X	X	X	X	X	X

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

Village of Hawthorn Woods

Marketplace 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
Underwriters at Lloyd's London	Package	Recommended Quote	\$49,237
Underwriters at Lloyd's, London	Automobile	Recommended Quote	\$16,562
Underwriters at Lloyd's London	Umbrella	Recommended Quote	\$10,174
BCS Insurance Company	Cyber Liability	Recommended Quote	\$2,603
Starr Indemnity & Liability Company	Accidental Death and Dismemberment	Recommended Quote	\$1,250
Illinois Public Risk Fund	Workers Compensation	Recommended Quote	\$72,059
Hanover Insurance Company	Crime	Recommended Quote	\$1,497

Village of Hawthorn Woods

Location Schedule

LINE OF COVERAGE	LOC # / BLDG #	LOCATION ADDRESS
All Lines of Coverage included in this proposal	1/1-3	2 Lagoon Dr 60047
	2/1	Outdoor Property
	3/1-4	27 Acorn Dr.
	4/1-6	42 Park View Ln
	5/1-4	8 Copperfield Dr.
	6/1-2	9 Heather Lane
	7/1-12	436 Heritage Oaks
	8/1-6	19 N. Highview Circle
	9/1-3	Magnolia Parkway
	10/1-2	Elm St. & Juel Cir
	11/1-17	35 Old McHenry Rd
	12/1-2	Krueger and Midlothian Road
	13/1	1 Hubbard Lane
	14/1-9	94 Midlothian
	15/1	Acacia Drive
	16/1	28 Bruce Circle North

Village of Hawthorn Woods

Program Details

Coverage: Package - Property
Carrier: Underwriters at Lloyd's London
Policy Period: 12/31/2018 to 12/31/2019

Coverage:

SUBJECT OF INSURANCE	AMOUNT
Buildings and Personal Property	\$14,913,588
Equipment Breakdown	Included
Contractor's Equipment	\$1,080,075
Contractor's Equipment - Unscheduled (\$2,500 maximum per any one item applies)	\$50,000
Earthquake	\$5,000,000
Flood	\$5,000,000

Deductibles / Self Insured Retention

COVERAGE	AMOUNT
Buildings and Personal Property	\$1,000
Equipment Breakdown	\$1,000
Contractor's Equipment	\$500
Contractor's Equipment - Unscheduled (\$2,500 maximum per any one item applies)	\$500
Earthquake	\$25,000
Flood	\$25,000
Automated External Defibrillator, Collapse, Commandeered Property of Others (Other than Automobiles), Crime Reward – Excluding Arson, Debris Removal of Covered Property	Policy Deductible each
Emergency Evacuation Expense, Emergency Real Estate Consulting Fee, Exterior Building Glass, "Fungus", Wet Rot, Dry Rot and Bacteria – Limited Coverage	Policy Deductible each
Inventory and Appraisal Cost for Claim Preparation, Lease Cancellation Moving Expenses, Money and Securities, Pollutant Clean Up and Removal, Preservation of Property	Policy Deductible each
State Forest Fire Expense, Water Damage, Other Liquid, Powder or Molten Material Damage	Policy Deductible each
Employee Dishonesty	\$250
Emergency Portable Equipment – Scheduled	\$500
Emergency Portable Equipment-Unscheduled	\$500
Lock Replacement	\$50
Animals and Canines, Appurtenant Buildings or Structures, Building Ordinance or Law Coverage - Coverage A (Undamaged) & Coverage B (Demolition) and Coverage C (Increased Cost of Construction)	Policy Deductible each
Accounts Receivable, Business Income, Extra Expense, Change in Temperature, Electrical Damage and Off-Premises Utility Services - , Direct Damage, Communication Towers	Policy Deductible each

Village of Hawthorn Woods

Program Details (Cont.)

Deductibles / Self Insured Retention

COVERAGE	AMOUNT
Contractors' Equipment- Non-Owned, Employees' Tools, Fair or Exhibitions, Fine Arts, Footbridges and Appurtenant Structures, Foundations of Machinery, Swimming Pools and Underground Pipes	Policy Deductible each
Golf Course Greens – Limited Perils, Newly Acquired or Constructed Property, Non-owned Detached Trailers, Outdoor Property, Paved Surfaces, Personal Computers, Communication Equipment, EDP Equipment	Policy Deductible each
Electronic Data or Media, Personal Effects, Personal Property Off-Premises or in Transit, Recertification Expense, Rental Expense – Contractor's Equipment, Retaining Walls, Sign Coverage	Policy Deductible each
Spoilage - See Utility Service Direct Damage, Surface Water (Locations situated in a 100 or 500 year flood plain are excluded), Theft Damage to Non-Owned Buildings, Underground Sprinkler Systems	Policy Deductible each
Underground Water Seepage, Unnamed Locations, Valuable Papers and Records – Cost of Research (Other than Electronic Data)	Policy Deductible each
Unless otherwise shown in an Equipment Breakdown Coverage Schedule, the following coverages also apply to the direct result of an "accident."	-
Expediting Expense, Hazardous Substance, Perishable Stock (includes spoilage and contamination), Data Restoration, Service Interruption	Policy Deductible each

Additional Coverage:

DESCRIPTION	AMOUNT	BASIS
Automated External Defibrillator	\$5,000	
Collapse	Limit Extended	
Commandeered Property of Others (Other than Automobiles)	\$250,000	
Crime Reward – Excluding Arson	\$25,000	
Debris Removal of Covered Property	25% of loss + \$25,000	Per Location
Emergency Evacuation Expense	\$25,000	
Emergency Real Estate Consulting Fee	\$5,000	
Employee Dishonesty	\$50,000	
Exterior Building Glass	Included	
Fire Department Service Charge	\$25,000	
"Fungus", Wet Rot, Dry Rot and Bacteria – Limited Coverage	\$15,000	
Inventory and Appraisal Cost for Claim Preparation	\$10,000	
Lease Cancellation Moving Expenses	\$2,500	
Money and Securities	\$25,000	
Pollutant Clean Up and Removal	\$25,000	
Preservation of Property	Included	
State Forest Fire Expense	\$25,000	
Temporary Meeting Space	\$1,000	

Village of Hawthorn Woods

Program Details (Cont.)

Additional Coverage:

DESCRIPTION	AMOUNT	BASIS
Water Damage, Other Liquid, Powder or Molten Material Damage	Included	
Accounts Receivable - on premises	\$250,000	Per Occurrence
Accounts Receivable - off premises	\$50,000	Per Occurrence
Animals and Canines	\$1,500	Per Animal
Animals and Canines	\$10,000	Per Occurrence
Appurtenant Buildings or Structures	\$10,000	
Arson Reward	\$25,000	
Building Ordinance or Law Coverage - Coverage A (Undamaged)	Included	
Building Ordinance or Law Coverage - Coverage B (Demolition) and Coverage C (Increased Cost of Construction)	\$350,000	
Business Income	\$100,000	
Extra Expense	\$500,000	
Business Income - Loss of Tax Revenue	\$100,000	
Change in Temperature, Electrical Damage and Off-Premises Utility Services –	-	
Direct Damage	\$50,000	
Communication Towers	\$100,000	
Contractors' Equipment- Non-Owned	\$75,000	Per Item
Contractors' Equipment- Non-Owned	\$250,000	Per Occurrence Limit
Emergency Portable Equipment – Scheduled	\$209,740	
Emergency Portable Equipment-Unscheduled	\$25,000	
Employees' Tools	\$500	Per Employee
Employees' Tools	\$1,500	Per Occurrence
Fair or Exhibitions	\$50,000	
Fine Arts	\$5,000	Per Item
Fine Arts	\$100,000	Per Occurrence Limit
Fire Equipment Recharge	\$25,000	
Footbridges and Appurtenant Structures	\$25,000	
Foundations of Machinery, Swimming Pools and Underground Pipes	Limit Extended	
Golf Course Greens – Limited Perils	\$100,000	
Lock Replacement	\$25,000	
Newly Acquired or Constructed Property	\$1,000,000	Each Building Limit
Newly Acquired or Constructed Property	\$500,000	Contents Limit
Non-owned Detached Trailers	\$5,000	
Outdoor Property	\$25,000	

Village of Hawthorn Woods

Program Details (Cont.)

Additional Coverage:

DESCRIPTION	AMOUNT	BASIS
Paved Surfaces	\$100,000	
Personal Computers, Communication Equipment, EDP Equipment, Electronic Data or Media	\$250,000	Per Occurrence
Personal Computers, Communication Equipment, EDP Equipment, Electronic Data or Media	\$10,000	Away from Premises
Personal Effects	\$25,000	Per Person/Each Location
Personal Effects	\$50,000	Occurrence Limit
Personal Property Off-Premises or in Transit	\$100,000	
Recertification Expense	\$5,000	
Rental Expense – Contractor's Equipment	\$10,000	
Retaining Walls	\$10,000	
Sign Coverage	\$25,000	
Spoilage - See Utility Service Direct Damage	\$25,000	
Surface Water (Locations situated in a 100 or 500 year flood plain are excluded)	\$25,000	
Theft Damage to Non-Owned Buildings	\$50,000	
Underground Sprinkler Systems	Included	
Underground Water Seepage	\$10,000	Per Premise
Unnamed Locations	\$250,000	
Valuable Papers and Records – Cost of Research (Other than Electronic Data)	\$250,000	On Premises
Valuable Papers and Records – Cost of Research (Other than Electronic Data)	\$50,000	Away from Premises
Unless otherwise shown in an Equipment Breakdown Coverage Schedule, the following coverages also apply to the direct result of an "accident." These coverages do not provide additional amounts of insurance.	-	
Expediting Expense	\$250,000	
Hazardous Substance	\$250,000	
Perishable Stock (includes spoilage and contamination)	\$250,000	
Data Restoration	\$250,000	
Service Interruption	No Sub-Limit but 24 Hour Delay	

Valuations:

DESCRIPTION	LIMITATIONS
Replacement Cost/Agreed Amount	Applies
Replacement Cost	Contractors equipment covered in property form

Village of Hawthorn Woods

Program Details (Cont.)

Perils Covered:

TYPE	DESCRIPTION
Special Form Perils	Coverage form is Special, including theft

Endorsements include, but are not limited to:

DESCRIPTION
MUNI-BISI-PF-002 (12-11)

Exclusions include, but are not limited to:

DESCRIPTION
Earth Movement Exclusion
Flood Exclusion
Government Action Exclusion
War Exclusion
Nuclear Hazard, Power Failure
Flood - 100 and 500 year flood plains, as defined by FEMA, are excluded
Earthquake - Excludes New Madrid Region

Binding Requirements:

DESCRIPTION
Subject to receipt of a currently signed, original application prior to inception date.
Subject to Loss Control Questionnaire. Please Forward This Information at Least 30 Days Prior to the Event.
Subject to signed statement of values prior to inception date
Subject to Signed Acceptance or Rejection of TRIA
Subject to provide the year built for all locations and square footage for at least buildings with a limit of \$500,000 or greater so that Insurance to Value Calculations can be performed if coverage is bound, or submit a recent appraisal. Also advise the date of updates to roofing, plumbing, heating and electrical systems for all buildings over 35 years old.

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
TRIA Premium - \$569
*Deductible Exceptions: Motors, pumps and deep well pump units: \$10.00 Per Horsepower, \$2,500 Minimum ICE (Internal Combustine Engines)/Generators: \$30.00 Per KW, \$2,500 Minimum
Buildings and Personal Property Total Insured Values - \$14,913,588 vs Expiring Values of \$14,863,588

Village of Hawthorn Woods

Program Details (Cont.)

Premium	\$49,237
<hr/>	
ESTIMATED PROGRAM COST	\$49,237
TRIA/TRIPRA PREMIUM	
(+ Additional Surcharges, Taxes and Fees as applicable)	\$756

Subject to Audit: Not Auditable
Statement of Values:

Loc. # / Bldg. #	Address Description	Buildings	Contents	Adj TIV
1/1	2 Lagoon Dr, 60047	\$3,499,267.00	\$270,504.00	\$3,769,771.00
1/2	2 Lagoon Dr, 60047	-	\$10,404.00	\$10,404.00
1/3	2 Lagoon Dr, 60047	-	\$104,040.00	\$104,040.00
2/1	Outdoor Property	\$26,522.50	-	\$26,522.50
3/1	27 Acorn Dr.	\$6,365.40	-	\$6,365.40
3/2	27 Acorn Dr.	\$58,349.50	-	\$58,349.50
3/3	27 Acorn Dr.	\$68,958.50	-	\$68,958.50
3/4	27 Acorn Dr.	\$8,487.20	-	\$8,487.20
4/1	42 Park View Ln	\$26,522.50	-	\$26,522.50
4/2	42 Park View Ln	\$16,974.40	-	\$16,974.40
4/3	42 Park View Ln	\$9,548.10	-	\$9,548.10
4/4	42 Park View Ln	\$15,913.50	-	\$15,913.50
4/5	42 Park View Ln	\$106,090.00	-	\$106,090.00
5/1	8 Copperfield Dr.	\$3,182.70	-	\$3,182.70
5/2	8 Copperfield Dr.	\$2,121.80	-	\$2,121.80
5/3	8 Copperfield Dr.	\$31,827.00	-	\$31,827.00
5/4	8 Copperfield Dr.	\$67,540.08	-	\$67,540.08
6/1	9 Heather Lane	\$1,591.35	-	\$1,591.35
6/2	9 Heather Lane	\$42,436.00	-	\$42,436.00
7/1	436 Heritage Oaks	\$197,725.24	-	\$197,725.24
7/2	436 Heritage Oaks	\$75,194.47	-	\$75,194.47
7/3	436 Heritage Oaks	\$7,906.89	-	\$7,906.89
7/4	436 Heritage Oaks	\$12,698.97	-	\$12,698.97
7/5	436 Heritage Oaks	\$424,360.00	-	\$424,360.00
7/6	436 Heritage Oaks	\$16,443.95	-	\$16,443.95
7/7	436 Heritage Oaks	\$10,849.82	-	\$10,849.82
7/8	436 Heritage Oaks	\$79,567.50	-	\$79,567.50
7/9	436 Heritage Oaks	\$612,669.75	-	\$612,669.75
7/10	436 Heritage Oaks	\$5,304.50	-	\$5,304.50
7/11	436 Heritage Oaks	\$42,892.19	-	\$42,892.19
7/12	436 Heritage Oaks	\$98,341.19	-	\$98,341.19

Village of Hawthorn Woods

Program Details (Cont.)

8/1	19 N. Highview Circle	\$2,652.25	-	\$2,652.25
8/2	19 N. Highview Circle	\$6,365.40	-	\$6,365.40
8/3	19 N. Highview Circle	\$15,913.50	-	\$15,913.50
8/4	19 N. Highview Circle	\$58,349.50	-	\$58,349.50
8/5	19 N. Highview Circle	\$74,263.00	-	\$74,263.00
8/6	19 N. Highview Circle	\$14,205.00	-	\$14,205.00
9/1	Magnolia Parkway	\$6,365.40	-	\$6,365.40
9/2	Magnolia Parkway	\$68,958.50	-	\$68,958.50
9/3	Magnolia Parkway	\$97,478.67	-	\$97,478.67
10/1	Elm St. & Juel Cir	\$2,121.80	-	\$2,121.80
10/2	Elm St. & Juel Cir	\$67,701.33	-	\$67,701.33
11/1	35 Old McHenry Rd	-	\$2,075.60	\$2,075.60
11/2	35 Old McHenry Rd	\$5,328.19	-	\$5,328.19
11/3	35 Old McHenry Rd	-	\$9,909.30	\$9,909.30
11/4	35 Old McHenry Rd	-	\$2,793.78	\$2,793.78
11/5	35 Old McHenry Rd	\$13,112.93	-	\$13,112.93
11/6	35 Old McHenry Rd	\$3,514.36	-	\$3,514.36
11/7	35 Old McHenry Rd	\$932,344.00	\$265,302.00	\$1,197,646.00
11/8	35 Old McHenry Rd	\$164,454.95	-	\$164,454.95
11/9	35 Old McHenry Rd	\$66,178.53	-	\$66,178.53
11/10	35 Old McHenry Rd	-	\$16,978.92	\$16,978.92
12/1	Krueger and Midlothian Road	\$231,750.00	-	\$231,750.00
13/1	1 Hubbard Lane	\$262,650.00	-	\$262,650.00
14/1	94 Midlothian	\$3,814,195.06	\$138,706.74	\$3,952,901.80
14/2	94 Midlothian	\$2,196,610.96	-	\$2,196,610.96
14/3	94 Midlothian	\$37,159.31	-	\$37,159.31
14/4	94 Midlothian	\$33,832.41	-	\$33,832.41
14/5	94 Midlothian	\$6,265.49	-	\$6,265.49
14/6	94 Midlothian	\$6,643.50	-	\$6,643.50
14/7	94 Midlothian	\$26,888.15	-	\$26,888.15
14/8	94 Midlothian	\$190,383.14	-	\$190,383.14
12/2	Krueger and Midlothian Road	-	-	-
11/11	35 Old McHenry Rd	-	\$7,500.00	\$7,500.00
11/12	35 Old McHenry Rd	-	\$5,553.00	\$5,553.00
4/6	42 Park View Ln	-	\$11,800.00	\$11,800.00
11/13	35 Old McHenry Rd	-	\$11,800.00	\$11,800.00
14/9	94 Midlothian	-	\$3,324.00	\$3,324.00
11/14	35 Old McHenry Rd	-	\$8,050.00	\$8,050.00
11/15	35 Old McHenry Rd	-	\$4,350.00	\$4,350.00

Village of Hawthorn Woods

Program Details (Cont.)

11/16	35 Old McHenry Rd	-	\$4,250.00	\$4,250.00
11/17	35 Old McHenry Rd	-	\$4,909.00	\$4,909.00
15/1	Acacia Drive	-	\$42,500.00	\$42,500.00
16/1	28 Bruce Circle North	-	\$7,500.00	\$7,500.00
Total			\$13,981,337	\$932,250
				\$14,913,588

Client's Signature _____

Inland Marine Statement of Values:

Vehicle #	Year	Make	Model	VIN (last 4 digits)	Cost New	PW update
Public Works	2005	Case	521D		\$150,000	
Public Works	1992	Case	580 super K		\$110,000	
Public Works	1991	Generator 3500W	Honda		\$2,334	
Public Works	1996	Dirt Conveyor	Hydraulic		\$10,106	
Public Works		Confined Space Blower	Honda		\$2,600	
Public Works		Trash Pump 3"	Pacer		\$1,477	
Public Works		Amplifier	Dukane		\$1,300	
Public Works		Electric Welder	Millermatic		\$2,925	
Public Works		Tripod/Hoist/Harness	DBI/SALA		\$4,078	
Public Works	2008	Roller	Wacker RD12A		\$16,000	
Public Works		Generator - 10K w/trailer	Hercules		\$18,247	
Public Works		Floor Jack #1	Suntex		\$300	
Public Works		Floor Jack	US general		\$150	
Public Works		Floor Jack #2	Suntex		\$300	
Public Works		Bucket (580) w/teeth	Wainray		\$1,950	
Public Works		Cac1 System	Unknown		\$4,137	
Public	2010	Top Dresser	Toro 2500		\$12,000	

Village of Hawthorn Woods

Program Details (Cont.)

Works						
Public Works	2010	Large Mower	Toro 4000D		\$60,000	
Public Works	2010	Small Mower	Toto 3280		\$30,000	
Public Works	2010	Large Utility	Toro Workman 3200		\$27,000	
Public Works	2010	Small Utility	Toro Workman MD		\$15,000	
Public Works	2000	Textron Mower	Bunton		\$10,638	
Public Works	2014	Exmark Mower	Lazer Z		\$7,500	
Public Works	1988	Tractor	Ford 7108		\$65,000	
Public Works		Plate Compactor	Wacker		\$3,293	
Public Works	2004	Wood Chipper	Vermeer BC1800XL		\$85,000	
Public Works		Concrete Saw	Stihl		\$1,477	
Public Works		Shoring Equipment	Speed Shore		\$14,775	TS460 & TS420
Public Works		Black Trailer	Big Lug		\$4,299	
Public Works		Green Trailer	N/A		\$4,000	
Public Works		Blue Trailer	N/A		\$4,000	
Public Works		Red Trailer	N/A		\$4,000	
Public Works	2014	Air Raider	Ryan 544317A		\$3,000	
Public Works		Chain Saw #51	Stihl #MS193T		\$300	
Public Works		Chain Saw #52	Stihl #MS191T		\$300	
Public Works		Chain Saw #53	Stihl # MS290		\$300	
Public Works		Chain Saw #54	Stihl # MS170		\$350	
Public Works		Chain Saw #56	Stihl # 290		\$350	
Public Works		Chain Saw #57	Stihl # 391		\$390	
Public Works	2006	Light Tower	Terex AL4000		\$25,000	
Public Works	2010	Walk Behind Mower	Kawasaki FS481V		\$4,000	

Village of Hawthorn Woods

Program Details (Cont.)

Public Works		Post Pounder	Greelee/Textron		\$3,622	
Public Works	2014	Power Washer	MiTM		\$2,670	
Public Works	2003	Portable Air Compressor	Irgersoil Rand 185		\$17,000	
Public Works		Plow	Bonnell		\$15,000	
Public Works		Plow	Bonnell		\$15,000	
Public Works		Plow	Bonnell		\$15,000	
Public Works		Plow	Western		\$5,000	
Public Works		Plow	Western		\$5,000	
Public Works		Plow	Boss		\$15,000	
Public Works		Plow	Monroe large		\$12,000	
Public Works		Plow #22	Wausau 12 foot		\$11,785	
Public Works		Plow #16	Wausau 10 foot		\$9,560	
Public Works		Plow #5	Henderson 12 foot		\$11,785	PW added 01Oct
Public Works		Salter/Spreader	Swenson #22		\$2,855	
Public Works		Salter/Spreader	Swenson #16		\$2,855	
Public Works		Salter/Spreader #811	Monroe		\$7,000	
Public Works		Salter/Spreader #821	Monroe		\$7,000	
Public Works		Salter/Spreader #18	Monroe		\$7,000	
Public Works		Salter/Spreader #812	Monroe		\$7,000	
Public Works		Salter/Spreader #814	Monroe		\$7,000	
Public Works		Salter/Spreader #5	Henderson		\$7,000	PW added 01Oct
Public Works	2012	Bob-Cat	Skid-Steer	1129	\$65,000	
Village Hall		Back up Generator	Generac		\$38,640	
Public Works		Trash Pump, 4"			\$1,596	

Village of Hawthorn Woods

Program Details (Cont.)

Public Works		Trash Pump, 4"			\$1,596	
Public Works		Trash Pump, 2"			\$323	
Public Works		Trash Pumps, 2"			\$323	
Public Works	2016	2 Axle Trailer	Big Lug		\$5,405	
Public Works	2016	Street Saw	Multiquip		\$3,956	
Public Works	2015	Vbox Spreader	Tornado LT		\$5,250	
Public Works	2015	Walk Behind Blower	Honda		\$1,353	
Public Works		Big Tex Trailer	Big Tex		\$5,500	
Public Works		Stihl MS 661C Saw #50	Stihl		\$870	
	2010	Kawasaki Utility Cart/ Mule	KAF620MAF Mule 4010	AKAXS.66172CP	\$4,500	
	2001	ROVVER 600 Pipe Inspection	Camera cable & Components	260477	\$20,000	
		Honda Generator	3x240 (5000 Watt)		\$2,334	
	2004	Wells Cargo	Trailer GVWR 2990 lb	1WC200D1641105439	\$4,500	
Public Works		Ranger Tire Machine	R76ATR	00491	\$7,000	Tire machine & tire balancer total = \$7000
Public Works		Ranger Tire Balancer	DST64T	01120	\$7,000	Tire machine & tire balancer total = \$7000
Public Works		Ingersoll Rand Air Compressor	2340	10i171348	\$1,500	
Public Works		Everlast Power Plasma 80S	Plasma Cutter		\$1,100	
Public Works		Milwaukee Cut Off Saw	14"		\$1,600	
Public Works		Stihl Concrete Saw	TS46Q		\$0	
Public Works		Stihl Cut Off Saw	TS420		\$0	
Public Works		Stihl Trimmer w/Attachments	KS-130		\$292.46	

Village of Hawthorn Woods

Program Details (Cont.)

Public Works		Stihl Trimmer - Attachment *	FS-KM		\$82.45	
Public Works		Stihl Trimmer - Attachment *	BF-KM		\$174.12	
Public Works		Stihl Trimmer - Attachment *	HL-KM		\$229.12	
Public Works		Stihl Hand Blower - x2	BG086 /		\$374.92	Total
Public Works		Stihl Hedge Trimmer	HS81R		\$404.96	
Public Works		Stihl Back Pack Blower - x2	SR420 /		\$599.92	Total
Public Works		Honda String Trimmer	HHT25S /		\$260.00	
Public Works		Honda String Trimmer	HHT25S /		\$260.00	
Public Works		Honda String Trimmer	HHT25S /		\$260.00	
Public Works		Kawasaki Brush Cutter	TH926D-AN24		\$329.96	
Public Works		Echo Pole Saw	PPT265H		\$453.39	
Aquatic Center		Pro Power Pressure Washer	4PPX30GS1		\$3,000.00	
TOTAL					\$1,080,075	

Emergency Equipment-Police:

Vehicle #	Year	Make	Model	VIN (last 4 digits)	Cost New
Police		Radars Dual Antenna (2)	Stalker		\$7,000
Police		Radars Handheld (4)	Stalker		\$12,000
Police	2006	Radars Speed Trailer	Decatur		\$7,500
Police		Radio- Portable (6)	Motorola		\$4,800
Police		Radio- Portable (16)	Kenwood		\$16,500
Police		Squad Digital Video (3)	Coban TLCH		\$24,000
Police		Light Bars (7)	Code 3		\$10,500
Police		Squad Radios (16)	Motorola		\$12,800
Police		Back up Generator	Generac		\$38,640
Police		Squad Digital Video (5)	Watchguard HD		\$24,000
Police		APX6000 Model #H98UCF9PW6AN	Filemko	755CRT1477	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Escamilla	755CRT1478	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Rossini	755CRT1479	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Rathje	755CRT1480	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Cortez	755CRT1481	\$4,000

Village of Hawthorn Woods

Program Details (Cont.)

Police		APX6000 Model #H98UCF9PW6AN	Paulus	755CRT1482	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Miller	755CRT1483	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Behan	755CRT1484	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Gary	755CRT1485	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Canada	755CRT1486	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Viramontes	755CRZ1105	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Armijo	755CRZ1106	\$4,000
Police		APX6000 Model #H98UCF9PW6AN	Tennant	755CRZ1107	\$4,000
TOTAL POLICE:					\$209,740

Village of Hawthorn Woods

Program Details

Coverage: Package - General Liability
Carrier: Underwriters at Lloyd's London
Policy Period: 12/31/2018 to 12/31/2019

Form Type:

COVERAGE	FORM TYPE	RETROACTIVE DATE	PENDING & PRIOR DATE
General Liability	Occurrence	Not Applicable	Not Applicable

Defense Limitations:

DEFENSE COST DOLLAR LIMIT	DEFENSE COST TYPE / COMMENTS
Applies	Other / Defense costs are in addition to the Limit of Liability

Coverage:

DESCRIPTION	AMOUNT	BASIS
Bodily Injury and Property Damage	\$1,000,000	
Personal and Advertising Injury	\$1,000,000	
Employee Benefits Injury	\$1,000,000	
Specific Perils - Damage to Premises Rented to You	\$1,000,000	
Medical Payments	\$5,000	
General Aggregate	\$3,000,000	
Products-Completed Operations Aggregate	\$3,000,000	
Sexual Molestation	\$250,000	Per Occurrence
Sexual Molestation	\$500,000	Annual Aggregate

Additional Coverage:

DESCRIPTION	AMOUNT
Owned watercraft	Up to 50 Feet in Length
Expanded Host Liquor Liability	Included

Endorsements include, but are not limited to:

DESCRIPTION
MUNI-BISI-PF-002 (12-11)

Village of Hawthorn Woods

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Absolute Asbestos Exclusion
Absolute Lead Exclusion
War and Nuclear Hazard
Fireworks are excluded
Wrongful termination of an employee
Coercion, demotion, reassignment, discipline or harassment of an employee
Discrimination against an employee

Binding Requirements:

DESCRIPTION
Subject to receipt of a currently signed, original application prior to inception date.
Subject to Loss Control Questionnaire. Please Forward This Information at Least 30 Days Prior to the Event.
Subject to Signed Acceptance or Rejection of TRIA
Subject to forward a copy of the contract with the pyrotechnic at least 30 days prior to the event, if Fireworks coverage is desired

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
TRIA Premium - \$187
Deductible applies to Loss Only

Premium	INCLUDED
ESTIMATED PROGRAM COST	INCLUDED
TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable)	INCLUDED

Subject to Audit: Not Auditable

Village of Hawthorn Woods

Program Details

Coverage: Package - Law Enforcement Liability

Carrier: Underwriters at Lloyd's London

Policy Period: 12/31/2018 to 12/31/2019

Form Number:

Form Type:

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

Defense Limitations:

DEFENSE COST DOLLAR LIMIT	DEFENSE COST TYPE / COMMENTS
Applies	Other / Defense costs are in addition to the Limit of Liability

Coverage:

DESCRIPTION	AMOUNT	BASIS
Each Person	\$1,000,000	
Each Wrongful Act	\$1,000,000	
Annual Aggregate	\$2,000,000	
Non-Monetary Defense	\$10,000	Per Claim
Non-Monetary Defense	\$50,000	Per Policy Period

Deductibles / Self Insured Retention

TYPE	COVERAGE	AMOUNT
Deductible	Each Person	\$5,000

Endorsements include, but are not limited to:

DESCRIPTION
MUNI-BISI-PF-002 (12-11)

Exclusions include, but are not limited to:

DESCRIPTION
War
Nuclear
Pollution

Village of Hawthorn Woods

Program Details (Cont.)

Binding Requirements:

DESCRIPTION
Subject to receipt of a currently signed, original application prior to inception date.
Subject to Loss Control Questionnaire. Please Forward This Information at Least 30 Days Prior to the Event.
Signed Client Authorization to Bind

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Law Enforcement Dept./Agency: Village Of Hawthorn Woods, IL - Police Department

Premium	INCLUDED
ESTIMATED PROGRAM COST	INCLUDED
TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable)	INCLUDED

Subject to Audit: Not Auditable

Village of Hawthorn Woods

Program Details

Coverage: Package - Public Officials Liability
Carrier: Underwriters at Lloyd's London
Policy Period: 12/31/2018 to 12/31/2019

Form Number:

Form Type:

COVERAGE	FORM TYPE	RETROACTIVE DATE	PENDING & PRIOR DATE
Public Officials Liability	Claims Made	Not Applicable	Not Applicable

Defense Limitations:

DEFENSE COST DOLLAR LIMIT	DEFENSE COST TYPE / COMMENTS
Applies	Other / Defense costs are in addition to the Limit of Liability

Coverage:

DESCRIPTION	AMOUNT	BASIS
Each Wrongful Act	\$1,000,000	
Annual Aggregate	\$2,000,000	
Key Individual Replacement Expenses	\$25,000	Per Claim
Terrorist Travel Reimbursement	\$5,000	Per Policy Period
Identity Theft Protection	\$5,000	Per Claim

Deductibles / Self Insured Retention

COVERAGE	AMOUNT
Each Wrongful Act	\$5,000
Annual Aggregate	Included
Key Individual Replacement Expenses	Included
Terrorist Travel Reimbursement	Included

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.

Village of Hawthorn Woods

Program Details (Cont.)

Definition of Claim:

DESCRIPTION
Refer to attached policy form

Incident or Claim Reporting Provision:

DESCRIPTION
Refer to attached policy form

Extended Reporting Period (ERP) Options*:

DESCRIPTION
Refer to attached policy form

*If ERP coverage is desired, then that request must be in writing to the carrier.

Run Off Provisions:

DESCRIPTION
Refer to attached policy form

Endorsements include, but are not limited to:

DESCRIPTION
MUNI-BISI-PF-002 (12-11)

Exclusions include, but are not limited to:

DESCRIPTION
War
Nuclear
Pollution

Binding Requirements:

DESCRIPTION
Subject to receipt of a currently signed, original application prior to inception date.
Subject to Loss Control Questionnaire. Please Forward This Information at Least 30 Days Prior to the Event.
Signed Client Authorization to Bind

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Retro Active Date: None

Village of Hawthorn Woods

Program Details (Cont.)

Premium	INCLUDED
ESTIMATED PROGRAM COST	INCLUDED
TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable)	INCLUDED
Subject to Audit: Not Auditable	

Village of Hawthorn Woods

Program Details

Coverage: Package - Employment Practices Liability

Carrier: Underwriters at Lloyd's London

Policy Period: 12/31/2018 to 12/31/2019

Form Number:

Form Type:

COVERAGE	FORM TYPE	RETROACTIVE DATE	PENDING & PRIOR DATE
Employment Practices Liability	Claims Made	Not Applicable	Not Applicable

Defense Limitations:

DEFENSE COST DOLLAR LIMIT	DEFENSE COST TYPE / COMMENTS
Applies	Other / Defense costs are in addition to the Limit of Liability

Coverage:

DESCRIPTION	AMOUNT	BASIS
Each Wrongful Act	\$1,000,000	
Annual Aggregate	\$2,000,000	
Non-Monetary Defense	\$10,000	Per Claim
Non-Monetary Defense	\$50,000	Per Policy Period
Workplace Violence Counseling	\$5,000	Per Policy Period
Back-Wages (No Prior Acts Applies)	\$10,000	Per Claim

Deductibles / Self Insured Retention

COVERAGE	AMOUNT
Each Wrongful Act	\$5,000
Annual Aggregate	Included
Non-Monetary Defense - Per Claim	Included
Non-Monetary Defense - Per Policy Period	Included
Back-Wages (No Prior Acts Applies)	\$5,000

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

Village of Hawthorn Woods

Program Details (Cont.)

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

Extended Reporting Period (ERP) Options*:

DESCRIPTION
Refer to attached policy form

*If ERP coverage is desired, then that request must be in writing to the carrier.

Run Off Provisions:

DESCRIPTION
Refer to attached policy form

Endorsements include, but are not limited to:

DESCRIPTION
MUNI-BISI-PF-002 (12-11)

Exclusions include, but are not limited to:

DESCRIPTION
War
Nuclear
Pollution

Binding Requirements:

DESCRIPTION
Subject to receipt of a currently signed, original application prior to inception date.
Subject to Loss Control Questionnaire. Please Forward This Information at Least 30 Days Prior to the Event.
Signed Client Authorization to bind

Village of Hawthorn Woods

Program Details (Cont.)

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Retro Active Date: None

Premium

INCLUDED

ESTIMATED PROGRAM COST

INCLUDED

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

INCLUDED

Subject to Audit: Not Auditable

Village of Hawthorn Woods

Program Details

Coverage: Automobile
Carrier: Underwriters at Lloyd's, London
Policy Period: 12/31/2018 to 12/31/2019

Coverage:

DESCRIPTION	AMOUNT
Liability Combined Single Limit	\$1,000,000
Medical Expense (included in Fleet Coverage Endorsement)	\$10,000
Uninsured Motorist	\$350,000
Underinsured Motorist	\$350,000
Excess Hired	Included
Non-owned Liability	Included
Physical Damage	-
- Comprehensive	ACV, cost to repair or replace, or stated amount, whichever is less
- Collision	ACV, cost to repair or replace, or stated amount, whichever is less
Hired Car Physical Damage	Included in Fleetcover

Deductibles / Self Insured Retention

COVERAGE	AMOUNT
Physical Damage	
- Comprehensive	\$500
- Collision	\$500

Endorsements include, but are not limited to:

DESCRIPTION
Coverage Forms For Underwriters for Lloyd's of London - MUNI-BISI-PF-002 (12-11)
Fleet Coverage Endorsement
Ineligible Characteristics – Endorsement and Billing

Exclusions include, but are not limited to:

DESCRIPTION
Excluded Drivers
Expected or Intended Injury
Contractual - added back as noted

Village of Hawthorn Woods

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Workers' Compensation
Employers' Liability
Property Damage to Property Owned or Transported by you
Pollution
Other standard policy exclusions apply
Terrorism

Binding Requirements:

DESCRIPTION
Subject to:
- Currently Signed, Original Application prior to inception date
- The signed Uninsured/Underinsured Motorist selection/rejection form prior to inception date.
- Insured Perform Mvr Reviews Annually on all Drivers and Prior to Hiring New Drivers

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Automobile Liability: Occurrence Form
Emergency Response Provider Extension Endorsement includes extended debris removal and pollution clean up, expected or intended injury exception for damage resulting from protecting persons or property, fellow employee coverage, non-owned vehicle deductible reimbursement, additionally acquired emergency units and equipment, recertification expense, hired and substitute emergency unit physical damage, rental reimbursement and extended towing

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	\$16,562
ESTIMATED PROGRAM COST	\$16,562
Subject to Audit: Not Auditable	

Village of Hawthorn Woods

Program Details (Cont.)

Vehicles:

VEH#	YEAR	MAKE / MODEL	VIN	COST NEW	RATING CLASS	DEDUCTIBLE OTC	DEDUCTIBLE COLL
1	2006	Ford / Explorer Admin	4243	\$35,000	7911	\$500	\$500
2	2008	Ford / Crown Victoria PW	8981	\$35,000	7911	\$500	\$500
3	1999	International / Dump Truck 2T #812	2265	\$76,175	1479	\$500	\$500
4	2001	International / Truck 5T #814	7344	\$150,000	1499	\$500	\$500
5	2006	Ford / Pickup Truck #819	2267	\$45,000	7398	\$500	\$500
6	2008	International / Truck 2T #821	7765	\$140,000	1499	\$500	\$500
7	2008	Ford / Truck - F550 1T #811	2913	\$90,000	7398	\$500	\$500
8	2010	Ford / Pickup Truck #804	266	\$35,000	7398	\$500	\$500
9	2002	Ford / Econoline E350 Van	9614	\$30,000	1499	\$500	\$500
10	2010	Ford / Expedition PW	1439	\$35,000	7911	\$500	\$500
11	1987	Ford-Military / Hummer #357	34627		7911		
12	2004	Chevy / Blazer Public Works	4918	\$35,000	7911	\$500	\$500
13	2012	International / Dump Truck 2T #18	3829	\$140,000	1499	\$500	\$500
14	2012	Ford / Pickup Truck #10	9256	\$35,000	7398	\$500	\$500
15	2013	Dodge / Durango #306	1715	\$35,000	7911	\$500	\$500
16	2014	Dodge / Charger #301	1891	\$35,000	7911	\$500	\$500
17	2015	Ford / Explorer #300	6324	\$35,000	7911	\$500	\$500
18	2014	International / Dump Truck 2T #22	6961	\$141,444	31499	\$500	\$500
19	1995	Ford / Econoline E350 Van	8548	\$5,000	7398	\$500	\$500
20	2016	Dodge / Charger #303	6839	\$35,000	7911	\$500	\$500
21	2016	International / Terrastar 1.5T #16	5700	\$108,332	31499	\$500	\$500
22	2017	Dodge / Charger #304	2C3CDXKT7HH585558	\$35,000	7911	\$500	\$500
23	2017	Dodge / Charger #302	2C3CDXKT8HH576688	\$35,000	7911	\$500	\$500
24	2005	Ford / Excursion	1FMNUJ41S75ED39880	\$39,625	7398	\$500	\$500

Village of Hawthorn Woods

Program Details (Cont.) (Cont.)

Vehicles:

VEH#	YEAR	MAKE / MODEL	VIN	COST NEW	RATING CLASS		DEDUCTIBLE	
					OTC	COLL	OTC	COLL
25	2018	International / 7400 Dump Truck	3HAWDSTR5JL330365		31499		\$500	\$500
26	2018	Ford / Utility Interceptor	1FM5KBAR1JGB12015	\$35,000	7911		\$500	\$500
27	1999	Ford / Explorer	1FMDU35P2XZB09493	\$6,000	7398		\$500	\$500
28	1997	International / Vactor / Rodder Truck	1HTSDAAR8VM446957	\$19,995	1499		\$500	\$500
29	2018	Ford / Utility Interceptor #306	1FM5K8AR2JGC74476	\$35,000	7911			

Village of Hawthorn Woods

Program Details

Coverage: Umbrella
Carrier: Underwriters at Lloyd's London
Policy Period: 12/31/2018 to 12/31/2019

Form Type:

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

Defense Limitations:

DEFENSE COST DOLLAR LIMIT	DEFENSE COST TYPE / COMMENTS
Applies	In addition to Policy Limit, and if so: Limited

Coverage:

DESCRIPTION	LIMIT TYPE	AMOUNT
Each Occurrence Limit	Limit	\$9,000,000
Annual Aggregate	Limit	\$9,000,000

Deductibles / Self Insured Retention

TYPE	COVERAGE	AMOUNT
Deductible	Retained Limit*	\$10,000

Underlying Policies:

COVERAGE	LIMIT	CARRIER	EFFECTIVE DATE	EXPIRATION DATE
General Liability	\$1,000,000	Underwriters at Lloyd's London	12/31/2018	12/31/2019
Public Officials Liability	\$1,000,000	Underwriters at Lloyd's London	12/31/2018	12/31/2019
Law Enforcement Liability	\$1,000,000	Underwriters at Lloyd's London	12/31/2018	12/31/2019
Employment Practices Liability	\$1,000,000	Underwriters at Lloyd's London	12/31/2018	12/31/2019
Auto Liability	\$1,000,000	Underwriters at Lloyd's London	12/31/2018	12/31/2019

Endorsements include, but are not limited to:

DESCRIPTION
MUNI-BISI-PF-002 (12-11)

Arthur J. Gallagher Risk Management Services, Inc.

Village of Hawthorn Woods

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Workers' Compensation, Auto No Fault, Uninsured/ Underinsured Motorists, Disability, and Unemployment Compensation Laws
Pollution (Hostile Fire Exception)
Asbestos

Binding Requirements:

DESCRIPTION
Subject to Signed Acceptance or Rejection of TRIA
Subject to Receipt of a Currently Signed, Original Application
Subject to Loss Control Questionnaire. Please Forward This Information at Least 30 Days Prior to the Event.
Signed Client Authorization to Bind

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
TRIA Premium - \$255
*Retained Limit applies to Coverage B only
Under the General Liability, Occurrence Coverage Part there is a \$250,000 sublimit for Sexual Molestation. The Umbrella policy excess limits are not triggered by the exhaustion of the underlying sublimit for sexual molestation, except when specifically approved by your underwriter and a minimum underlying limit of \$1,000,000 is purchased. In order to clarify the intent specific to the sub-limit within the underlying General Liability policy, a Sexual Molestation exclusion will be attached to the Umbrella policy at renewal.

Premium	\$10,174
ESTIMATED PROGRAM COST	\$10,174
TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable)	\$255

Subject to Audit: Not Auditable

Village of Hawthorn Woods

Program Details

Coverage: Cyber Liability
Carrier: BCS Insurance Company
Policy Period: 12/31/2017 to 12/31/2018

Form Number: Cyber and Privacy Liability Insurance Policy 94.200 (06/17) CYBER AND PRIVACY LIABILITY

Form Type:

COVERAGE	FORM TYPE	RETROACTIVE DATE	PENDING & PRIOR DATE
Cyber Liability	Claims Made	Not Applicable	Not Applicable

Coverage:

DESCRIPTION	AMOUNT
Policy Aggregate Limit of Liability	\$1,000,000
LIABILITY COVERAGES:	
Privacy Liability (Including Employee Privacy)	\$1,000,000
Privacy Regulatory Claims Coverage - (Where insurable by law)	\$1,000,000
Security Liability	\$1,000,000
Multimedia Liability	\$1,000,000
PCI DSS Assessment	\$1,000,000
SECURITY BREACH RESPONSE COVERAGE INCLUDES THE	
Legal Advisory	\$1,000,000
Forensics Investigations	
Public Relations	
Notification Services	
Credit Monitoring	
FIRST PARTY COVERAGES	
Cyber Extortion	\$1,000,000
Business Income and Digital Asset Restoration	\$1,000,000
Business Income and Digital Asset Restoration As a result of dependent / contingent system failure.	\$250,000
ELECTRONIC FRAUD	
Telephone Hacking	\$100,000
Funds Transfer Fraud	\$100,000

Village of Hawthorn Woods

Program Details (Cont.)

Deductibles / Self Insured Retention

COVERAGE	AMOUNT
Policy Aggregate Limit of Liability - Per Occurrence	\$2,500
LIABILITY COVERAGES:	
Privacy Liability (Including Employee Privacy)	\$2,500
Privacy Regulatory Claims Coverage - (Where insurable by law)	\$2,500
Security Liability	\$2,500
Multimedia Liability	\$2,500
PCI DSS Assessment	\$2,500
SECURITY BREACH RESPONSE COVERAGE INCLUDES THE	
Legal Advisory	\$2,500
Forensics Investigations	
Public Relations	
Notification Services	
Credit Monitoring	
FIRST PARTY COVERAGES	
Cyber Extortion	\$2,500
Business Income and Digital Asset Restoration	\$2,500 Each Claim 12 hour waiting period
ELECTRONIC FRAUD	
Telephone Hacking	\$2,500
Funds Transfer Fraud	\$2,500
Cyber Deception (If elected)	\$25,000

Definition of Claim:

DESCRIPTION
<p>Claim means:</p> <ol style="list-style-type: none"> 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. Solely with respect to Coverage B., a "Regulatory Claim" made against "You"; 4. Solely with respect to Coverage H., a "PCI DSS Assessment". <p>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.</p>

Village of Hawthorn Woods

Program Details (Cont.)

Incident or Claim Reporting Provision:

DESCRIPTION
<p>Direct Reporting: Immediately report all claims for the following lines of coverage to the breach consultant AND the insurance carrier 2 Steps:</p> <p>#1 -Call Baker & Hostetler at the 24 hour Security Breach Hotline 1-866-288-1705 Baker & Hostetler LLP 45 Rockefeller Plaza New York, NY 10111-0100</p> <p>#2 -File your claim with the insurance carrier: rps cyberclaims@clydeco.us Clyde & Co. US LLP 101 Second Street, 24th Floor San Francisco CA 94105</p>

Extended Reporting Period (ERP) Options*:

DESCRIPTION	PREMIUM AMOUNT	LENGTH
Optional ERP	100%	One Year (12 months)

*If ERP coverage is desired, then that request must be in writing to the carrier.

Endorsements include, but are not limited to:

DESCRIPTION
94.200 (06/17) CYBER AND PRIVACY LIABILITY POLICY FORM
94.510 (09/15) Cyber Deception Endorsement (If elected)
94.102 (01 15) Nuclear Incident Exclusion
94.103 (01 15) Radioactive Contamination Exclusion
94.805 (06/17) Breach Response Team Endorsement
94.801 (06/17) ILLINOIS Amendatory
94.551 (01 15) Coverage for Certified Acts of Terrorism (Included only if Terrorism coverage is elected at 1% additional premium)
94.552 IL (04 15) War and Terrorism Endorsement
BCSI-X010 IL (01 15) IL Notice

Exclusions include, but are not limited to:

DESCRIPTION
Prior and Pending "Claims" and Circumstances
"Bodily Injury" or "Property Damage"
Intentional acts of any current principal, partner, director or officer of "Your" Organization
Employment Practices with the exception of any "Claim" alleging a "Privacy Wrongful Act" or "Security Wrongful Act" in connection with an "Employee's" or prospective employee's employment

Village of Hawthorn Woods

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Insured vs Insured with exception of Privacy Liability coverage for "Claims" made by a current or former employee of "Your" Organization
Satellite failure/malfunction, electrical, mechanical infrastructure failure with carveout
Failure of telephone lines, data transmission lines or wireless communications connection
ERISA violations
Terrorism – except carve-back for acts perpetrated electronically
Pollution
Seizure, confiscation, destruction, damage or loss of use of digital assets by order of any governmental authority
Electrical Failure or Electromagnetic Discharge
Ordinary wear and tear gradual deterioration or failure to maintain digital assets or "Computer Systems" on which digital assets are processed or stored, whether owned by you or others

Binding Requirements:

DESCRIPTION
Signed Client Authorization to bind
Currently Signed and Dated Application

Premium **\$2,603**

ESTIMATED PROGRAM COST **\$2,603**

TRIA/TRIPRA PREMIUM **\$31**
 (+ Additional Surcharges, Taxes and Fees as applicable)

Optional Coverages:

OPTION	COVERAGE	NEW	AMOUNT	DEDUCTIBLE / SELF INSURED RETENTION	OTHER	PREMIUM	TAX
1	Cyber Deception	Yes	\$100,000	25000		\$450.00	

Subject to Audit: Not Auditable

Village of Hawthorn Woods

Program Details

Coverage: Accidental Death and Dismemberment

Carrier: Starr Indemnity & Liability Company

Policy Period: 12/31/2018 to 12/31/2019

Form Type:

COVERAGE	FORM TYPE	RETROACTIVE DATE	PENDING & PRIOR DATE
Accidental Death and Dismemberment	Occurrence	Not Applicable	Not Applicable

Coverage:

DESCRIPTION	AMOUNT
Aggregate	\$250,000
Accidental Death and Dismemberment Benefit: Covered Person Principal Sum/Amount of Insurance	\$100,000
- Loss Period	365 days from the date of the Covered Accident
Accidental Medical and Dental Expense Benefit : Total Benefit Maximum for all Accident Medical and Dental	\$100,000
- Loss Period (first Covered Expenses must be incurred within):	90 Days After the Covered Accident
- Benefit Period	1 Year from the Date of the Covered Accident

Deductibles / Self Insured Retention

COVERAGE	AMOUNT
Accident Total Disability Benefit	\$1,000
Disability Benefit : Waiting Period	7 days

Additional Coverage:

DESCRIPTION	LIMIT TYPE	AMOUNT
Disability Benefit :		
- Maximum Benefit Period		26 weeks
- Amount of Benefit	Limit	\$300

Endorsements include, but are not limited to:

DESCRIPTION
Blanket Accident Insurance Policy - AH-20001
Illinois Rider - AH-20005
Administrative Change Rider - AH-20007

Village of Hawthorn Woods

Program Details (Cont.)

Endorsements include, but are not limited to:

DESCRIPTION
Schedule of Benefits - AH-20008

Exclusions include, but are not limited to:

DESCRIPTION
War
Nuclear
Pollution

Binding Requirements:

DESCRIPTION
Signed Client Authorization to Bind

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Coinsurance: 100% of Usual and Customary Charges
Premium Payment is Due Within Twenty (20) Days from Effective Date
Accident Medical Expense Benefits are only payable: 1) for Usual and Customary Charges incurred after the Deductible has been met; 2) for those Medically Necessary Covered Expenses incurred by or on behalf of the Covered Person; 3) for Covered Expenses incurred within 365 days after the date of the Covered Accident
We will not pay more than the Benefit Maximum for all losses per Accidental Death & Dismemberment Covered Accident. If, in the absence of this provision, We would pay more than Benefit Maximum for all losses from one Accidental Death & Dismemberment Covered Accident, then the benefits payable to each person with a valid claim will be reduced proportionately, so the total amount We will pay is the Benefit Maximum.
CLASS OF ELIGIBLE PERSONS: All registered CERT Team Trainees of the Policyholder
HAZARDS INSURED AGAINST: Supervised and Sponsored Activities
COVERED ACTIVITIES: While participating in supervised and sponsored CERT training program

Premium	\$1,250
ESTIMATED PROGRAM COST	\$1,250

Subject to Audit: Not Auditable

Village of Hawthorn Woods

Program Details

Coverage: Workers Compensation
Carrier: Illinois Public Risk Fund
Policy Period: 1/1/2019 to 1/1/2020

Coverage:

DESCRIPTION	AMOUNT	BASIS
Coverage A - Workers' Compensation	Statutory	
Employers' Liability Limits: Bodily Injury by Accident	\$3,000,000	Each Accident
Employers' Liability Limits: Bodily Injury by Disease	\$3,000,000	Per Employee
Employers' Liability Limits: Bodily Injury by Disease	\$3,000,000	Policy Limit

Deductibles / Self Insured Retention

TYPE	COVERAGE	AMOUNT
Deductible	Workers Compensation	None

Additional Coverage:

DESCRIPTION	AMOUNT
Foreign Voluntary Limit of Liability	\$100,000 and applies in excess of the Self Insured Retention per Occurrence

States:

DESCRIPTION	STATE
States Covered:	IL

Endorsements include, but are not limited to:

DESCRIPTION
Broad Form All States for Employee Travel - IPRF WC 00 001 18
Federal Employers' Liability Act Coverage - IPRF WC 00 002 18
Foreign Voluntary Workers' Compensation and Employers' Liability For Traveling Employees - IPRF WC 00 003 18
Longshoremen's and Harbor Workers' Compensation Act Coverage - IPRF WC 00 004 18
Maritime Coverage - IPRF WC 00 005 18
Voluntary Compensation - IPRF WC 00 006 18

Exclusions include, but are not limited to:

DESCRIPTION
Voluntary Compensation
Longshore & Harbor Workers' Act

Village of Hawthorn Woods

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Owners 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
As per Safety National Casualty Corp. Excess policy, and Illinois Public Risk Fund's By-Laws and Pooling Agreement.
CANCELLATION: In the event that the Policy is Cancelled prior to the expiration date, then the total annual premium stated will be 100% fully earned.
Signed Client Authorization to Bind

Premium	\$69,960
Fees	
Administrative Fee	\$2,099
Total Fees	\$2,099
ESTIMATED PROGRAM COST	\$72,059
TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable)	INCLUDED
Subject to Audit: At Expiration	
IPRF Safety GRANT 2018:	\$6,905

Auditable Exposures:

STATE	CLASS CODE	DESCRIPTION	EXPOSURE	RATE PER \$100
IL	5506	Street Maintenance	\$481,723 - Payroll	6.126
IL	7720	Policeman	\$1,186,250 - Payroll	1.554
IL	8380	Auto Repair	\$72,128 - Payroll	2.746
IL	8810	Clerical	\$853,689 - Payroll	0.095
IL	8868	School Professional	\$10,900 - Payroll	0.225
IL	9102	Parks NOC	\$378,949 - Payroll	2.453
IL	9410	Municipal Employees	\$320,058 - Payroll	3.094

Village of Hawthorn Woods

Program Details

Coverage: Crime
Carrier: Hanover Insurance Company
Policy Period: 12/31/2018 to 12/31/2019

Form Type:

COVERAGE	FORM TYPE	RETROACTIVE DATE	PENDING & PRIOR DATE
Crime	Discovery	Not Applicable	Not Applicable

Coverage:

DESCRIPTION	AMOUNT
Employee Dishonesty	\$500,000
Forgery or Alteration	\$100,000
Inside Premises - Theft of Money and Securities	\$100,000
Inside Premises - Robbery or Safe Burglary of Other Property	\$100,000
Outside Premises	\$100,000
Computer Fraud	\$100,000
Funds Transfer Fraud	\$100,000
Money Order & Counterfeit Paper Currency	\$10,000

Deductibles / Self Insured Retention

COVERAGE	AMOUNT
Employee Dishonesty	\$2,500
Forgery or Alteration	\$1,000
Inside Premises - Theft of Money and Securities	\$1,000
Inside Premises - Robbery or Safe Burglary of Other Property	\$1,000
Outside Premises	\$1,000
Computer Fraud	\$1,000
Funds Transfer Fraud	\$5,000
Money Order & Counterfeit Paper Currency	\$250

Additional Coverage:

DESCRIPTION	AMOUNT
Add Faithful Performance of Duty Coverage for Government Employees	\$500,000
Funds Transfer - False Pretenses Coverage	\$25,000

Village of Hawthorn Woods

Program Details (Cont.)

Endorsements include, but are not limited to:

DESCRIPTION
Government Crime Policy (Discovery Form) -CR 00 26 05 06
Include Specified Non-compensated Officers as Employees -CR 25 08 08 07 Fill in: All board members and Trustees.
Add Faithful Performance of Duty Coverage for Government Employees -CR 25 19 05 06
Delete Employee Exclusions (Endorsement 54) -181-1515 03/17
Amend Computer Fraud Insuring Agreement -181-1661 03/16
Funds Transfer - False Pretenses Coverage- 181-1663 03/16
State Endorsement(Illinois Changes) - CR 02 02 10 10

Exclusions include, but are not limited to:

DESCRIPTION
Third Party Employee Dishonesty
Government Action Exclusion
Accounting or Arithmetic Errors
Voluntary Parting of Property
Loss in which the existence of such loss is only proved by a profit and loss comparison or inventory records
Any theft or criminal act committed by a partner of the insured
Employee Dishonesty (does not apply to Employee Theft Coverage)

Binding Requirements:

DESCRIPTION
Signed Client authorization to bind.

Premium **\$1,497**

ESTIMATED PROGRAM COST **\$1,497**

Village of Hawthorn Woods

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
Package				
	Estimated Cost TRIA Premium	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$49,237 \$756
Automobile	Estimated Cost	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	Underwriters at Lloyd's, London (Underwriters at Lloyd's, London)	\$16,562
Umbrella	Estimated Cost TRIA Premium	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$10,174 \$255
Cyber Liability	Estimated Cost TRIA Premium	BCS Insurance Company (BCS Insurance Company)	BCS Insurance Company (BCS Insurance Company)	\$2,603 \$31
Accidental Death and Dismemberment	Estimated Cost TRIA Premium	Starr Indemnity & Liability Company (Starr Indemnity & Liability Company)	Starr Indemnity & Liability Company (Starr Indemnity & Liability Company)	\$1,250 \$1,250
Workers Compensation	Premium Total Fees Estimated Cost TRIA Premium	Illinois Public Risk Fund (Illinois Public Risk Fund)	Illinois Public Risk Fund (Illinois Public Risk Fund)	\$69,960 \$2,099 \$72,059 Included
Crime	Estimated Cost TRIA Premium	Hanover Insurance Company (Hanover Insurance Companies)	Hanover Insurance Company (Hanover Insurance Companies)	\$1,497 \$1,497
AJG Risk Management Fee	TRIA Premium			\$15,949.00
Total Estimated Program Cost				\$165,188.00

Village of Hawthorn Woods

Premium Summary (Cont.)

Quote from Underwriters at Lloyd's, London (Underwriters at Lloyd's, London) is valid until 12/29/2018
Quote from Underwriters at Lloyd's London (Underwriters at Lloyd's London) is valid until 12/29/2018
Quote from BCS Insurance Company (BCS Insurance Company) is valid until 12/31/2018
Quote from Underwriters at Lloyd's London (Underwriters at Lloyd's London) is valid until 12/29/2018
Quote from Illinois Public Risk Fund (Illinois Public Risk Fund) is valid until 4/1/2019
Quote from Starr Indemnity & Liability Company (Starr Indemnity & Liability Company) is valid until 12/9/2018
Quote from Hanover Insurance Company (Hanover Insurance Companies) is valid until 12/31/2018

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

Package
Automobile
Umbrella
Cyber Liability
Accidental Death and Dismemberment
Workers Compensation
Crime

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.

Village of Hawthorn Woods

Payment Plans

CARRIER	LINE OF COVERAGE	PAYMENT SCHEDULE	PAYMENT METHOD
Underwriters at Lloyd's London (Underwriters at Lloyd's London)	Package Automobile Umbrella	Annual	Agency Bill
BCS Insurance Company (BCS Insurance Company)	Cyber Liability	Annual	Agency Bill
Starr Indemnity & Liability Company (Starr Indemnity & Liability Company)	Accidental Death and Dismemberment	Annual Pay	Agency Bill
Illinois Public Risk Fund (Illinois Public Risk Fund)	Workers Compensation	12 Equal Monthly Installments	Direct Bill
Hanover Insurance Company (Hanover Insurance Companies)	Crime	Annual Pay	Agency Bill

Village of Hawthorn Woods

Changes / Developments

It is important that we be advised of any changes in your operations that may have a bearing on the validity and/or adequacy of your insurance. The types of changes that concern us include, but are not limited to, those listed below:

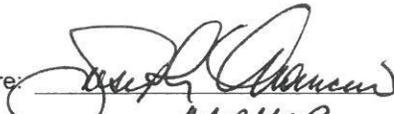
1. Changes in any operation such as expansion to other states or new products.
2. Mergers and/or acquisition of new companies.
3. Any newly assumed contractual liability, granting of indemnities, or hold harmless agreements.
4. Circumstances which may require increased liability insurance limits.
5. Any changes in fire or theft protection, such as the installation of or disconnection of sprinkler systems, burglar alarms, etc. This includes any alterations to same.
6. Immediate advice of any changes to scheduled equipment such as contractors' equipment, electronic data processing, etc.
7. Property of yours that is in transit, unless we have previously arranged for the insurance.
8. Any changes in existing premises including vacancy, whether temporary or permanent, alterations, demolition, etc. Also, any new premises either purchased, constructed, or occupied.

No Changes and/or Developments

Signature: _____

Title: _____

Date: _____


MAYOR
11/26/18

Village of Hawthorn Woods

Proposal Disclosures

Village of Hawthorn Woods

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 any executive summaries included with or supplementing the proposal outlines certain terms and conditions of the insurance proposed by the insurers, based on the information provided by your company. It does not include all the terms, coverages, exclusions, limitations and/or conditions of the actual policy contract language. The insurance policies themselves must be read for those details. Policy forms for your reference will be made available upon request.

We will not be operating in a fiduciary capacity, but only as your broker, obtaining a variety of coverage terms and conditions to protect the risks of your enterprise. We will seek to bind those coverages based upon your authorization; however, we can make no warranties in respect to policy limits or coverage considerations of the carrier. Actual coverage is determined by policy language, so read all policies carefully. Contact us with questions on these or any other issues of concern.

Compensation Disclosure

One of the core values highlighted in The Gallagher Way states, "We are an Open Society," and our open society extends to the compensation Gallagher receives. In general, Gallagher may be compensated as follows:

1. Gallagher Companies are primarily compensated from the usual and customary commissions or fees received from the 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 from company to company and insurance coverage to insurance coverage. As permitted by law, Gallagher companies occasionally receive both commissions and fees.
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. Contingent commissions provide for additional compensation if stipulated 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 particular insurance company and/or through the particular intermediary, not on an individual policy basis. Some insurance markets, including Gallagher-owned intermediaries, have modified their commission schedule with Gallagher, resulting in an increase in certain commission rates. These additional commissions, commonly referred to as "supplemental commissions" are frequently known as of the effective date of the applicable insurance placement, but some insurance companies pay this commission later and apart from when commission is normally paid at policy issuance. As a result, Gallagher may be considered to have an incentive to place your insurance coverages with a particular insurance company. Note: Upon request, your Gallagher representative can provide more specific market information regarding contingent and supplemental commission related to your insurance coverage placed through Gallagher.
3. Gallagher Companies may also receive investment income on fiduciary funds temporarily held by them, such as premiums or return premiums.
4. Gallagher Companies may access other facilities, including wholesalers, reinsurance intermediaries, captive managers, underwriting managers and others that act as intermediaries for both Gallagher and other brokers in the insurance marketplace. Gallagher Companies may own some of these facilities, in whole or in part. If such a facility is utilized in the placement of a client's account, the facility may earn and retain customary brokerage commission or fees for its work.
5. Gallagher assists its clients in procuring premium finance quotes and unless prohibited by law may earn compensation for this optional value-added service.
6. From time to time, Gallagher may participate in insurance company promotional events or training and development that insurers provide for Gallagher employees.
7. Gallagher strives to find appropriate coverage at a competitive price for our clients. In order to achieve these goals, we gather and analyze data about our clients and their insurance coverage. This

Village of Hawthorn Woods

Proposal Disclosures (Cont.)

data and the resulting analytical tools help us better understand the current marketplace, more accurately predict future trends and offer tailored solutions to our clients. This data may also be provided to insurers pursuant to consulting service agreements from which we earn fees.

If you have specific questions about the 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.com or by regular mail at:

AJG Chief Compliance Officer
Arthur J. Gallagher & Co.
2850 Golf Rd., 8th Floor
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.

Actuarial Disclaimer

The information contained in this proposal is based on the historical loss experience and exposures provided to Arthur J. Gallagher Risk Management Services, Inc.. This proposal is not an actuarial study. Should you wish to have this proposal reviewed by an independent actuary, we will be pleased to provide you with a listing of actuaries for your use.

Village of Hawthorn Woods

Insurance Company Ratings and Admitted Status

PROPOSED INSURANCE COMPANIES	A.M. BEST'S RATING	ADMITTED / NON-ADMITTED
BCS Insurance Company	A- VIII	Admitted
Hanover Insurance Company	A XV	Admitted
Illinois Public Risk Fund	NR (1)	Admitted
Starr Indemnity & Liability Company	A XIV	Admitted
Underwriters at Lloyd's London	A XV	Admitted

(1) The Illinois Public Risk Fund is a Self-Funded program established in 1985 solely for the purpose of providing Workers Compensation coverage to public entities in Illinois. Reinsurance is provided by Safety National Casualty Corporation

If the above indicated coverage is placed with a Non-Admitted Carrier, the carrier is doing business in the state as a surplus lines or non-admitted carrier. As such, this carrier is not subject to the same regulations which apply to an admitted carrier nor do they participate in any insurance guarantee fund applicable in that state.

*The above A.M. Best Rating was verified on the date the proposal document was created.

Guide to Best Ratings Rating Levels and Categories

LEVEL	CATEGORY	Financial Size Categories (In \$000 of Reported Policyholders' Surplus Plus Conditional Reserve Funds)	
A++, A+	Superior		
A, A-	Excellent		
B++, B+	Good		
B, B-	Fair		
C++, C+	Marginal		
C, C-	Weak		
D	Poor		
E	Under Regulatory Supervision		
F	In Liquidation		
S	Suspended		
		FSC I	Up to 1,000
		FSC II	1,000 to 2,000
		FSC III	2,000 to 5,000
		FSC IV	5,000 to 10,000
		FSC V	10,000 to 25,000
		FSC VI	25,000 to 50,000
		FSC VII	50,000 to 100,000
		FSC VIII	100,000 to 250,000
		FSC IX	250,000 to 500,000
		FSC X	500,000 to 750,000
		FSC XI	750,000 to 1,000,000
		FSC XII	1,000,000 to 1,250,000
		FSC XIII	1,250,000 to 1,500,000
		FSC XIV	1,500,000 to 2,000,000
		FSC XV	2,000,000 or more

Best's Insurance Reports, published annually by A.M. Best Company, Inc., presents comprehensive reports on the financial position, history, and transactions of insurance companies operating in the United States and Canada. Companies licensed to do business in the United States are assigned a Best's Rating which attempts to measure the comparative position of the company or association against industry averages.

A Best's Financial Strength Rating opinion addresses the relative ability of an insurer to meet its ongoing insurance obligations. It is not a warranty of a company's financial strength and ability to meet its obligations to policyholders. View the A.M. Best Important Notice: Best's Credit Ratings for a disclaimer notice and complete details at <http://www.ambest.com/ratings/notice>.

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Gallagher companies use A.M. Best Company's rating services to evaluate the financial condition of insurers whose policies we propose to deliver. 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.

Village of Hawthorn Woods

Insurance Company Ratings and Admitted Status (Cont.)

BEST'S FINANCIAL STRENGTH RATING GUIDE – (FSR)			
<p>A Best's Financial Strength Rating (FSR) is an independent opinion of an insurer's financial strength and ability to meet its ongoing insurance policy and contract obligations. An FSR is not assigned to specific insurance policies or contracts and does not address any other risk, including, but not limited to, an insurer's claims-payment policies or procedures; the ability of the insurer to dispute or deny claims payment on grounds of misrepresentation or fraud; or any specific liability contractually borne by the policy or contract holder. An FSR is not a recommendation to purchase, hold or terminate any insurance policy, contract or any other financial obligation issued by an insurer, nor does it address the suitability of any particular policy or contract for a specific purpose or purchaser. In addition, an FSR may be displayed with a rating identifier, modifier or affiliation code that denotes a unique aspect of the opinion.</p>			
Best's Financial Strength Rating (FSR) Scale			
Rating Categories	Rating Symbols	Rating Notches*	Category Definitions
Superior	A+	A++	Assigned to insurance companies that have, in our opinion, a superior ability to meet their ongoing insurance obligations.
Excellent	A	A-	Assigned to insurance companies that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.
Good	B+	B++	Assigned to insurance companies that have, in our opinion, a good ability to meet their ongoing insurance obligations.
Fair	B	B-	Assigned to insurance companies that have, in our opinion, a fair ability to meet their ongoing insurance obligations. Financial strength is vulnerable to adverse changes in underwriting and economic conditions.
Marginal	C+	C++	Assigned to insurance companies that have, in our opinion, a marginal ability to meet their ongoing insurance obligations. Financial strength is vulnerable to adverse changes in underwriting and economic conditions.
Weak	C	C-	Assigned to insurance companies that have, in our opinion, a weak ability to meet their ongoing insurance obligations. Financial strength is very vulnerable to adverse changes in underwriting and economic conditions.
Poor	D	-	Assigned to insurance companies that have, in our opinion, a poor ability to meet their ongoing insurance obligations. Financial strength is extremely vulnerable to adverse changes in underwriting and economic conditions.
<p>* Each Best's Financial Strength Rating Category from "A+" to "C" includes a Rating Notch to reflect a gradation of financial strength within the category. A Rating Notch is expressed with either a second plus "+" or a minus "-".</p>			
FSR Non-Rating Designations			
Designation Symbols	Designation Definitions		
E	Status assigned to insurance companies that are publicly placed under a significant form of regulatory supervision, control or restraint - including cease and desist orders, conservatorship or rehabilitation, but not liquidation - that prevents conduct of normal ongoing insurance operations; an impaired insurer.		
F	Status assigned to insurance companies that are publicly placed in liquidation by a court of law or by a forced liquidation; an impaired insurer.		
S	Status assigned to rated insurance companies to suspend the outstanding FSR when sudden and significant events impact operations and rating implications cannot be evaluated due to a lack of timely or adequate information; or in cases where continued maintenance of the previously published rating opinion is in violation of evolving regulatory requirements.		
NR	Status assigned to insurance companies that are not rated; may include previously rated insurance companies or insurance companies that have never been rated by AMBRS.		
Rating Disclosure – Use and Limitations			
<p>A Best's Credit Rating (BCR) is a forward-looking independent and objective opinion regarding an insurer's, issuer's or financial obligation's relative creditworthiness. The opinion represents a comprehensive analysis consisting of a quantitative and qualitative evaluation of balance sheet strength, operating performance and business profile or, where appropriate, the specific nature and details of a security. Because a BCR is a forward-looking opinion as of the date it is released, it cannot be considered as a fact or guarantee of future credit quality and therefore cannot be described as accurate or inaccurate. A BCR is a relative measure of risk that implies credit quality and is assigned using a scale with a defined population of categories and notches. Entities or obligations assigned the same BCR symbol developed using the same scale, should not be viewed as completely identical in terms of credit quality. Alternatively, they are alike in category (or notches within a category), but given there is a prescribed progression of categories (and notches) used in assigning the ratings of a much larger population of entities or obligations, the categories (notches) cannot mirror the precise subtleties of risk that are inherent within similarly rated entities or obligations. While a BCR reflects the opinion of A.M. Best Rating Services, Inc. (AMBRS) of relative creditworthiness, it is not an indicator or predictor of defined impairment or default probability with respect to any specific insurer, issuer or financial obligation. A BCR is not investment advice, nor should it be construed as a consulting or advisory service, as such; it is not intended to be utilized as a recommendation to purchase, hold or terminate any insurance policy, contract, security or any other financial obligation, nor does it address the suitability of any particular policy or contract for a specific purpose or purchaser. Users of a BCR should not rely on it in making any investment decision; however, if used, the BCR must be considered as only one factor. Users must make their own evaluation of each investment decision. A BCR opinion is provided on an "as is" basis without any expressed or implied warranty. In addition, a BCR may be changed, suspended or withdrawn at any time for any reason at the sole discretion of AMBRS.</p>			
<p>BCRs are distributed via the AMBRS website at www.ambest.com. For additional information regarding the development of a BCR and other rating-related information and definitions, including outlooks, modifiers, identifiers and affiliation codes, please refer to the report titled "Understanding Best's Credit Ratings" available at no charge on the AMBRS website. BCRs are proprietary and may not be reproduced without permission.</p>			
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Village of Hawthorn Woods

Client Signature Requirements

Village of Hawthorn Woods

Client Authorization to Bind Coverage

After careful consideration of Gallagher's proposal dated 11/9/2018, we accept the following coverage(s). Please check the desired coverage(s) and note any coverage amendments below:

	LINE OF COVERAGE	CARRIER
<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	Package – Property / General Liability / Law Enforcement Liability / Public Officials Liability / Employment Practices Liability	Underwriters at Lloyd's London (Underwriters at Lloyd's London)
<input type="checkbox"/> Accept <input checked="" type="checkbox"/> Reject	TRIA Coverage	
<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	Automobile	Underwriters at Lloyd's, London (Underwriters at Lloyd's, London)
<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	Umbrella	Underwriters at Lloyd's London (Underwriters at Lloyd's London)
<input type="checkbox"/> Accept <input checked="" type="checkbox"/> Reject	TRIA Coverage	
<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	Cyber Liability	BCS Insurance Company (BCS Insurance Company)
<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	Opt# 1 - Cyber Deception	
<input type="checkbox"/> Accept <input checked="" type="checkbox"/> Reject	TRIA Coverage	
<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	Accidental Death and Dismemberment	Starr Indemnity & Liability Company (Starr Indemnity & Liability Company)
<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	Workers Compensation	Illinois Public Risk Fund (Illinois Public Risk Fund)
TRIA Cannot be rejected	TRIA Coverage	
<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	Crime	Hanover Insurance Company (Hanover Insurance Companies)
<input type="checkbox"/> Accept <input checked="" type="checkbox"/> Reject	TRIA Coverage	

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:

Village of Hawthorn Woods

Client Authorization to Bind Coverage (Cont.)

Producer/ Insured Coverage Amendments and Notes:



Client Initials

Village of Hawthorn Woods

Client Authorization to Bind Coverage

It is understood this proposal provides only a summary of the details; the policies will contain the actual coverages.

We confirm the values, schedules, and other data contained in the proposal are from our records and acknowledge it is our responsibility to see that they are maintained accurately.

We agree that your liability to us arising from your negligent acts or omissions, whether related to the insurance or surety placed pursuant to these binding instructions or not, shall not exceed \$20 million, in the aggregate. Further, without limiting the foregoing, we agree that in the event you breach your obligations, you shall only be liable for actual damages we incur and that you shall not be liable for any indirect, consequential or punitive damages.

By: Joseph Mancino, Mayor
Print Name (Specify Title)

Village of Hawthorn Woods
Company

Joseph Mancino
Signature

Date: 11/26/18

Village of Hawthorn Woods

Appendix

Village of Hawthorn Woods

Bindable Quotations & Compensation Disclosure Schedule

Client Name: Village of Hawthorn Woods

COVERAGE(S)	CARRIER NAME(S)	EST. ANNUAL PREMIUM ¹	WHOLESALE, MGA OR INTERMEDIARY	
			COMM.% OR FEE ²	NAME ³
Package	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$49,237	0 %	Brit Global Specialty USA
Automobile	Underwriters at Lloyd's, London (Underwriters at Lloyd's, London)	\$16,562	0 %	Brit Global Specialty USA
Umbrella	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$10,174	0 %	Brit Global Specialty USA
Cyber Liability	BCS Insurance Company (BCS Insurance Company)	\$2,603	7.5 %	Risk Placement Services
Accidental Death and Dismemberment	Starr Indemnity & Liability Company (Starr Indemnity & Liability Company)	\$1,250	10 %	Risk Placement Services
Workers Compensation	Illinois Public Risk Fund (Illinois Public Risk Fund)	\$69,960	0 %	Boyle, Flagg & Seaman, Inc.
Crime	Hanover Insurance Company (Hanover Insurance Companies)	\$1,497	0 %	Arthur J Gallagher Bond Dept
AJG Risk Management Fee			\$15,949	

Some carriers pay Gallagher supplemental or contingent commissions in addition to the policy commission. Contingent commissions are typically contingent upon performance factors such as growth, profit, volume or retention, while supplemental commissions are not. These supplemental or contingent commissions may range from less than 1% up to 10% of the policy premium. Please refer to the Compensation Disclosure or contact your Gallagher representative for additional information.

1 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.

2 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.

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

4 * The non-Gallagher intermediary/wholesaler did not provide their compensation information for this proposal. The usual and customary compensation to a wholesaler/ intermediary ranges from 5% to 12%, but we cannot verify that range is applicable in connection with this proposal.

Village of Hawthorn Woods

Claims Reporting By Policy

Direct Reporting

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

Package / Auto / Umbrella Claims will be handled by Alternative Service Concepts (ASC), a team with expertise in handling Public Entity claims specifically dedicated to the Package First product.

ASC/BRIT DEDICATED TEAM SUPPORT PERSON

Phone: 615-360-1358

Fax: 1-877-721-1855

Email: Britpackagefirstclaims@ascrisk.com

Mailing/Correspondence: Alternative Service Concepts, Two Rivers Corporate Centre, Suite 802, 2501 McGavock Pike, Nashville, TN 37214

ACORD forms can be completed and emailed or faxed to the above contact information. Claims can also be reported telephonically via the number above

Crime

Hanover Insurance Company

Phone#: 800-628-0250

Fax#: 800-399-4734

Email: firstreport@hanover.com

Workers Compensation

IPRF

Phone: 1-844-522-6082 24/7

Cyber Liability

Clyde & Co US LLP

101 Second Street, 24th Floor

San Francisco, CA 94105

24 Hour Security Breach Hotline

1-855-217-5204

Baker & Hostetler LLP

45 Rockefeller Plaza

New York, NY 10111-010

Volunteer Accident

Starr Indemnity and Liability Company

1601 Market Street, Suite 1800

Philadelphia, PA 19103

Fax: 888-329-5677

NOTICE OF TERRORISM INSURANCE COVERAGE - PACKAGE POLICY

You are hereby notified that under the Terrorism Risk Insurance Program Reauthorization Act of 2015, as amended ("TRIA"), that you now have a right to purchase insurance coverage for losses arising out of acts of terrorism, as defined in Section 102(1) of the Act, as amended:

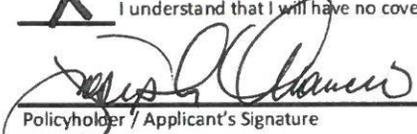
The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State, and the Attorney General of the United States – to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of 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. Any coverage you purchase for "acts of terrorism" shall expire at 12:00 midnight December 31, 2020, the date on which the TRIA Program is scheduled to terminate or the expiry date of the policy whichever occurs first, and shall not cover any losses or events which arise after the earlier of these dates.

YOU SHOULD KNOW THAT COVERAGE PROVIDED BY THIS POLICY FOR LOSSES CAUSED BY CERTIFIED ACTS OF TERRORISM ARE PARTIALLY REIMBURSED BY THE UNITED STATES 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 THIS FORMULA, THE UNITED STATES PAYS 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURER(S) PROVIDING THE COVERAGE. 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 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.

THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

I hereby elect to purchase coverage for acts of terrorism for a prospective premium of
\$ **756**

I hereby elect to have coverage for acts of terrorism excluded from my policy.
 I understand that I will have no coverage for losses arising from acts of terrorism.



Policyholder / Applicant's Signature

11/26/18

Date Signed

Joseph Mancino, Mayor

Print Name and Title

Insured Name: Village of Hawthorn Woods
2 Lagoon Drive
Hawthorn Woods, IL, 60047

Policy Period: 12/31/2018 to 12/31/2019

NOTICE OF TERRORISM INSURANCE COVERAGE - UMBRELLA POLICY

You are hereby notified that under the Terrorism Risk Insurance Program Reauthorization Act of 2015, as amended ("TRIA"), that you now have a right to purchase insurance coverage for losses arising out of acts of terrorism, as defined in Section 102(1) of the Act, as amended:

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 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. Any coverage you purchase for "acts of terrorism" shall expire at 12:00 midnight December 31, 2020, the date on which the TRIA Program is scheduled to terminate or the expiry date of the policy whichever occurs first, and shall not cover any losses or events which arise after the earlier of these dates.

YOU SHOULD KNOW THAT COVERAGE PROVIDED BY THIS POLICY FOR LOSSES CAUSED BY CERTIFIED ACTS OF TERRORISM ARE PARTIALLY REIMBURSED BY THE UNITED STATES 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 THIS FORMULA, THE UNITED STATES PAYS 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURER(S) PROVIDING THE COVERAGE. 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 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.

THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

I hereby elect to purchase coverage for acts of terrorism for a prospective premium of

 \$ **255**



I hereby elect to have coverage for acts of terrorism excluded from my policy.

I understand that I will have no coverage for losses arising from acts of terrorism.

Joseph Mancino
Policyholder / Applicant's Signature

11/26/18
Date Signed

Joseph Mancino, Mayor
Print Name and Title

Insured Name: Village of Hawthorn Woods
2 Lagoon Drive
Hawthorn Woods, IL, 60047

Policy Period: 12/31/2018 to 12/31/2019



November 2, 2018

Village of Hawthorn Woods
2 Lagoon Drive
Hawthorn Woods, IL 60047

Re: Workers Compensation
01/01/2019 – 01/01/2020
Illinois Public Risk Fund

In addition to the proposal and in the interest of providing you insurance consistent with your requirements, we have confirmed that Workers Compensation coverage is available from Illinois Public Risk Fund.

This company is a Illinois Public Risk Fund sponsored by Boyle, Flagg and Seaman Insurance. Your affiliation with Arthur J. Gallagher Risk Management Services, Inc. qualifies you to place coverage with this company. Because this company is a highly specialized market, only offering coverage to members of Illinois, we will use this company only with your approval. The following information is available for your review:

AM Best for Safety National Casualty Corporation
Illinois Public Risk Fund By Laws
Illinois Public Risk Fund Pooling Agreement
Illinois Public Risk Fund Financial Stability Rating

Please review this and other available information with your accountant and/or attorney to assist you in judging the acceptability of this carrier.

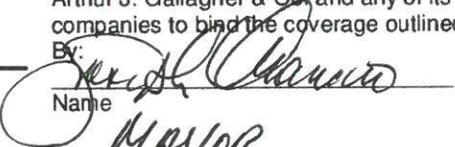
If you should have any questions, please do not hesitate to contact me.

Sincerely,

Marcus Henthorn
Area Vice President

The undersigned, a duly authorized officer or representative acting in said capacity, acknowledges receipt of the information contained herein. Notwithstanding this information, the undersigned hereby authorizes and directs Arthur J. Gallagher & Co. and any of its subsidiary companies to bind the coverage outlined above.

By:


Name

MAYOR
Title

Joseph Mancino
Print Name

11/26/18
Date

**PUBLIC OFFICIALS LIABILITY COVERAGE FORM
CLAIMS-MADE COVERAGE**

Public Officials Liability coverage applies only if limits are shown in **Item 11.** of the Declarations.

Within this Coverage Form, the word "insured" means any person or organization qualifying as such under PUBLIC OFFICIALS—WHO IS AN INSURED.

SECTION I—COVERAGES

1. INSURING AGREEMENT

We will pay on behalf of the insured all "loss" resulting from "public officials wrongful act(s)" but only with respect to "claims" first made against the insured during the "policy period" or Extended Reporting Period. The "public officials wrongful acts" must occur within the "coverage territory." There is no coverage for "public officials wrongful act(s)" which occur during the Extended Reporting Period.

2. DEFENSE AND SUPPLEMENTARY PAYMENTS

We will have the right and duty to defend any "suit" against the insured even if any of the allegations of the "suit" are groundless, false or fraudulent. We may make such investigation of any "claim" or "suit" as we deem expedient. We will not be obligated to pay any "claim" or judgment or to defend any "suit" after the applicable limit of our liability has been exhausted by payment of judgments or settlements.

The insured, except at its own cost and for its own account, will not, without our written consent, make any payment, admit any liability, settle any "claim," assume any obligation, or incur any expense.

We will have the right, but no duty, to appeal any judgment.

We will pay, in addition to the applicable Limit of Liability:

- a. All expenses incurred by us, and all interest on the entire amount of any judgment therein, which does not exceed the limit of our liability;
- b. All reasonable expenses incurred by the insured at our request to assist in the investigation or defense of a "claim" or "suit." Expenses, as used here, do not include salaries of your officers or employees, except for

actual loss of earnings, up to \$100 a day, because of time off from work;

- c. Prejudgment interest awarded against the insured on that part of the judgment we pay. If we make an offer to pay the applicable Limit of Liability, we will not pay any prejudgment interest based on that period of time after the offer;
- d. Premium on appeal bonds required in any "suit" defended by us and the cost of attachment or similar bonds.

SECTION II—EXCLUSIONS

We will not be obligated to make any payment nor to defend any "suit" in connection with any "claim" made against the insured:

1. Based upon or attributable to any insured gaining profit, advantage or remuneration to which the insured is not entitled;
2. For any damage arising from "bodily injury," sickness, emotional distress, mental anguish, disease or death of any person, or for damage to or destruction of any property, including diminution of value or loss of use thereof;
3. "Law Enforcement Activities"
"Bodily injury", "property damage" or "personal and advertising injury":
 - a. Arising out of any aspect of "law enforcement activities" or operations, including but not limited to, the operation, licensure, maintenance of or use of jails, jail premises, adult or juvenile detention or holding facilities;
 - b. Arising out of any act or omission connected in any way, either directly or indirectly, to the supervision, management or oversight of "law enforcement activities", police departments, law enforcement agencies, law enforcement agents or "employees", members of

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- commissions, boards, vendors or their "employees", volunteers, including "volunteer workers", units operating under a mutual aid agreement or under the jurisdiction of the insured; or anyone or any entity performing "law enforcement activities"; or
- c. Arising from any decisions or actions in connection with funding or failure to fund for "law enforcement activities".
4. As a result of a strike, riot, civil commotion, or mob action;
 5. Arising out of:
 - a. any "public officials wrongful act" which takes place prior to the "policy period" if the insured had knowledge of circumstances which could reasonably be expected to give rise to a "claim"; or
 - b. any "loss" for which the insured is entitled to indemnity or payment by reason of having given notice of any circumstances which might give rise to a "claim" under any policy or policies the term of which has expired prior to the inception date of this policy;
 - c. any claim arising out of pending or prior litigation or hearing, as well as future "claims" arising out of any pending or prior litigation or hearing. If this policy is a renewal of a policy issued by the Company, this exclusion shall only apply with respect to "claims" arising out of any pending or prior litigation or hearing, prior to the effective date of the first policy issued and continuously renewed by the Company.
 6. For "claim(s)," demands, or actions seeking relief or redress in any form other than monetary damages, or for any fees, costs or expenses which the insured may become obligated to pay as a result of any adverse judgment for declaratory relief or injunctive relief; however, we will afford defense to the insured for such actions, "claim(s)," "suit(s)" or demands in which monetary damages are requested if not otherwise excluded;
 7. For "claim(s)" arising from:
 - a. procurement of goods or services;
 - b. construction contracts;
 - c. architectural or engineering contracts;
 - d. the process of bidding or awarding contracts; or
 - e. liability assumed by the insured under any contract or agreement, unless the insured would have been legally liable in the absence of such contract or agreement;
 8. Based upon or attributable to any failure or omission of the insured to effect or maintain insurance of any kind;
 9. Employment Related Practices

For "claims", demands or actions seeking relief or redress in any form by:

 - A. Any person, or any class of persons, arising out of any:
 - (1) Type of employment-related practices, policies, acts or omissions, including but not limited to, coercion, demotion, evaluation, reassignment, malicious prosecution, discipline, libel, slander, invasion of privacy, defamation, "harassment", humiliation, or "discrimination" involving or directed at any person; including any verbal, physical, mental or emotional abuse resulting from or arising out of such employment-related practices, policies, acts or omissions;
 - (2) Failure or refusal to employ, train, or promote that person;
 - (3) Dismissal, discharge or termination of that person's employment or membership, whether actual or constructive;
 - (4) Retaliatory action against volunteers or "volunteer workers", or "employees", for the exercise, or not exercising, any legally protected right, or for engaging in any legally protected activity, including but not limited to, actions of:
 - (A) Performing or declining to perform an unethical or illegal act;
 - (B) Filing a complaint or bringing "suit" against you or anyone else;
 - (C) Testifying against any insured at a legal proceeding;
 - (D) Notifying a proper authority of any aspect of your operation that is illegal;
 - (5) Violation of any Federal, state or local law (common law or statutory) concerning employment or any employment-related practice, policy or procedure described in (1) above, or if insurance is prohibited by law; or
 - B. The spouse, child, parent, brother or sister of that person as a consequence of "bodily injury" to that person at whom any of the employment-related practices described in paragraphs (1), (2), (3), (4) or (5) above is directed:

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C. Any person or any class of person arising out of any "discrimination" or "harassment" directly or indirectly related to:

- (1) The past employment, employment or prospective employment by any insured;
- (2) Any fines, penalties, specific performance, or injunctions levied or imposed by a governmental entity, governmental code, law or statute because of "discrimination" or "harassment".

This Employment Related Practices exclusion applies:

- (1) Whether the injury-causing event described in Paragraphs a. (1), (2), (3), (4) or (5) above occurs before employment or after employment of that person;
- (2) Whether the insured may be liable as an employer or in any other capacity; and
- (3) To any obligation to share damages with or repay someone else who must pay damages because of the injury.

10. For any damages arising out of the providing of, or failure to provide, professional services to anyone other than the Named Insured by any member of the medical profession, or by any lawyer, architect, engineer or accountant;
11. By the Named Insured or on its behalf.
12. Aircraft, Auto or Watercraft

For claims arising out of the ownership, maintenance, use or entrustment to others of any aircraft, "auto" or watercraft owned or operated by or rented or loaned to any insured. Use includes operation and "loading or unloading".

This exclusion applies even if the "loss" or "claim" against any insured allege negligence in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury", "property damage" or "personal injury" involved the ownership, maintenance, use or entrustment to others of any aircraft, "auto" or watercraft that is owned or operated by or rented or loaned to any insured.

13. Any "loss" or "claim(s)" arising during the policy period for damages resulting directly or indirectly from your failure to remedy dangerous circumstances or conditions known to you prior to the policy period.
14. For libel, slander, defamation, invasion of privacy, wrongful eviction, assault, battery, malicious prosecution or abuse of process;

SECTION III—PUBLIC OFFICIALS—WHO IS AN INSURED

Each of the following is an Insured:

1. You;
2. All persons who were, now are, or will be your lawfully elected, appointed or employed officials;
3. Members of commissions, boards or other units operated by you and under your jurisdiction and within apportionment of the total operating budget indicated in the application form, provided that the insurance afforded will not extend to any of the following boards, commissions or units: airports, transit authorities, hospitals, municipally owned gas companies, housing authorities or port authorities;
4. All your employees and all persons who perform service on a volunteer basis for you and under your direction and control;
5. Any persons providing services to you under any mutual aid or similar agreement; and
6. The estates, heirs, legal representative or assigns of deceased persons who were insureds at the time of a "public officials wrongful act(s)" but only to the extent that they would otherwise be provided coverage under this Coverage Form.

However none of the following are insureds under this Coverage Form:

1. Any insured, including you, with respect to the operation of boards, commissions or other units, the members of which are not afforded coverage under 3. above; and
2. All persons or entities who are on retainer, are a consultant or are under contract for services, for any insured.

SECTION IV—LIMITS OF LIABILITY

Regardless of the number of insureds under this Coverage Form, persons or organizations who sustain damages payable under this Coverage Form, and/or "suit(s)" brought under this Coverage Form, our liability is limited as follows:

1. The Limit of Liability stated on the Declarations as applicable to each "public officials wrongful act" is the limit of our liability for all "loss" arising out of one "public officials wrongful act" covered by this Coverage Form.
2. The Limit of Liability stated on the Declarations as applicable to the Annual Aggregate is subject to the above provision respecting each "public officials wrongful act" and is

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the maximum limit of our liability for each "policy period." In no event will our total Limit of Liability be increased for any Extended Reporting Period.

3. Subject to the Limits of Liability stated above, we will only be liable to pay for damages in excess of the "deductible" shown on the Declarations for each and every "public officials wrongful act." In the event we expend funds either for damages or "loss adjustment expense" on behalf of the insured, we will be reimbursed for such expenditures up to the amount of the "deductible" shown on the Declarations. Upon written demand by us, the amount of such "deductible" will be payable to us within thirty (30) days.
4. "Claims" based on or arising out of the same act or interrelated acts of one or more insured(s) will be considered to be based on a single "public officials wrongful act" and only one each "public officials wrongful act" Limit of Liability and only one "deductible" will be applicable to such single "public officials wrongful act."

SECTION V—CONDITIONS

1. Settlement.

We will not settle any "suit" without the insured's consent. If, however, the insured refuses to consent to any settlement, and shall elect to contest the "claim" or continue any legal proceedings in connection with such "claim," our liability for the "claim" shall not exceed the amount for which the "claim" could have been so settled, plus "loss adjustment expense" incurred up to the date of such refusal.

2. Insured's Duties In The Event Of A "Claim" Or "Suit."

- a. In the event of a "claim," written notice containing particulars sufficient to identify the insured and also reasonably obtainable information with respect to the time, place and circumstances thereof, and the names and addresses of the injured and of available witnesses, will be given by or for the insured to us or any of our authorized agents as soon as practicable;
- b. If a "claim" is made or a "suit" is brought against the insured, the insured will as soon as practicable forward to us every demand, notice, summons or other process received by them or their representative;
- c. The insured will cooperate with us and, at our request, consent to being examined and questioned by a representative of ours, under oath if necessary, attend hearings, depositions and trials and will assist in effecting settlement, securing and giving evidence,

obtaining the attendance of witnesses and in the conduct of "suit(s)," as well as in the giving of written statement or statements to our representatives and defense. In the event of a "claim" occurring likely to involve us hereunder, the insured will not make any payment, assume any liability or incur any expense without our consent first being obtained. We will have full discretion in the handling of any "claim," and the insured will give full information and assistance as we may reasonably require.

3. Awareness Provision.

- a. If, during the "policy period" or the Extended Reporting Period, the insured receives oral notice from any party that it is the intention of such party to hold the insured responsible for any "public officials wrongful act(s)," the insured will give written notice to us of the receipt of such oral notice, during the "policy period" or Extended Reporting Period. . Any "claim(s)" made against the insured arising out of such "public officials wrongful act(s)" will, for the purpose of this Coverage Form, be treated as a "claim" made during the "policy period" in which such notice was given, or, if given during the Extended Reporting Period, as a "claim" made during the last "policy period";
- b. For the purpose of the above clause, notice to the designee named on the Declarations will constitute notice to the insured;
- c. In the event of any "claim" occurring hereunder, notice to us will be given to the person or firm(s) shown on the Declarations. Notice will be deemed to be received if sent by prepaid mail, properly addressed.

SECTION VI—DEFINITIONS

Whenever used in this Coverage Form, the following words have these meanings:

1. "Claim" means a written notice from any party that it is their intention to hold an insured responsible for "loss" resulting from a "public officials wrongful act" covered by this Coverage Form.
2. "Deductible" means the amount shown in on the Declarations that the insured must contribute to "loss" and "loss adjustment expense."
3. "Loss" means any monetary amount which the insured is legally obligated to pay as a result of "public officials wrongful act" covered by this Coverage Form and will in-

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clude, but not be limited to, judgments and settlements, but "loss" will not include fines imposed by law, or matters which may be deemed uninsurable under the law pursuant to which this Coverage Form will be construed.

4. "Loss adjustment expense" means all expenditures including, but not limited to, costs of investigations, experts, adjustment services, legal services and court costs incurred by us as a result of coverage afforded by this Coverage Form. "Loss Adjustment Expense" will not include salaries of our employees.
5. "Public officials wrongful act" means:
Any actual or alleged:
 - a. error or omission, neglect or breach of duty by the insured;
 - b. violation of civil rights protected under 42 USC 1981 et sequential; or
 - c. violation of any state civil rights law;which arises out of the discharge of duties for you, individually or collectively.
6. "Suit" means a civil proceeding in which monetary damages are alleged because of a "public officials wrongful act" to which this Coverage Form applies. "Suit" includes:
 - a. an arbitration proceeding in which such damages are claimed and to which the insured must submit or does submit with our consent; or
 - b. any other alternative dispute resolution proceeding in which such damages are claimed and to which the insured submits with our consent.

SECTION VII—EXTENDED REPORTING PERIOD—BASIC AND OPTIONAL SUPPLEMENTAL

1. An Extended Reporting Period, described below, will be provided if this Coverage Form is canceled or non-renewed by us, except for nonpayment of premium, or if we renew or replace coverage with insurance that:
 - a. has a retroactive date; or
 - b. provides coverage on other than a Claims-Made basis.
2. A Basic Extended Reporting Period is automatically provided without additional charge. This period begins at the end of the "policy period" and lasts for sixty (60) days. The

Basic Extended Reporting Period does not apply to "claim(s)" covered under any subsequent policy.

3. Coverage for an optional Supplemental Extended Reporting Period must be added by endorsement and an additional premium charge must be paid. Such period starts sixty (60) days after the end of the "policy period."
4. You will have a one-time option to elect the period of time for which the Supplemental Extended Reporting Period will apply, which in no event will exceed thirty-six (36) months. The available one-time options and the additional premium charge for each option are listed below:
 - a. Twelve (12) month option—70% of the Annualized Coverage Form Premium;
 - b. Twenty-four (24) month option—120% of the Annualized Coverage Form Premium;
 - c. Thirty-six (36) month option—150% of the Annualized Coverage Form Premium.

Once in effect, the Supplemental Extended Reporting Period may not be canceled and the applicable premium is fully earned.

5. This right to purchase the Supplemental Extended Reporting Period will terminate unless written notice is given to us no later than sixty (60) days after the effective date of cancellation or nonrenewal of this Coverage Form. Payment in full of the Supplemental Extended Reporting Period premium and any outstanding premiums or recoveries owed to us will be made concurrently with such written notice for such Supplemental Extended Reporting Period to become effective.
6. The Extended Reporting Period does not extend the "policy period" or change the scope of coverage provided. Subject to this Coverage Form's terms, Limits of Liability, exclusions and conditions, this Coverage Form is extended to apply to "claim(s)" first made against the insured during the Basic Extended Reporting Period, or, if purchased, the Supplemental Extended Reporting Period, but only to "claim(s)" due to "public officials wrongful act(s)" committed prior to the end of the "policy period."
7. The Extended Reporting Period does not reinstate or increase this Coverage Form's Limits of Liability. "Claim(s)" which are first received and recorded during the Basic Extended Reporting Period or the Supplemental Extended Reporting Period, if it is in effect, will be deemed to have been made on the last day of the "policy period."

**EMPLOYMENT PRACTICES LIABILITY COVERAGE FORM
CLAIMS-MADE COVERAGE**

Employment Practices Liability coverage applies only if limits are shown in **Item 13** of the Declarations.

Within this Coverage Form, the word "insured" means any person or organization qualifying as such under **EMPLOYMENT PRACTICES LIABILITY—WHO IS AN INSURED**.

SECTION I—COVERAGES

1. INSURING AGREEMENT

We will pay on behalf of the insured all "loss" resulting from "employment practices wrongful act(s)" but only with respect to "claims" first made against the insured during the "policy period" or Extended Reporting Period. The "employment practices wrongful act(s)" must occur within the "coverage territory." There is no coverage for "employment practices wrongful act(s)" which occur during the Extended Reporting Period.

2. DEFENSE AND SUPPLEMENTARY PAYMENTS

We will have the right and duty to defend any "suit" against the insured even if any of the allegations of the "suit" are groundless, false or fraudulent. We may make such investigation of any "claim" or "suit" as we deem expedient. We will not be obligated to pay any "claim" or judgment or to defend any "suit" after the applicable limit of our liability has been exhausted by payment of judgments or settlements.

The insured, except at its own cost and for its own account, will not, without our written consent, make any payment, admit any liability, settle any "claim," assume any obligation, or incur any expense.

We will have the right, but no duty, to appeal any judgment.

We will pay, in addition to the applicable Limit of Liability:

- a. All expenses incurred by us, and all interest on the entire amount of any judgment therein, which does not exceed the limit of our liability;
- b. All reasonable expenses incurred by the insured at our request to assist in the investigation or defense of a "claim" or "suit." Expenses, as used here, do not include salaries of your officers or employees, except for

actual loss of earnings, up to \$100 a day, because of time off from work;

- c. Prejudgment interest awarded against the insured on that part of the judgment we pay. If we make an offer to pay the applicable Limit of Liability, we will not pay any prejudgment interest based on that period of time after the offer;
- d. Premium on appeal bonds required in any "suit" defended by us and the cost of attachment or similar bonds.

SECTION II—EXCLUSIONS

We will not be obligated to make any payment nor to defend any "suit" in connection with any "claim" made against the insured:

1. Based upon or attributable to any insured gaining profit, advantage or remuneration to which the insured is not entitled;
2. For any damage arising from "bodily injury," sickness, disease or death of any person, or for damage to or destruction of any property, including diminution of value or loss of use thereof; however, for the purpose of this exclusion, "bodily injury" does not include emotional distress or mental anguish;
3. For assault and battery; except for reasonable force used to protect persons or property.
4. Alleging any violation of civil rights other than employment related civil rights;
5. Arising out of:
 - a. any "employment practices wrongful act(s)" which takes place prior to the "policy period" if the insured had knowledge of circumstances which could reasonably be expected to give rise to a "claim"; or

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- b. any "loss" for which the insured is entitled to indemnity or payment by reason of having given notice of any circumstances which might give rise to a "claim" under any policy or policies the term of which has expired prior to the inception date of this policy;
 - c. any claim arising out of pending or prior litigation or hearing, as well as future "claims" arising out of any pending or prior litigation or hearing. If this policy is a renewal of a policy issued by the Company, this exclusion shall only apply with respect to "claims" arising out of any pending or prior litigation or hearing, prior to the effective date of the first policy issued and continuously renewed by the Company.
6. Based upon or arising out of:
- a. any activity for which the insured is acting in a fiduciary capacity; or
 - b. any activity concerning an "employee benefit plan", welfare plan or retirement plan, or self insurance fund, including any obligation under the Employee Retirement Income Security Act, or COBRA, and any subsequent amendments thereto or any similar local, state or federal law or regulation.
 - c. any liability assumed by the insured under any contract or agreement, unless the insured would have been legally liable in the absence of such contract or agreement;
7. For "claim(s)," demands, or actions seeking relief or redress in any form other than monetary damages, or for any fees, costs or expenses which the insured may become obligated to pay as a result of any adverse judgment for declaratory relief or injunctive relief; however:
- a. We will afford defense to the insured for such actions, "claim(s)," "suit(s)" or demands in which monetary damages are requested if not otherwise excluded; and
 - b. We will indemnify the insured for reasonable costs and fees incurred in the defense of "suit(s)" seeking relief or redress in any form other than monetary damages by reason of an "employment practices wrongful act" which is otherwise covered by this policy, in accordance with the following additional provisions:
 - (1) The insured must report each circumstance which could reasonably be expected to give rise to a "suit" to us during the "policy period" or within the Basic Extended Reporting Period;
 - (2) We will have no duty to investigate or defend any such "suit(s)," but we will have the right, at our option and expense, to investigate or take over the defense of any such "suit(s)";
 - (3) We will only be liable to pay for reasonable costs and fees in excess of the "deductible" amount shown in Item 14. of the Declarations. We will have no obligation to pay any salary expense of the insured;
 - (4) The limit of our liability for all such cost and fees will not exceed \$10,000 for each "suit" arising out of an "employment practices wrongful act," not to exceed \$50,000 for each "policy period";
 - (5) "Claim(s)" based on or arising out of the same act or interrelated acts of one or more insured(s) will be considered to be based on a single "employment practices wrongful act"; and
 - (6) The Limit of Liability applicable to this provision is in addition to the Limits of Liability otherwise stated in the coverage form;
8. By the Named Insured or on its behalf;
9. For back wages, overtime or similar "claim(s)," even if designated as liquidated damages, under any federal, state or local statutes, rules, ordinances or regulations, if such "claim(s)" arise out of a "employment practices wrongful act" committed prior to the effective date of this policy; or for "claim(s)" arising from collective bargaining agreements;
10. Aircraft, Auto or Watercraft
- For claims arising out of the ownership, maintenance, use or entrustment to others of any aircraft, "auto" or watercraft owned or operated by or rented or loaned to any insured. Use includes operation and "loading or unloading".
- This exclusion applies even if the "loss" or "claim" against any insured allege negligence in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury", "property damage" or "personal injury" involved the ownership, maintenance, use or entrustment to others of any aircraft, "auto" or watercraft that is owned or operated by or rented or loaned to any insured.

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SECTION III—EMPLOYMENT PRACTICES LIABILITY—WHO IS AN INSURED

Each of the following is an Insured:

1. You;
2. All persons who were, now are, or will be your lawfully elected, appointed or employed officials;
3. Members of commissions, boards or other units operated by and under your jurisdiction and within apportionment of the total operating budget indicated in the application form, provided that the insurance afforded will not extend to any of the following boards, commissions or units: airports, transit authorities, hospitals, municipally owned gas companies, housing authorities or port authorities;
4. All employees and all persons who perform service on a volunteer basis for you and under your direction and control; and
5. The estates, heirs, legal representative or assigns of deceased persons who were insureds at the time of an "employment practices wrongful act(s)" but only to the extent that they would otherwise be provided coverage under this Coverage Form.

However none of the following are insured(s) under this Coverage Form:

1. Any insured, including you, with respect to the operation of boards, commissions or other units, the members of which are not afforded coverage under 3. above; and
2. All persons or entities who are on retainer, are a consultant or are under contract for services, for any insured.

SECTION IV—LIMITS OF LIABILITY

Regardless of the number of insured(s) under this Coverage Form, persons or organizations who sustain damages payable under this Coverage Form, and/or "suit(s)" brought under this Coverage Form, our liability is limited as follows:

1. The Limit of Liability stated on the Declarations as applicable to each "employment practices wrongful act" is the limit of our liability for all "loss" arising out of one "employment practices wrongful act" covered by this Coverage Form.

2. The Limit of Liability stated on the Declarations as applicable to the Annual Aggregate is subject to the above provision respecting each "employment practices wrongful act" and is the maximum limit of our liability for each "policy period." In no event will our total Limit of Liability be increased for any Extended Reporting Period.
3. Subject to the Limits of Liability stated above, we will only be liable to pay for damages in excess of the "deductible" shown on the Declarations for each and every "employment practices wrongful act." In the event we expend funds either for damages or "loss adjustment expense" on behalf of the insured, we will be reimbursed for such expenditures up to the amount of the "deductible" shown on the Declarations. Upon written demand by us, the amount of such "deductible" will be payable to us within thirty (30) days.
4. "Claims" based on or arising out of the same act or interrelated acts of one or more insured(s) will be considered to be based on a single "employment practices wrongful act" and only one each "employment practices wrongful act" Limit of Liability and only one "deductible" will be applicable to such single "employment practices wrongful act."
5. Subject to the Limits of Liability stated above, we will only be liable to pay \$10,000 for damages in excess of \$5,000 for back wages, overtime, or similar "claims" arising out of each "employment practices wrongful act," even if designated as liquidated damages under any federal, state or local statutes, rules, ordinances or regulations. This limit is part of, and not in addition to, the limits shown in Item 13. of the Declarations. Any payments made hereunder will be included in the Annual Aggregate limit of liability stated on the Declarations.
6. Workplace Violence Counseling

We will reimburse you up to \$5,000 in any one "policy period" for expenses you incur for the counseling of "employees" of the Named Insured when that counseling is necessary due to an incident of "Workplace Violence." The "deductible" does not apply to this coverage.

"Workplace Violence" as applicable to this extension means the intentional use of, or threat to use, deadly force by any person with the intent to cause harm; and that results in "bodily injury" or death of a person while on that Named Insured's described premises.

SECTION V—CONDITIONS

1. Settlement.

We will not settle any "suit" without the insured's consent. If, however, the insured refuses to consent to any settlement, and shall elect to contest the "claim" or continue any legal proceedings in connection with such "claim," our liability for the "claim" shall not exceed the amount for which the "claim" could have been so settled, plus "loss adjustment expense" incurred up to the date of such refusal.

2. Insured's Duties In The Event Of A "Claim" Or "Suit."

- a. In the event of a "claim," written notice containing particulars sufficient to identify the insured and also reasonably obtainable information with respect to the time, place and circumstances thereof, and the names and addresses of the injured and of available witnesses, will be given by or for the insured to us or any of our authorized agents as soon as practicable;
- b. If a "claim" is made or a "suit" is brought against the insured, the insured will as soon as practicable forward to us every demand, notice, summons or other process received by them or their representative;
- c. The insured will cooperate with us and, at our request, consent to being examined and questioned by a representative of ours, under oath if necessary, attend hearings, depositions and trials and will assist in effecting settlement, securing and giving evidence, obtaining the attendance of witnesses and in the conduct of "suit(s)," as well as in the giving of written statement or statements to our representatives and defense. In the event of a "claim" occurring likely to involve us hereunder, the insured will not make any payment, assume any liability or incur any expense without our consent first being obtained. We will have full discretion in the handling of any "claim," and the insured will give full information and assistance as we may reasonably require.

3. Awareness Provision.

- a. If, during the "policy period" or the Extended Reporting Period, the insured receives oral notice from any party that it is the intention of such party to hold the insured responsible for any "public officials wrongful act(s)," the insured will give written notice to us of the receipt of such oral notice, during the "policy period" or Extended Reporting Period. . Any "claim(s)" made against the insured arising out of such "public officials

wrongful act(s)" will, for the purpose of this Coverage Form, be treated as a "claim" made during the "policy period" in which such notice was given, or, if given during the Extended Reporting Period, as a "claim" made during the last "policy period";

- b. For the purpose of the above clause, notice to the designee named on the Declarations will constitute notice to the insured;
- c. In the event of any "claim" occurring hereunder, notice to us will be given to the person or firm(s) shown under Item 16. of the Declarations. Notice will be deemed to be received if sent by prepaid mail, properly addressed.

SECTION VI—DEFINITIONS

Whenever used in this Coverage Form, the following words have these meanings:

1. "Claim" means:

- a. A written notice from any party that it is their intention to hold the insured responsible for "loss" resulting from an "employment practices wrongful act" covered by this Coverage Form; and
- b. Any notice that requires you to attend an administrative hearing conducted by the EEOC or by any state agency with a similar purpose.

2. "Deductible" means the amount shown on the Declarations that the insured must contribute to "loss" and "loss adjustment expense."

3. "Employee benefit plans" means a formal program or programs of "employee" benefits maintained in connection with your operations, such as but not limited to Group Life Insurance, Group Accident or Health Insurance, Pension Plans, Savings Plans, Employee Stock Plans, Paid Time Off or Vacation Plans, provided that no one other than an "employee" may subscribe to such insurance or plans. This term also includes workers' compensation and unemployment insurance, social security benefits, workers' compensation and disability benefits or other statutorily required plans.

4. "Employment practices wrongful act(s)" means:

Any actual or alleged:

- a. Refusal to employ;

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- b. Termination of employment; or
- c. False arrest, false imprisonment, libel, slander, defamation, harassment, humiliation, discrimination, invasion of privacy, wrongful eviction, malicious prosecution, abuse of process, or any other act, omission or policy;

based upon or attributable to anyone's employment or application for employment by you;

- 5. "Loss" means any monetary amount which the insured(s) is legally obligated to pay as a result of "employment practices wrongful act(s)" covered by this Coverage Form and will include, but not be limited to, judgments and settlements, but "loss" will not include fines imposed by law, or matters which may be deemed uninsurable under the law pursuant to which this Coverage Form will be construed.
- 6. "Loss adjustment expense" means all expenditures including, but not limited to, costs of investigations, experts, adjustment services, legal services and court costs incurred by us as a result of coverage afforded by this Coverage Form. "Loss adjustment expense" will not include salaries of our employees.
- 7. "Suit" means a civil proceeding in which monetary damages are alleged because of an "employment practices wrongful act" to which this Coverage Form applies. "Suit" includes:
 - a. an arbitration proceeding in which such damages are claimed and to which the insured must submit or does submit with our consent; or
 - b. any other alternative dispute resolution proceeding in which such damages are claimed and to which the insured submits with our consent.

SECTION VII—EXTENDED REPORTING PERIOD—BASIC AND OPTIONAL SUPPLEMENTAL

- 1. An Extended Reporting Period, described below, will be provided if this Coverage Form is canceled or non-renewed by us, except for nonpayment of premium, or if we renew or replace coverage with insurance that:
 - a. has a retroactive date; or
 - b. provides coverage on other than a Claims-Made basis.
- 2. A Basic Extended Reporting Period is automatically provided without additional charge. This period begins at the end of the "policy period" and lasts for sixty (60) days. The

Basic Extended Reporting Period does not apply to "claim(s)," covered under any subsequent policy.

- 3. Coverage for an optional Supplemental Extended Reporting Period must be added by endorsement and an additional premium charge must be paid. Such period starts sixty (60) days after the end of the "policy period."
- 4. You will have a one-time option to elect the period of time for which the Supplemental Extended Reporting Period will apply, which in no event will exceed thirty-six (36) months. The available one-time options and the additional premium charge for each option are listed below:
 - a. Twelve (12) month option—70% of the Annualized Coverage Form Premium;
 - b. Twenty-four (24) month option—120% of the Annualized Coverage Form Premium;
 - c. Thirty-six (36) month option—150% of the Annualized Coverage Form Premium.

Once in effect, the Supplemental Extended Reporting Period may not be canceled and the applicable premium is fully earned.

- 5. This right to purchase the Supplemental Extended Reporting Period will terminate unless written notice is given to us no later than sixty (60) days after the effective date of cancellation or nonrenewal of this Coverage Form. Payment in full of the Supplemental Extended Reporting Period premium and any outstanding premiums or recoveries owed to us will be made concurrently with such written notice for such Supplemental Extended Reporting Period to become effective.
- 6. The Extended Reporting Period does not extend the "policy period" or change the scope of coverage provided. Subject to this Coverage Form's terms, Limits of Liability, exclusions and conditions, this Coverage Form is extended to apply to "claim(s)" first made against the insured during the Basic Extended Reporting Period, or, if purchased, the Supplemental Extended Reporting Period, but only to "claim(s)," due to "employment practices wrongful act(s)" committed prior to the end of the "policy period."
- 7. The Extended Reporting Period does not reinstate or increase this Coverage Form's Limits of Liability. "Claim(s)," which are first received and recorded during the Basic Extended Reporting Period" or the Supplemental Extended Reporting Period, if it is in effect, will be deemed to have been made on the last day of the "policy period."

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**ILLINOIS PUBLIC RISK FUND
GRANT PROGRAM**

VILLAGE OF HAWTHORN WOODS

the Illinois Public Risk Fund has reserved

\$6,905

Congratulations!

Your organization has qualified for a Preferred Loss Ratio Grant of \$2,316 which is included in the above amount.

Please visit www.iprf.com for additional information and the Grant Application. **Grant deadline is December 1, 2019.**
(subject to the program terms and conditions.)

BCS INSURANCE COMPANY
2 Mid America Plaza, Suite 200
Oakbrook Terrace, IL 60181

CYBER LIABILITY AND PRIVACY COVERAGE RENEWAL APPLICATION - Illinois

94.003 IL (08/15)

CERTAIN COVERAGES OFFERED ARE LIMITED TO LIABILITY FOR CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED AND NOTIFIED TO US DURING THE POLICY PERIOD AS REQUIRED. CLAIM EXPENSES SHALL REDUCE THE APPLICABLE LIMITS OF LIABILITY AND ARE SUBJECT TO THE APPLICABLE RETENTION(S). PLEASE READ THE POLICY CAREFULLY.

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

I. GENERAL INFORMATION

Name of Applicant	Village of Hawthorn Woods
Mailing Address	2 Lagoon Drive
City	Hawthorn Woods
State	Illinois
ZIP Code	60047
Description of Applicant's Operations	Government

II. REVENUES

Indicate the following as it relates to the Applicant's fiscal year end (FYE):

Operating expenditures for the most recent Financial Year End

Most Recent FYE

\$8,183,650

Prior FYE

\$3,939,034

* With respect to the information required to be disclosed in response to the questions above, the proposed insurance will not afford coverage for any claim arising from any fact, circumstance, situation, event or act about which any executive officer of the **Applicant** had knowledge prior to the issuance of the proposed policy, nor for any person or entity who knew of such fact, circumstance, situation, event or act prior to the issuance of the proposed policy.

FRAUD WARNING

A policy may not be rescinded, defeated or voided unless the misrepresentation is stated in policy, endorsement or rider attached thereto, or in the written application therefore, and was made with the actual intent to deceive, or materially affected either the acceptance of the risk or the hazard assumed by the company.



Signature * of **Applicant's** Authorized Representative (President, CEO or Chief Information/Security Officer)

JOSEPH MANCINO
Name (Printed)

Mayor
Title

11/26/18
Date

CYBER DECEPTION SUPPLEMENTAL APPLICATION

1. Does the **Applicant** have dual control when transferring funds in excess of \$25,000 to external parties? Yes No
2. Does the **Applicant** provide training for staff members who transact funds in excess of \$25,000 externally? Yes No
3. Have there been any losses for a "Cyber Deception Event" in the past year in excess of \$10,000? Yes No

"Cyber Deception Event" means:

1. 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".



Signature * of Applicant's Authorized Representative Name (Printed) (President, CEO or Chief Information/Security Officer)

Joseph Mancino
Name (Printed)

MAYOR

Title

11/26/18
Date

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

94.553 (01/15)

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, 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 consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

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% THROUGH 2015; 84% BEGINNING ON JANUARY 1, 2016; 83% BEGINNING ON JANUARY 1, 2017; 82% BEGINNING ON JANUARY 1, 2018; 81% BEGINNING ON JANUARY 1, 2019 AND 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 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 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.

Acceptance or Rejection of Terrorism Insurance Coverage

- I hereby elect to purchase terrorism coverage for a prospective premium of \$31.00
- 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.


Policyholder/Applicant's Signature

Joseph Mancino
Print Name

11/26/18
Date

Insurance Company

Policy Number