

Proposal of Insurance

VILLAGE OF LONG GROVE

3110 Old McHenry Road
Long Grove, IL 60047

Presented: December 3, 2014



Arthur J. Gallagher & Co.

Byron Given
Account Executive

Arthur J. Gallagher Risk Management Services,
Inc.
Two Pierce Place, 22nd Floor
Itasca, IL 60143

Byron_Given@ajg.com
www.ajg.com

Village of Long Grove

Table of Contents

Our Team and Commitment	3
Service Team.....	4
Executive Summary	5
Service Commitment.....	6
Your Program	7
Named Insured.....	8
Market Place Review	9
Insurance Company Ratings and Admitted Status.....	10
Premium Summary	12
Payment Plans	14
Location Schedule.....	15
Program Details	16
Property - Underwriters at Lloyd's London.....	16
General Liability and Employee Benefits Liability - Underwriters at Lloyd's London	22
Public Officials Errors & Omissions/Employment Practices Offense - Underwriters at Lloyd's London	25
Automobile Liability/Auto Physical Damage - Underwriters at Lloyd's London.....	30
Umbrella - Underwriters at Lloyd's London	33
Equipment Breakdown - Travelers Property Casualty Co of America.....	36
Crime and Public Officials Bonds - Citizens Insurance Company of America.....	39
Workers Compensation - Illinois Public Risk Fund.....	41
Proposal Disclosures	43
Proposal Disclosures	44
Client Signature Requirements	46
Coverages For Consideration	47
Client Authorization to Bind Coverage	48
Appendix	50
Claims Reporting By Policy.....	51
Bindable Quotations & Compensation Disclosure Schedule.....	52
Schedules	
IPRF Grant	
Fee Agreement	
TRIA Forms	

Our Team and Commitment

Village of Long Grove

Service Team

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

NAME / TITLE	PHONE / ALT. PHONE	EMAIL
Byron Given Account Executive	630-694-5367	Byron_Given@ajg.com
Deb Canning Senior Risk Management Representative	630-647-3102	Deb_Canning@ajg.com
Eric Pan Area President	630-285-4152 630-373-3742	Eric_Pan@ajg.com
Carol Thielen Area Assistant Vice President	630-285-4360	Carol_Thielen@ajg.com

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

Village of Long Grove

Executive Summary

The entire staff at Arthur J. Gallagher Risk Management Services, Inc. would like to thank the Village of Long Grove 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 Long Grove 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..

This is the third renewal for the Village of Long Grove since moving their insurance/risk management operations to Gallagher. In the past several years, stability in pricing has allowed us to keep you with the same group of insurers as when you moved to us from the IMLRMA. We believe that our expertise in the public sector and our relationships with these markets has been key in securing pricing stability. As this will have been three years, next year may be a good time to allow Gallagher to conduct a full marketing of this account if this is the City's wishes to ensure that our proposed program is still the best in the marketplace.

We again thank you for this opportunity, and look forward to being of service to you.

Byron Given

Account Executive

Wednesday, December 03, 2014

Village of Long Grove

Service Commitment

Account Service

At Arthur J. Gallagher & Co., we strive for long-term relationships. Insurance Relationships begin with solid, cost-effective insurance programs, but endure because of excellent service. We will address the day-to-day needs of your organization in a timely manner, and will be proactive regarding your insurance program throughout each insurance term and market cycle. In these ways, we can address your changing insurance needs.

Renewals

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.

Certificates of Insurance

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

Quarterly Account Review

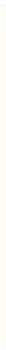
Quarterly account reviews will include review of claims, exposures, audits, and service.

Loss Control

We will coordinate all loss control activities between you and the carrier. We recommend that service be provided on a quarterly basis. We will also arrange loss control seminars on topics chosen by you upon request.

Village of Long Grove

Your Program



Village of Long Grove

Named Insured

NAMED INSURED	LINE OF COVERAGE
Village of Long Grove	All Lines of Coverage included in this proposal

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

Village of Long Grove

Market Place 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
Underwriters at Lloyd's London	Property General Liability and Employee Benefits Liability Public Officials Errors & Omissions/Employment Practices Offense Automobile Liability/Auto Physical Damage Umbrella	Recommended Quote
Travelers Property Casualty Co of America	Equipment Breakdown	Recommended Quote
Citizens Insurance Company of America	Crime and Public Officials Bonds	Recommended Quote
Illinois Public Risk Fund	Workers Compensation	Recommended Quote

Village of Long Grove

Insurance Company Ratings and Admitted Status

PROPOSED INSURANCE COMPANIES	A.M. BEST'S RATING	ADMITTED / NON-ADMITTED
Underwriters at Lloyd's London	A XV	Admitted
Travelers Property Casualty Co of America	A++ XV	Admitted
Citizens Insurance Company of America	A XIV	Admitted
Illinois Public Risk Fund	NR ¹	Admitted

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 <i>(In \$000 of Reported Policyholders' Surplus Plus Conditional Reserve Funds)</i>			
A++, A+	Superior	FSC I	Up to 1,000	FSC IX	250,000 to 500,000
A, A-	Excellent	FSC II	1,000 to 2,000	FSC X	500,000 to 750,000
B++, B+	Good	FSC III	2,000 to 5,000	FSC XI	750,000 to 1,00,000
B, B-	Fair	FSC IV	5,000 to 10,000	FSC XII	1,000,000 to 1,250,000
C++, C+	Marginal	FSC V	10,000 to 25,000	FSC XIII	1,250,000 to 1,500,000
C, C-	Weak	FSC VI	25,000 to 50,000	FSC XIV	1,500,000 to 2,000,000
D	Poor	FSC VII	50,000 to 100,000	FSC XV	2,000,000 or more
E	Under Regulatory Supervision	FSC VIII	100,000 to 250,000		
F	In Liquidation				
S	Suspended				

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>.

Best's Credit Ratings are under continuous review and subject to change and/or affirmation. For the latest Best's Credit Ratings and Best Credit Reports (which include Best Ratings), visit the A.M. Best website at <http://www.ambest.com>. See Guide to Best's Credit Ratings for explanation of use and charges. Copies of the Best's Insurance Reports for carriers listed above are also available upon request of your Gallagher representative.

Best's Credit Ratings reproduced herein appear under license from A.M. Best and do not constitute, either expressly or impliedly, an endorsement of (Licensee's publication or service) or its recommendations, formulas, criteria or comparisons to any other ratings, rating scales or rating organizations which are published or referenced herein. A.M. Best is not responsible for transcription errors made in presenting Best's Credit Ratings. Best's Credit Ratings are proprietary and may not be reproduced or distributed without the express written permission of A.M. Best Company.

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.

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 which is rated A+ XIII by A.M. Best.

Village of Long Grove

Insurance Company Ratings and Admitted Status (Cont.)

GUIDE TO BEST'S FINANCIAL STRENGTH RATINGS			
A Best's Financial Strength Rating is an independent opinion of an insurer's financial strength and ability to meet its ongoing insurance policy and contract obligations. The rating is based on a comprehensive quantitative and qualitative evaluation of a company's balance sheet strength, operating performance and business profile.			
Best's Financial Strength Ratings			
	Rating	Descriptor	Definition
Secure	A++, A+	Superior	Assigned to companies that have, in our opinion, a superior ability to meet their ongoing insurance obligations.
	A, A-	Excellent	Assigned to companies that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.
	B++, B+	Good	Assigned to companies that have, in our opinion, a good ability to meet their ongoing insurance obligations.
Vulnerable	B, B-	Fair	Assigned to 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.
	C++, C+	Marginal	Assigned to 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.
	C, C-	Weak	Assigned to 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.
	D	Poor	Assigned to 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.
	E	Under Regulatory Supervision	Assigned to companies (and possibly their subsidiaries/affiliates) 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.
	F	In Liquidation	Assigned to companies placed in liquidation by a court of law or by a forced liquidation.
S	Suspended	Assigned to rated companies 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.	
Rating Modifiers			
Modifier	Descriptor	Definition	
u	Under Review	Indicates the rating may change in the near term, typically within six months. Generally is event driven, with positive, negative or developing implications.	
pd	Public Data	Indicates rating assigned to insurer that chose not to participate in A.M. Best's interactive rating process. (Discontinued in 2010)	
s	Syndicate	Indicates rating assigned to a Lloyd's syndicate.	
Rating Outlooks			
Indicates potential direction of a Best's Financial Strength Rating over an intermediate term, generally defined as 12 to 36 months.			
Positive	Indicates possible rating upgrade due to favorable financial/market trends relative to the current rating level.		
Negative	Indicates possible rating downgrade due to unfavorable financial/market trends relative to the current rating level.		
Stable	Indicates low likelihood of a rating change due to stable financial/market trends.		
Under Review Implications			
Indicates the potential direction of a Best's Financial Strength Rating that is in Under Review status based on information currently available.			
Positive	Indicates there is a reasonable likelihood the company's rating will be raised as a result of A.M. Best's analysis of a recent event.		
Negative	Indicates there is a reasonable likelihood the company's rating will be lowered as a result of A.M. Best's analysis of a recent event.		
Developing	Indicates there is uncertainty as to the final rating outcome, but there is a reasonable likelihood the company's rating will change as a result of A.M. Best's analysis of a recent event.		
Not Rated Designation			
NR: Assigned to companies that are not rated by A.M. Best.			
Rating Disclosure			
A Best's Financial Strength Rating opinion addresses the relative ability of an insurer to meet its ongoing insurance obligations. The ratings are not assigned to specific insurance policies or contracts and do 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. A Best's Financial Strength Rating 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 arriving at a rating decision, A.M. Best relies on third-party audited financial data and/or other information provided to it. While this information is believed to be reliable, A.M. Best does not independently verify the accuracy or reliability of the information. For additional details, see A.M. Best's <i>Terms of Use</i> at www.ambest.com .			
Best's Financial Strength Ratings are distributed via press release and/or the A.M. Best website at www.ambest.com and are published in the <i>Credit Rating Actions</i> section of <i>Best's Journal</i> SM . Best's Financial Strength Ratings are proprietary and may not be reproduced without permission. Copyright © 2014 by A.M. Best Company, Inc.			
			Version 080114



Village of Long Grove

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
Property General Liability and Employee Benefits Liability Public Officials Errors & Omissions/Employment Practices Offense	Premium	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$11,602	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$15,957
	Premium	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$1,305	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$387
	Premium	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$3,630	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$3,554
	Premium	Travelers Property Casualty Co of America (Travelers Group)	\$970	Travelers Property Casualty Co of America (Travelers Group)	\$1,464
Automobile Liability/Auto Physical Damage	TRIA Premium		TRIA Included		TRIA Included
Umbrella	Premium	Citizens Insurance Company of America (Hanover Insurance Companies)	\$547	Citizens Insurance Company of America (Hanover Insurance Companies)	\$547
Equipment Breakdown	Premium	Illinois Public Risk Fund (Illinois Public Risk Fund)	\$11,575 \$347 \$11,922	Illinois Public Risk Fund (Illinois Public Risk Fund)	\$11,059 \$332 \$11,391
Crime and Public Officials Bonds	TRIA Premium		TRIA Included		TRIA Included
Workers Compensation	Premium Total Fees Estimated Cost Annualized Cost TRIA Premium				
AJG Service Fee			\$3,105		\$3,213
Total Estimated Program Cost			\$33,081		\$36,513

TRIA Premium of \$469 is not included in the above premiums. If coverage is not rejected the following additional premiums will be added: (Property \$294 / GL \$72 / Umbrella \$103)

Village of Long Grove

Premium Summary

Quote From **Underwriters at Lloyd's London (Underwriters at Lloyd's London)** is valid until **12/31/2014**
Quote From **Underwriters at Lloyd's London (Underwriters at Lloyd's London)** is valid until **12/31/2014**
Quote From **Underwriters at Lloyd's London (Underwriters at Lloyd's London)** is valid until **12/31/2014**
Quote From **Underwriters at Lloyd's London (Underwriters at Lloyd's London)** is valid until **12/31/2014**
Quote From **Underwriters at Lloyd's London (Underwriters at Lloyd's London)** is valid until **12/31/2014**
Quote From **Travelers Property Casualty Co of America (Travelers Group)** is valid until **12/31/2014**
Quote From **Citizens Insurance Company of America (Hanover Insurance Companies)** is valid until **12/31/2014**
Quote From **Illinois Public Risk Fund (Illinois Public Risk Fund)** is valid until **1/1/2015**

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

Property
General Liability and Employee Benefits Liability
Public Officials Errors & Omissions/Employment Practices Offense
Automobile Liability/Auto Physical Damage
Umbrella
Equipment Breakdown
Crime and Public Officials Bonds
Workers Compensation

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

Village of Long Grove

Payment Plans

CARRIER	LINE OF COVERAGE	PAYMENT SCHEDULE	PAYMENT METHOD
Underwriters at Lloyd's London (Underwriters at Lloyd's London)	Property General Liability and Employee Benefits Liability Public Officials Errors & Omissions/Employment Practices Offense Automobile Liability/Auto Physical Damage Umbrella	Annual Premium due at policy inception	Agency Bill
Travelers Property Casualty Co of America (Travelers Group)	Equipment Breakdown	Annual Premium due at policy inception	Agency Bill
Citizens Insurance Company of America (Hanover Insurance Companies)	Crime and Public Officials Bonds	Annual Premium due at policy inception	Agency Bill
Illinois Public Risk Fund (Illinois Public Risk Fund)	Workers Compensation	(4) Quarterly Installments	Direct Bill

Village of Long Grove

Location Schedule

LINE OF COVERAGE	LOC # / BLDG #	LOCATION ADDRESS
Property	1/1	1150 Old McHenry Rd, 60047
Property	2/1-2	3110 RFD, 60047
Property	3/1	Downtown, 60047
Property	4/1	IL 83 Robert Parker Coffin Rd, 60047

Village of Long Grove

Program Details

Coverage: Property
Carrier: Underwriters at Lloyd's London
Policy Period: 12/31/2014 to 12/31/2015

The following is a general summary of the Insuring Agreement. Refer to actual policy form for complete terms and conditions.

Coinsurance or Agreed Amount:

DESCRIPTION	AGREED AMOUNT	COINSURANCE %
All Covered Property	Yes	N/A

DESCRIPTION	LIMIT
Buildings and Personal Property	\$7,148,753
Contractor's Equipment - Unscheduled	\$100,000
Contractor's Equipment - Unscheduled	\$2,500- Maximum per any one item applies
Earthquake - Excludes New Madrid Region	\$4,000,000
Flood - 100 and 500 year flood plains, as defined by FEMA, are excluded	\$4,000,000

Deductibles/SIR:

COVERAGE	AMOUNT
Buildings and Personal Property	\$1,000
Contractors Equipment – Unscheduled	\$500
Earthquake – Nondamage areas only	\$25,000
Flood 100- and 500-Year Flood Plains, as defined by FEMA, are excluded	\$25,000
Automated External Defibrillator	Policy Deductible
Collapse	Policy Deductible
Commandeered Property of Others (Other than Automobiles)	Policy Deductible
Crime Reward – Excluding Arson	Policy Deductible
Debris Removal of Covered Property	Policy Deductible
Emergency Evacuation Expense	Policy Deductible
Emergency Real Estate Consulting Fee	Policy Deductible
Employee Dishonesty	\$250
Exterior Building Glass	Policy Deductible
“Fungus,” Wet Rot, Dry Rot, and Bacteria – Limited Coverage	Policy Deductible
Inventory and Appraisal Cost for Claim Preparation	Policy Deductible
Lease Cancellation Moving Expenses	Policy Deductible

Village of Long Grove

Program Details (Cont.)

Deductibles/SIR:

COVERAGE	AMOUNT
Money and Securities	Policy Deductible
Pollutant Cleanup and Removal	Policy Deductible
Preservation of Property	Policy Deductible
State Forest Fire Expense	Policy Deductible
Water Damage, Other Liquid, Powder or Molten Material Damage	Policy Deductible
Coverages Extensions:	
-Accounts Receivable - Per Occurrence On-Premises/Off-Premises	Policy Deductible
-Animals and Canines - Per Animal and Per Occurrence	Policy Deductible
-Appurtenant Building or Structures	Policy Deductible
-Building Ordinance or Law – Coverage A (Undamaged)	Policy Deductible
-Coverage B (Demolition) and Coverage C (Increased Cost of Construction)	Policy Deductible
-Business Income	Policy Deductible
-Extra Expense	Policy Deductible
-Change in Temperature, Electrical Damage and Off-Premises Utility Services – Direct Damage	Policy Deductible
-Change in Temperature, Electrical Damage and Off-Premises Utility Services - Communication Towers	Policy Deductible
-Contractors' Equipment – Nonowned - Per Item and Per Occurrence Limit	Policy Deductible
-Emergency Portable Equipment – Schedule required for limits above basic limit	Policy Deductible
-Employees Tools - Per Employee and Per Occurrence Limit	Policy Deductible
-Fair or Exhibitions	Policy Deductible
-Fine Arts - Per Item and Per Occurrence Limit	Policy Deductible
-Footbridges and Appurtenant Structures	Policy Deductible
-Foundations of Machinery, Swimming Pools, and Underground Pipes	Policy Deductible
-Golf Course Greens – Limited Perils	Policy Deductible
-Lock Replacement	\$50
-Newly Acquired or Constructed Property - Each Building Limit/Contents Limit	Policy Deductible
-Nonowned Detached Trailers	Policy Deductible
-Outdoor Property	Policy Deductible
-Paved Surfaces	Policy Deductible
-Personal Computers, Communication Equipment, EDP Equipment, Electronic Data or Media - Per Occurrence and Away from Premises	Policy Deductible
-Personal Effects - Per Person/Each Location and Occurrence Limit	Policy Deductible
-Personal Property Off-Premises or In-Transit	Policy Deductible
-Recertification Expense	Policy Deductible

Village of Long Grove

Program Details (Cont.)

Deductibles/SIR:

COVERAGE	AMOUNT
-Rental Expense – Contractor's Equipment	Policy Deductible
-Retaining Walls	Policy Deductible
-Sign Coverage	Policy Deductible
-Spoilage – See Utility Service Direct Damage	Policy Deductible
-Surface Water (Locations situated in a 100- or 500-year flood plain are excluded)	Policy Deductible
-Theft Damage to Nonowned Buildings	Policy Deductible
-Underground Sprinkler Systems	Policy Deductible
-Underground Water Seepage - Per Premise	Policy Deductible
-Unnamed Locations	Policy Deductible
-Valuable Papers and Records – Cost of Research (Other than Electronic Data) On-Premises Limit and Away from Premises Limit	Policy Deductible

DESCRIPTION	LIMIT
Automated External Defibrillator	\$5,000
Collapse	Limited 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 Cleanup and Removal	\$25,000
Preservation of Property	Included
State Forest Fire Expense	\$25,000
Temporary Meeting Space	\$1,000
Water Damage, Other Liquid, Powder or Molten Material Damage	Included
Coverages Extensions:	
-Accounts Receivable – Per Occurrence On-Premises/Off-Premises	\$250,000/\$50,000

Village of Long Grove

Program Details (Cont.)

DESCRIPTION	LIMIT
-Animals and Canines	\$1,500/\$10,000 - Per Animal and Per Occurrence
-Appurtenant Building or Structures	\$10,000
-Arson Reward	\$25,000
-Building Ordinance or Law – Coverage A (Undamaged)	Included
-Coverage B (Demolition) and Coverage C (Increased Cost of Construction)	\$350,000
-Business Income	\$250,000
-Extra Expense	\$500,000
-Business Income – Loss of Tax Revenue	\$600,000
-Change in Temperature, Electrical Damage and Off-Premises Utility Services – Direct Damage	\$50,000
-Change in Temperature, Electrical Damage and Off-Premises Utility Services -Communication Towers	\$100,000
-Contractors' Equipment – Nonowned	\$100,000/\$250,000 - Per Item and Per Occurrence Limit
-Emergency Portable Equipment – Schedule required for limits above basic limit	\$25,000
-Employees Tools	\$500/\$1,500 - Per Employee and Per Occurrence Limit
-Fair or Exhibitions	\$50,000
-Fine Arts	\$5,000/\$100,000- Per Item and 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/\$500,000 - Each Building Limit/Contents Limit
-Nonowned Detached Trailers	\$5,000
-Outdoor Property	\$25,000
-Paved Surfaces	\$100,000
-Paved Surfaces	\$100,000
-Personal Computers, Communication Equipment, EDP Equipment, Electronic Data or Media	\$250,000/\$100,000 - Per Occurrence and Away from Premises
-Personal Effects	\$25,000/\$50,000 - Per Person/Each Location and Occurrence Limit

Village of Long Grove

Program Details (Cont.)

DESCRIPTION	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 Nonowned Buildings	\$50,000
-Underground Sprinkler Systems	Included
-Underground Water Seepage	\$10,000 - Per Premises
-Unnamed Locations	\$250,000
-Valuable Papers and Records – Cost of Research (Other than Electronic Data) On-Premises Limit and Away from Premises Limit	\$250,000/\$50,000

Valuations:

DESCRIPTION	LIMITATIONS
Replacement Cost	All Covered Property

Perils Covered:

TYPE	DESCRIPTION
Special Form Perils	Special, including theft

Endorsements include, but are not limited to:

DESCRIPTION
Muni-BISI-PF-001 (12/11) Coverage Form

Exclusions include, but are not limited to:

DESCRIPTION
Government Action Exclusion
War and Military Action Exclusion
Nuclear Hazard, Power Failure

Village of Long Grove

Program Details (Cont.)

Binding Requirements:

DESCRIPTION
Subject to Signed Notice Of Terrorism Insurance Coverage
Subject to receipt of a currently signed, completed application and signed statement of values prior to inception date.

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Buildings and Personal Property Total Insured Values \$7,148,753
Business Income and Extra Expense – Including Alterations and Newly Acquired or Constructed Property, Loss of Tax Revenue, Interruption of Computer Operations, Civil
Total Premium \$15,957.00 Combined for Property, inland marine and crime, General Liability, Law Enforcement Liability, Public Officials Liability, Employment Practices Liability and is shown in Property LOB.

Premium **\$15,957**

ESTIMATED PROGRAM COST **\$15,957**

Minimum Premium: N/A

TRIA premium is not included in the above premium. If TRIA coverage is purchased premium will increase by \$469 (Property: \$294 / General Liability: \$72)

Village of Long Grove

Program Details

Coverage: General Liability and Employee Benefits Liability

Carrier: Underwriters at Lloyd's London

Policy Period: 12/31/2014 to 12/31/2015

Form Type:

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

DESCRIPTION	LIMIT
Each Occurrence Limit	\$1,000,000
Annual Aggregate	\$2,000,000
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	\$2,000,000
Products-Completed Operations Aggregate	\$2,000,000
Sexual Molestation	\$250,000 – Per Claim
Sexual Molestation	\$500,000 – Annual Aggregate

Deductibles/SIR:

COVERAGE	AMOUNT
N/A	N/A

Endorsements include, but are not limited to:

DESCRIPTION
Muni-BISI-PF-001 (12/11) Coverage Form

Village of Long Grove

Program Details (Cont.)

Exclusions include, but are not limited to:

COVERAGE TYPE	DESCRIPTION
General Liability	<ul style="list-style-type: none"> General Liability • Expected or Intended Injury • Airports, Aircraft, Auto • Watercraft (owned, over 51 feet) • Asbestos-Related Claims • Contractual Liability • Dams, Reservoirs, or Levee Structural Failure or Collapse • Damage to Impaired Property • Architects, Engineers, Surveyors, Attorneys, Professional • Electronic Data • Eminent Domain • Employers Liability • Fireworks • Employment Practices Liability (refer to Public Officials section) • Fungi or Bacteria • Liquor Liability (except Host and at functions sponsored by you, not exceeding 5 consecutive days temporary inactive) • Pollution (except Hostile Fire, Herbicide, Pesticide, Chlorine used in general maintenance) • Underground Storage Tanks • War • Nuclear Liability • ERISA • Medical Malpractice for licensed professionals except employed nurses, EMTs, paramedics, counselor • Strikes, Riots, Civil Commotion • Care, Custody, Control (Real and Personal Property) • Medical Centers, Nursing Homes, Abuse Treatment Centers • Mobile Equipment • Medical Expense

Defense Limitations:

Defense Limitation:	Applies
Defense Cost Type:	In addition to Policy Limit, and if so:
Defense Cost Limits:	Limited

Binding Requirements:

DESCRIPTION
<p>Subject to Signed Notice Of Terrorism Insurance Coverage</p> <p>Fireworks are excluded until underwritten and approved - Subject to receipt a copy of the contract with the pyrotechnic and complete our loss control questionnaire at least 30 days prior to the event If Firework s coverage is desired</p>

Village of Long Grove

Program Details (Cont.)

Binding Requirements:

DESCRIPTION
Subject to receipt of a currently signed, completed application
Signed Client Authorization to Bind

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Total Premium \$15,957.00 Combined for Property, inland marine and crime, General Liability, Law Enforcement Liability, Public Officials Liability, Employment Practices Liability and is shown in Property LOB
Blanket Additional Insured language for both written and oral insured contracts
Medical Professional Services coverage for Employed EMT's and Paramedics, licensed or registered nurses, counselors, psychologists or pharmacists except as relates to excluded Medical and Related Facilities
Owned Watercraft up to 50 feet
Host Liquor Liability
Herbicide, Pesticide, Road Treatment, Chlorine in Swimming Pools Limited Pollution Liability
Form is "Pay on behalf" in lieu of indemnity and includes "duty to defend" language

Premium

ESTIMATED PROGRAM COST

INCLUDED

Minimum Premium: N/A

Subject to Audit: Not Auditable

Village of Long Grove

Program Details

Coverage: Public Officials Errors & Omissions/Employment Practices
Offense

Carrier: Underwriters at Lloyd's London

Policy Period: 12/31/2014 to 12/31/2015

Form Number:

Form Type:

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

DESCRIPTION	LIMIT
Public Officials Liability	
- Each Wrongful Act	\$1,000,000
- Annual Aggregate	\$1,000,000
Employment Practices Liability	
- Each Wrongful Act	\$1,000,000
- Annual Aggregate	\$1,000,000

Deductibles/SIR:

COVERAGE	AMOUNT
Public Officials Liability - Each Wrongful Act	\$2,500
Public Officials Liability -Annual Aggregate	Included
Employment Practices Liability - Each Wrongful Act	\$2,500
Employment Practices Liability - Annual Aggregate	Included
Non-Monetary Defense - Per Claim	Included
Non-Monetary Defense -Per Policy Period	Included

Claims Made Coverage:

Should you elect to change carriers (if a new retro-active 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 (60) days of the expiration date. The cost of this extended reporting period is 70% % of the annual premium and is fully earned. The extended reporting period extends only to those claims 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 Long Grove

Program Details (Cont.)

Definition of Claim:

DESCRIPTION
Public Officials Liability
- "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.
Employment Practice Liability – "Claim" means:
- 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
- Any notice that requires you to attend an administrative hearing conducted by the EEOC or by any state agency with a similar purpose

Incident or Claim Reporting Provision:

DESCRIPTION
Duties in the Event of a Claim or Suit – Public Officials or Employment Practice Liability: 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;

DESCRIPTION	PREMIUM AMOUNT	LENGTH
ERP	70% of the Annualized Premium	12 Months
ERP	120% of the Annualized Premium	24 Months
EPR	150% of the Annualized Premium	36 Months

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

Additional Coverage:

DESCRIPTION	LIMIT	BASIS
Public Officials Liability	-	
Key Individual Replacement Expense	\$25,000	Per Claim
Terrorist Travel Reimbursement	\$5,000	Per Policy Period
Identity Theft Protection	\$5,000	Per Claim
Employment Practices Liability	-	
Nonmonetary Defense	\$10,000	Per Claim
Nonmonetary Defense	\$50,000	Per Policy Period
Workplace Violence Counseling	\$5,000	Per Policy Period
Back-Wages - No Prior Acts applies	\$10,000	Per Claim

Village of Long Grove

Program Details (Cont.)

Endorsements include, but are not limited to:

DESCRIPTION
Muni-BISI-PF-001 (12/11) Coverage Form

Exclusions include, but are not limited to:

DESCRIPTION
<ul style="list-style-type: none">• Intentional breach of contract• Any claim brought as a counter claim or cross claim by an assured against any other assured• Injunctive Relief• Criminal Acts• ERISA or similar Fiduciary Capacity• Fines and Penalties• Nonmonetary sublimit for defense• Gaining of Profit• Prior or Pending Litigation• Prior knowledge or circumstances that could reasonably be expected rise to a claim• Back Wages (sublimit provided)

Defense Limitations:

Defense Limitation:	Applies
Defense Cost Type:	In addition to Policy Limit, and if so:
Defense Cost Limits:	Limited

Binding Requirements:

DESCRIPTION
Subject to Signed Notice Of Terrorism Insurance Coverage
Subject to receipt of a currently signed, completed application
Subject to signed client authorization to bind.

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Total Premium \$15,957.00 Combined for Property, inland marine and crime, General Liability, Law Enforcement Liability, Public Officials Liability, Employment Practices Liability and is shown in Property LOB.
Consent to Settle included

Village of Long Grove

Program Details (Cont.)

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION

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 nonrenewed 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)” or “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.”
If Claims-Made – Claims/Definition and Claims Reporting:

- Public Officials Liability
“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.
- Employment Practice Liability – “Claim” means:
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
Any notice that requires you to attend an administrative hearing conducted by the EEOC or by any state agency with a similar purpose.

Duties in the Event of a Claim or Suit – Public Officials or Employment Practice Liability:

- 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;

Awareness Provision:

- 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),” or Employment Practice 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,”

- For the purpose of the above clause, notice to the designee named on the Declarations will constitute notice to the insured;

- 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, to Management Services, Inc.

Village of Long Grove

Program Details (Cont.)

Premium

ESTIMATED PROGRAM COST

INCLUDED

Minimum Premium: N/A

Subject to Audit: Not Auditable

Village of Long Grove

Program Details

Coverage: Automobile Liability/Auto Physical Damage

Carrier: Underwriters at Lloyd's London

Policy Period: 12/31/2014 to 12/31/2015

Coverage:

DESCRIPTION	LIMIT	COVERED AUTOS
Liability Combined Single Limit	\$1,000,000	1
Medical Expense (included in Fleet Coverage Endorsement)	\$10,000	2
Uninsured Motorist	\$1,000,000	6
Underinsured Motorist	\$1,000,000	6
Excess Hired	Included	
Non-owned Liability	Included	
Physical Damage Coverage	-	
- Comprehensive (Veh # 1, 2Each)	ACV, cost to repair or replace, or stated amount, whichever is less	7,8
- Collision (Veh # 1, 2Each)	ACV, cost to repair or replace, or stated amount, whichever is less	7,8
Hired Car Physical Damage	Included in Fleetcover	

Deductibles/SIR:

COVERAGE	AMOUNT
Physical Damage Coverage	-
- Comprehensive	\$500
- Collision	\$500
Medical Expense (included in Fleet Coverage)	included
Excess Hired	included
Non-owned Liability	included

Village of Long Grove

Program Details (Cont.)

Covered Autos:

SYMBOL	SYMBOL NAME	DESCRIPTION OF COVERED DESIGNATION SYMBOLS
1	Any Auto	Can only be used for Liability insurance. Its use provides coverage for any auto with which the insured has contact, including owned and non-owned, hired vehicles, and newly acquired vehicles. It includes coverage for non-owned auto, no-fault insurance, uninsured motorists, or physical damage insurance
2	Owned Autos Only	Only those autos you own (and for Liability Coverage any trailers you don't own while attached to power units you own). This includes those autos you acquire ownership of after the policy begins.
3	Owned Private Passenger Autos Only	Only the private passenger autos you own. This includes those private passenger autos you acquire ownership of after the policy begins.
4	Owned Autos Other Than Private Passenger Autos Only	Only those autos you own that are not of the private passenger type (and for Liability Coverage any trailers you don't own while attached to power units you own). This includes those autos not of the private passenger type you acquire ownership of after the policy begins.
5	Owned Autos Subject To No-Fault	Only those autos you own that are required to have No-Fault benefits in the state where they are licensed or principally garaged. This includes those autos you acquire ownership of after the policy begins provided they are required to have No-Fault benefits in the state where they are licensed or principally garaged.
6	Owned Autos Subject To A Compulsory Uninsured Motorists Law	Only those autos you own that because of the law in the state where they are licensed or principally garaged are required to have and cannot reject Uninsured Motorists Coverage. This includes those autos you acquire ownership of after the policy begins provided they are subject to the same state uninsured motorists' requirement.
7	Specifically Described Autos	Only those autos described in Item Three of the Declarations for which a premium charge is shown (and for Liability Coverage any trailers you don't own while attached to any power unit described in Item Three).
8	Hired Autos Only	Only those autos you lease, hire, rent or borrow. This does not include any auto you lease, hire, rent, or borrow from any of your employees, partners (if you are a partnership), members (if you are a limited liability company) or members of their households.
9	Nonowned Autos Only	Only those autos you do not own, lease, hire, rent or borrow that are used in connection with your business. This includes autos owned by your employees, partners (if you are a partnership), members (if you are a limited liability company), or members of their households but only while used in your business or your personal affairs.
19	Mobile Equipment Subject To Compulsory Or Financial Responsibility Or Other Motor Vehicle Insurance Law Only	Only those autos that are land vehicles and that would qualify under the definition of mobile equipment under this policy if they were not subject to a compulsory or financial responsibility law or other motor vehicle insurance law where they are licensed or principally garaged.

Endorsements include, but are not limited to:

DESCRIPTION
Muni-BISI-PF-001 (12/11) Coverage Form
Fleet Coverage Endorsement)
Emergency Response Provider Endorsement

Village of Long Grove

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Expected or Intended Injury
Workers' Compensation
Property Damage to Property Owned or Transported by you
Property in Care, Custody, or control

Binding Requirements:

DESCRIPTION
Subject to receipt of a currently signed, completed application
Subject to receipt the insured perform MVR reviews annually on all drivers and prior to hiring new drivers.
Subject to signed Uninsured/Underinsured Motorist selection/rejection form must be received by Underwriters prior to inception date.
Signed Client Authorization to Bind

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Fleet Coverage Endorsement adds coverage for commandeered autos, newly acquired organizations, blanket additional insured wording for insured contracts, waiver of subrogation, fellow employee, extended towing coverage, extended glass coverage, rental reimbursement, communication equipment, employee vehicle deductible reimbursement, blanket loss payable clause, medical payments, hired auto physical damage, and 120 day cancellation provision
Replacement Cost coverage for Emergency Rescue Vehicles
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
Automobile Liability, Occurrence Form

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 **\$387**

ESTIMATED PROGRAM COST **\$387**

Minimum Premium: N/A

Subject to Audit: Not Auditable

Village of Long Grove

Program Details

Coverage: Umbrella
Carrier: Underwriters at Lloyd's London
Policy Period: 12/31/2014 to 12/31/2015

Form Type:

COVERAGE	FORM TYPE	RETROACTIVE DATE	PENDING & PRIOR LITIGATION DATE
Umbrella Liability, Follow Form Excess Coverage A / Coverage B umbrella	Occurrence	Not Applicable	Not Applicable

DESCRIPTION	LIMIT
Each Occurrence Limit	\$7,000,000
Aggregate	\$7,000,000

Deductibles/SIR:

COVERAGE	AMOUNT
Retained Limit applies to Coverage B only	\$10,000

COVERAGE	LIMIT	CARRIER	EFFECTIVE DATE	EXPIRATION DATE
General Liability	\$1,000,000.00	Underwriters at Lloyd's London	12/31/2014	12/31/2015
Public Officials Liability	\$1,000,000.00	Underwriters at Lloyd's London	12/31/2014	12/31/2015
Employment Practices Liability	\$1,000,000.00	Underwriters at Lloyd's London	12/31/2014	12/31/2015
Auto Liability	\$1,000,000.00	Underwriters at Lloyd's London	12/31/2014	12/31/2015

Endorsements include, but are not limited to:

DESCRIPTION
Muni-BISI-PF-001 (12/11) Coverage Form

Exclusions include, but are not limited to:

DESCRIPTION
UM/UIM
Pollution (Hostile Fire Exception)

Village of Long Grove

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Sex Abuse (Unless otherwise indicated)
War

Defense Limitations:

Defense Limitation:	Applies
Defense Cost Type:	In addition to Policy Limit, and if so:
Defense Cost Limits:	Limited

Binding Requirements:

DESCRIPTION
Subject to Signed Notice Of Terrorism Insurance Coverage
Subject to receipt of a currently signed, completed application
Signed Client Authorization to bind

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Coverage A is follow form excess over underlying liability coverages
Separate Aggregate Protection, commonly known as "SILO Aggregate", as respects to Coverage A only, applies the aggregate separately to each underlying coverage shown on the umbrella declarations.

Village of Long Grove

Program Details (Cont.)

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
<p>Claims-Made – Claim Definition and Claim Reporting Provisions: Extended Reporting (Applicable to Coverage A Only)</p> <p>1. Extended Reporting Periods</p> <p>If Scheduled Underlying Policy(ies) provide coverage on a “Claims-Made” basis then, as set forth in SECTION I, paragraph A above, this policy provides coverage on a “Claims-Made” basis and:</p> <p>a. We will provide a Basic Extended Reporting Period as described in subparagraph 2 below and, if you purchase it, a Supplemental Extended Reporting Period as described in subparagraph 3 below, IF,</p> <p>i. This insurance is cancelled or not renewed; or</p> <p>ii. We renew or replace this insurance with other insurance that:</p> <p>1. Has a Retroactive Date later than the Retroactive Date shown in the Declarations of this policy; or</p> <p>2. Does NOT apply to injury or damage on a “Claims-Made” basis.</p> <p>2. Basic Extended Reporting Period</p> <p>A Basic Extended Reporting Period, equal in length to the Basic Extended Reporting Period provided in the applicable Underlying Insurance, is automatically provided as set forth above at no additional charge and provided that:</p> <p>a. Claims first made within the Basic Extended Reporting Period; and</p> <p>b. Claims first made after the Basic Extended Reporting Period for injury or damage caused by an occurrence and reported to us in writing within the Basic Extended Reporting Period will be deemed to have been made during the “Policy Period” of this policy.</p> <p>The Basic Extended Reporting Period provided in the Underlying Policy means that extended reporting period provided at no additional charge.</p> <p>The Basic Extended Reporting Period does NOT apply to claims that are covered under any subsequent insurance you purchase, or that would be covered but for exhaustion of the amount of insurance otherwise applicable to such claims.</p> <p>3. Supplemental Extended Reporting Period</p> <p>a. A Supplemental Extended Reporting Period is available only by an endorsement and for an additional charge. This period starts at the end of the Basic Extended Reporting Period and will be equal in length to the Supplemental Extended Reporting Period you purchased in the applicable Underlying Insurance. Claims first made during this Supplemental Extended Reporting Period will be deemed to have been made during the “Policy Period” of this policy but will be subject to the separate Aggregate Limits of Liability set forth in subdivision c. below. The Supplemental Extended Reporting Period provided by the Underlying Policy means that extended reporting period provided at an additional charge.</p> <p>If the Underlying Policy does not provide a Supplemental Extended Reporting Period then this policy does not offer a Supplemental Extended Reporting Period.</p> <p>b. The first Named “Insured” listed in Item 1 of the Declarations must give us a written request for the Endorsement within 60 days after the end of the “Policy Period.” Payment in full of the Supplemental Extended Reporting Period premium and any premiums or recoveries owed to us will be made concurrently with such written notice for such Umbrella Coverage Form Supplemental Extended Reporting Period to become effective.</p> <p>c. If said first Named “Insured” complies with subdivision b. above we will issue the Supplemental Extended Reporting Period Endorsement and will provide the separate Aggregate Limits of Liability described below, but only for claims to which this subparagraph 3. applies.</p>

Premium **\$3,554**

ESTIMATED PROGRAM COST **\$3,554**

TRIA premium of \$103 is excluded from the above premium. If TRIA is purchased, Umbrella premium will increase by \$103.

Minimum Premium: N/A

Subject to Audit: Not Auditable

Village of Long Grove

Program Details

Coverage: Equipment Breakdown
Carrier: Travelers Property Casualty Co of America
Policy Period: 12/31/2014 to 12/31/2015

The following is a general summary of the Insuring Agreement. Refer to actual policy form for complete terms and conditions.

Coinsurance or Agreed Amount:

DESCRIPTION	AGREED AMOUNT	COINSURANCE %
Applies	Yes	N/A

DESCRIPTION	LIMIT
Equipment Breakdown	\$8,088,753

Deductibles/SIR:

COVERAGE	AMOUNT
Equipment Breakdown	\$1,000
Spoilage – Direct Damage and Time Element - Waiting Period	4 Hour
Utility Interruption - Waiting Period	4 Hour

DESCRIPTION	LIMIT
Boiler & Machinery Coverages include:	
-Refrigerant Contamination	Included
-Water Damage	Included
-Hazardous Substance – Direct Damage and Time Element	Included
-Ordinance or Law	Included
-Electronic Data or Media	Included
-Dependent Property	Included
-Off Premises Portable Equipment	Included
-Unnamed Locations	Included
-Business Interruption:	
-Business Income “Period of Restoration” Extension	365 days
-Extra Expense	Included
-Extra Expense “Period of Restoration” Extension	365 days
-Spoilage – Direct Damage and Time Element	Included
-Civil Authority	3 weeks/100 miles

Village of Long Grove

Program Details (Cont.)

DESCRIPTION	LIMIT
-Newly Acquired Locations	Included-365 days
-Utility Interruption	Included
-Unintentional Error in Description of Location	Included
-Expediting Expenses	Included
-Buried Pressure Vessels and Piping	Included
-Green Coverage Enhancements :	
-Up to an Additional	\$1,000,000
-Property Damage	5%
-Business Income Extra Expense Days	30 days
-Fungus, Wet Rot, and Dry Rot – Property Damage	\$100,000
-Fungus, Wet Rot, and Dry Rot – Time Element	60 days
Coverage Enhancements:	
-New Generation Valuation	Included
-Jurisdictional Inspections	Included
-Joint Loss Agreement	Included
-Claims Data Expense	\$25,000

Valuations:

DESCRIPTION	LIMITATIONS
Replacement Cost	Equipment Breakdown
Actual Loss Sustained	Business Income
Cost to research, replace, recreate or restore and reprogram	Media and Electronic Data

Endorsements include, but are not limited to:

DESCRIPTION
TRIA Act 2002
Green Coverage Enhancements
IL Changes

Exclusions include, but are not limited to:

DESCRIPTION
Fire
Earthquake
Flood

Village of Long Grove

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Standard Property policy perils

Binding Requirements:

DESCRIPTION
Signed Client Authorization to bind

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Form Type:Per Occurrence
Coverage Enhancements: -Business Income Coinsurance Requirement – Suspended -Territory – The United States, its Territories and Possessions, Puerto Rico, and Canada -Terrorism Risk Insurance Act Of 2002 -Number of days for Notice of Cancellation or Nonrenewal – 90 days, except 20 days for nonpayment of premium, subject to state regulations -Three-year rate guarantee is included in this quote subject to 30% loss ratio
Increase in renewal premium is due to increase in total values to \$8,088,753.

Premium	\$1,464
----------------	----------------

ESTIMATED PROGRAM COST	\$1,464
-------------------------------	----------------

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

Minimum Premium: N/A

Village of Long Grove

Program Details

Coverage: Crime and Public Officials Bonds
Carrier: Citizens Insurance Company of America
Policy Period: 12/31/2014 to 12/31/2015

Form Type:

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

DESCRIPTION	LIMIT
Employee Theft (including Faithful Performance)	\$500,000
Forgery or Alteration	\$100,000
Inside the Premises – Theft Money and Securities	\$100,000
Inside the Premises – Robbery or Safe Burglary of Other Property	\$100,000
Outside the Premises	\$100,000
Computer Fraud	\$100,000
Funds Transfer Fraud	\$100,000
Money Orders and Counterfeit Paper Currency	\$10,000

Deductibles/SIR:

COVERAGE	AMOUNT
Employee Theft (including Faithful Performance)	\$2,500
Forgery or Alteration	\$1,000
Inside the Premises – Theft Money and Securities	\$1,000
Inside the Premises – Robbery or Safe Burglary of Other Property	\$1,000
Outside the Premises	\$1,000
Computer Fraud	\$1,000
Funds Transfer Fraud	\$1,000
Money Orders and Counterfeit Paper Currency	\$250

Endorsements include, but are not limited to:

DESCRIPTION
Illinois Changes
Add Faithful Performance of Duty
Include Treasurer or Tax Collector

Village of Long Grove

Program Details (Cont.)

Exclusions include, but are not limited to:

DESCRIPTION
Government Action Exclusion
Nuclear Hazard
Pollution
War and Military Action

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Coverages include, but are not limited to: •Commercial Crime

Premium **\$547**

ESTIMATED PROGRAM COST **\$547**

Minimum Premium: N/A

Village of Long Grove

Program Details

Coverage: Workers Compensation
Carrier: Illinois Public Risk Fund
Policy Period: 1/1/2015 to 1/1/2016

Coverage:

DESCRIPTION	LIMIT	BASIS
Coverage A - Workers Compensation	Statutory	
Bodily Injury by Accident	\$3,000,000	Each Accident
Bodily Injury by Disease	\$3,000,000	Policy Limit
Bodily Injury by Disease	\$3,000,000	Each Employee

Deductibles/SIR:

COVERAGE	AMOUNT
None	-

States:

DESCRIPTION	STATE
States Covered:	Illinois

Endorsements include, but are not limited to:

DESCRIPTION
Voluntary Compensation
Broad Form All States For Employee Travel
Longshoremen's and Harbor Workers' Compensation Act Coverage
Maritime Coverage
Federal Employers' Liability Act Coverage

Exclusions include, but are not limited to:

DESCRIPTION
Any Obligation Imposed by a Workers Compensation or Occupational Disease Law or Any Similar Law
Bodily Injury to an Employee While Employed in Violation of Law
Bodily Injury Intentionally Caused by Insured
Assumptions under Contract
Stop Gap Employers Liability

Village of Long Grove

Program Details (Cont.)

Other Significant Terms and Conditions/Restrictions:

DESCRIPTION
Payroll increase: -1.0%
Actual Premium increase: -4.5 %

Premium	\$11,059
Fees	
3% Administrative fee:	\$332
Total Fees	\$332
ESTIMATED PROGRAM COST	\$11,391
Minimum Premium :	\$3,600
TRIA/TRIPRA PREMIUM (+ Additional Surcharges, Taxes and Fees as applicable)	INCLUDED

Subject to Audit: Annually

IPRF GRANT: \$630

Auditable Exposures:

STATE	CLASS CODE	DESCRIPTION	EXPOSURE	RATE PER \$100
Illinois	8810	Clerical	\$171,762	\$0.196
Illinois	9410	Municipal Employees	\$237,473	\$4.515

Proposal Disclosures

Village of Long Grove

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 is an outline of 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 contingent compensation if underwriting, profitability, volume or retention goals are achieved. Such goals are typically based on the total amount of certain insurance coverages placed by Gallagher with the insurance company and/or through the 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 some commission rates. These additional commissions, commonly referred to as "supplemental commissions" are known as of the effective date, but some insurance companies are paying 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.
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 was utilized in the placement of a client's account, the facility may have earned and retained customary brokerage commission or fees for its work.
5. Gallagher assists its customers in procuring premium finance quotes and unless prohibited by law may earn compensation for this 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 customers. In order

Village of Long Grove

Proposal Disclosures (Cont.)

to achieve these goals, we gather and analyze data about our customers and their insurance coverage. This data and the resulting analytical tools help us better understand the current marketplace, more accurately predict future trends and offer tailored solutions to our customers. The 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 send an e-mail to Compensation_Complaints@ajg.com or send a letter to:

Compliance Officer
Arthur J. Gallagher & Co.
Two Pierce Place, 20th Floor
Itasca, IL 60143

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 most recent legislation eliminated the distinction between foreign and domestic acts of terrorism, a number of lines of coverage excluded under the TRIEA legislation 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. The Terrorism Risk Insurance Program Reauthorization Act (TRIPRA) includes a \$100 billion cap on insurers' aggregate liability.

TRIPRA is set to expire on December 31, 2014. There is no certainty of extension, thus the coverage provided by your insurers may or may not extend beyond December 31, 2014. In the event you have loan covenants or other contractual obligations requiring that TRIA/TRIPRA be maintained throughout the duration of your policy period, we recommend that a separate "Stand Alone" terrorism policy be purchased to satisfy those obligations.

Property Estimator Disclaimer

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

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.

Client Signature Requirements

Village of Long Grove

Coverages For Consideration

Overview

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

Other Coverage Considerations

- Cyber Risk

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 Long Grove

Client Authorization to Bind Coverage

After careful consideration of Gallagher's proposal dated 12/3/2014, we accept the following coverage(s). Please check the desired coverage(s) and note any coverage amendments below:

		LINE OF COVERAGE	CARRIER
<input type="checkbox"/> Accept	<input type="checkbox"/> Reject	Property, General Liability and Employee Benefits Liability, Public Officials Errors & Omissions/ Employment Practices Offense Automobile Liability/Auto Physical Damage Umbrella	Underwriters at Lloyd's London (Underwriters at Lloyd's London)
<input type="checkbox"/> Accept	<input type="checkbox"/> Reject	TRIA Coverage	
<input type="checkbox"/> Accept	<input type="checkbox"/> Reject	Equipment Breakdown	Travelers Property Casualty Co of America (Travelers Group)
INCLUDED		TRIA Coverage	
<input type="checkbox"/> Accept	<input type="checkbox"/> Reject	Crime and Public Officials Bonds	Citizens Insurance Company of America (Hanover Insurance Companies)
N/A		TRIA Coverage	
<input type="checkbox"/> Accept	<input type="checkbox"/> Reject	Workers Compensation	Illinois Public Risk Fund (Illinois Public Risk Fund)
TRIA Cannot be rejected		TRIA Coverage	

Producer/ Insured Coverage Amendments and Notes:

Client Initials

Village of Long Grove

Client Authorization To Bind Coverage

Provide Quotations or Additional Information on the Following Coverage Considerations:

Other Coverage Considerations

Yes No Cyber Risk

Note: Selecting the "Reject All or Accept All" option will override any selections that you have made above

Reject All Accept All Coverages for Consideration

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: _____
Specify: owner, partner or corporate officer

Print Name

Date: _____

Appendix

Village of Long Grove

Claims Reporting By Policy

For all of your coverages within this proposal, unless otherwise noted:

- Immediately report any incident, claim, or suit to:

For Brit Package claims report to:

Carrier Name: Gallagher Bassett Services, Inc.
By Phone: (877) 332-2475
By Fax: (800) 748-6159

For Boiler & Machinery claims report to:

Carrier Name: Travelers Insurance Companies
By Phone: (800) 238-6225
By Fax: (877) QUICK-FAX (877) 784-5329

For Crime claims report to:

TPA or Carrier Name: Hanover Insurance Company
By Mail – Address: 440 Lincoln Street
Worcester, MA 01653
Attn: Bond Claims Department
By Phone: (630) 521-8419

For Workers Compensation claims report to:

TPA or Carrier Name: Illinois Public Risk Fund
By Phone: (888) 532-6981
By Fax: (888) 223-1638
Website: iprf.com

- If notice of incident, claim, or suit is received, refer to the policy conditions clause “Duties in the event of.”

Village of Long Grove

Bindable Quotations & Compensation Disclosure Schedule

Client Name: Village of Long Grove

COVERAGE(S)	CARRIER NAME(S)	ESTIMATED ANNUAL PREMIUM ¹	COMM. % OR FEE ²	WHOLESALE, MGA OR INTERMEDIARY		
				NAME ³	COMMISSION % / FEE \$ ⁴	AJG OWNED? YES/NO
Property / General Liability and Employee Benefits Liability / Public Officials Errors & Omissions/Employment Practices Offense	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$15,957	0 %	N/A		
Automobile Liability/Auto Physical Damage	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$387	0 %	N/A		
Umbrella	Underwriters at Lloyd's London (Underwriters at Lloyd's London)	\$3,554	0 %	N/A		
Equipment Breakdown	Travelers Property Casualty Co of America (Travelers Group)	\$1,464	0 %	RPS	10 %	Yes
Crime and Public Officials Bonds	Citizens Insurance Company of America (Hanover Insurance Companies)	\$547	10 %	AJG – Bond Dept	10 %	Yes
Workers Compensation	Illinois Public Risk Fund (Illinois Public Risk Fund)	\$11,391	10 %	Boyle, Flagg and Seamon, Inc. (BF&S Insurance)	3 %	No
AJG Service Fee			\$3,213			

Village of Long Grove

Bindable Quotations & Compensation Disclosure Schedule (Cont.)

TRIA Premium of \$469 is not included in the above premiums as TRIA was rejected on expiring program. If TRIA is purchased, the above premiums will increase as follows: Property: \$294 / General liability: \$72 / Umbrella: \$103.

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

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 LONG GROVE

BRIT - Statement of Values 2014/2015 Renewal

LOC	BLDG	ADDRESS DESCRIPTION	ZIP CODE	INSURED'S OCCUPANCY DESCRIPTION	BUILDINGS	CONTENTS	ADJ TIV
1	1	1150 Old McHenry Rd	60047	Bronze Statue	\$50,000	\$0	\$50,000
2	1	3110 RFD	60047	Storage Shed	\$8,790	\$1,000	\$9,790
2	2	3110 RFD	60047	Village Office	\$412,963	\$76,000	\$488,963
3	1	Downtown	60047	Parking Lot & Lights	\$3,000,000	\$0	\$3,000,000
4	1	IL 83 Robert Parker Coffin Rd	60047	Water Well/Water Storage & Bldg.	\$3,600,000	\$0	\$3,600,000

BRIT - Auto Schedule 2014/2015 Renewal

VEH#	YEAR	MAKE	MODEL	VIN	CLASS CODE	PHYSICAL DAMAGE COVER	COST NEW	COMP DEDUCTIBLE	COLLISION DEDUCTIBLE
1	2004	Wells Cargo	Trailer	5546	68499	Comp & Collision	\$5,000	\$500	\$500
2	2011	Teske	Trailer	5547	68499	Comp & Collision	\$2,000	\$500	\$500

Illinois Public Risk Fund's Grant Program

Village of Long Grove

The Illinois Public Risk Fund has reserved

\$630*

****Congratulations***

***Your organization has qualified for a
Preferred Loss Ratio Grant of \$105.00 which is
included in the above amount.***

Please visit www.iprf.com for additional information and the
Grant Application.

Grant deadline is December 1, 2015

(Subject to the programs terms and conditions)

Compensation Agreement

Village of Long Grove & Arthur J Gallagher Risk Management Services, Inc.

THIS COMPENSATION AGREEMENT is made and entered into and effective the 31st day of December, 2014 ("Effective Date") by and between VILLAGE OF LONG GROVE, an IL Corporation ("Client"), and ARTHUR J. GALLAGHER RISK MANAGEMENT SERVICES, INC., an IL corporation ("Gallagher").

I. TERM AND TERMINATION

This Agreement shall commence on the Effective Date for a term of one (1) year and shall automatically renew on the first anniversary of the Effective Date and annually thereafter for additional one- (1) year terms but may be terminated by either party at any time upon thirty (30) days prior written notice.

II. OBLIGATIONS OF GALLAGHER

Gallagher will provide the services set out on Exhibit A attached hereto (collectively, the "Services") to Client. If the Services include the placement of insurance coverages, Gallagher will use its commercial best efforts to secure such insurance coverages on Client's behalf. In the event an insurance company cancels or refuses to place such insurance coverages, Gallagher will use its commercial best efforts to obtain the coverage from another insurance company.

III. OBLIGATIONS OF CLIENT

Client shall remunerate Gallagher its usual and customary brokerage commission for the Services. In addition to or in lieu of commission, Client shall pay Gallagher an annual fee of \$3,213 for the Services, which such fee may be revised at the time of renewal of this Agreement by the execution of an amendment to this Agreement signed by the parties hereto. If work is required to be performed in addition to the Services, Client agrees to compensate Gallagher for such additional work at its usual and customary rates. So long as the terms and conditions of the Services are substantially similar and Gallagher's performance is acceptable, in subsequent years the annual fee shall be increased 3.5% over the prior year, and shall be payable and earned as provided herein.

IV. DISCLOSURES

A. In addition to such fees and commissions provided herein, Gallagher may also receive investment income on fiduciary funds temporarily held by it, such as premiums or return premiums. Other parties, such as excess and surplus lines brokers, wholesalers, reinsurance intermediaries, underwriting managers, captive managers and similar parties, some of which may be owned in whole or in part by Gallagher's corporate parent, may earn and retain usual and customary commissions and fees in the course of providing insurance products to clients. Gallagher may also participate in contingent and supplemental commission arrangements with insurance companies. Contingent commission arrangements provide for additional contingent compensation if underwriting, profitability, volume or retention goals are achieved. Such goals are typically based on the total amount of certain insurance coverages placed by Gallagher with the insurance company, not on an individual policy basis. Supplemental commissions, unlike contingents, are known at the effective date of the policy, but are typically paid later and apart from when usual and customary commission

is paid. Any such fees or commission will not constitute compensation to Gallagher under Section III. above.

- B. Gallagher's fees under this Agreement shall be fully earned on the execution of this Agreement (and any renewal thereof), and payable on invoicing. Client is responsible for payment of premiums for all insurance placed by Gallagher on its behalf. If any amount is not paid in full when due, including premium payments to insurance companies, that nonpayment will constitute a material breach of this Agreement that will allow Gallagher to immediately terminate this Agreement, at its option, without notice to Client.
- C. Where applicable, insurance coverage placements which Gallagher makes on Client's behalf, may require the payment of federal excise taxes, surplus lines taxes, stamping or other fees, to the Internal Revenue Service (federal), various state(s) departments of revenue, state regulators, boards or associations. In such cases, Client is responsible for the payment of such taxes and/or fees, which will be identified separately by Gallagher on invoices covering these placements. Under no circumstances will these taxes or other related fees or charges be offset against the amount of Gallagher's brokerage fees or commissions referred to herein.
- D. Gallagher will be operating only as Client's broker, obtaining a variety of coverage terms and conditions to protect the risks of Client's enterprise. Gallagher will seek to bind those coverages based upon Client's authorization, however, Gallagher 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 Gallagher with questions on these or any other issues of concern.

V. LIMITATION OF LIABILITY

Gallagher's liability to Client, arising from any negligent acts or omissions of Gallagher, whether related to the Services provided hereunder or not, shall not exceed \$20 million in the aggregate. Without limiting the foregoing, Gallagher shall only be liable for actual damages incurred by Client, and shall not be liable for any indirect, consequential or punitive damages.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed on the date first written above.

ARTHUR J. GALLAGHER RISK
MANAGEMENT SERVICES, INC.

VILLAGE OF LONG GROVE

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

Exhibit A

Services

Perform risk management services, which Client may from time to time need or require. The services include:

A. Brokerage Placement Services

- Identify available marketplace coverages and program needs to insure and/or minimize risks
- Compile underwriting data and information to prepare market specifications
- Evaluate and analyze insurance quotations – each company reviewed for financial stability, solvency, and service record
- Negotiate with underwriters to achieve broadest coverages at best price
- Prepare proposal to explain coverages, limits, and exclusions
- Bind coverages and confirm placement
- Secure policies and review for accuracy

B. Administrative Services

- Marketing plan 120 days prior to renewal
- Prepare schedule of insurance
- Billing
- Certificates of Insurance
- Review audits and endorsements for correctness
- Establish insurance calendar “to do” list and schedule meetings
- Maintain market relationships
- Research new markets or coverage concepts and determine their applicability
- Instruct accounting personnel of procedures for audit to make best use of record keeping
- Annual/Stewardship report
- Issue auto ID cards
- Premium and cost allocations to various departments
- Internal audit and management review
- Committee meetings

POLICYHOLDER DISCLOSURE



NOTICE OF TERRORISM INSURANCE COVERAGE - PACKAGE POLICY

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, 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 to 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, 2014, 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

\$ 366

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

Date Signed

Print Name and Title

Insured Name: VILLAGE OF LONG GROVE
3110 OLD MCHENRY ROAD
LONG GROVE, IL 60047

Policy Period: DEC. 31, 2014 to DEC. 31, 2015

POLICYHOLDER DISCLOSURE



NOTICE OF TERRORISM INSURANCE COVERAGE - UMBRELLA POLICY

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, 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, 2014, 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

\$ 103

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

Date Signed

Print Name and Title

Insured Name: VILLAGE OF LONG GROVE
3110 OLD MCHENRY ROAD
LONG GROVE, IL 60047

Policy Period: DEC. 31, 2014 to DEC. 31, 2015

A. OFFER OF UNINSURED/UNDERINSURED MOTORIST COVERAGE (UM/UIM COVERAGE)

Carrier: Underwriters at Lloyd's, London

Insurance Company indicated above hereby offers to provide UM/UIM coverage in limits equal to the automobile motor vehicle liability coverage limits of the policy number indicated below.

B. EXPLANATION OF UM/UIM COVERAGE

Uninsured Motorist Coverage provides protection for bodily injury, sickness or disease, including death, under provisions approved by the applicable state Department or Bureau of Insurance for the protection of insureds hereunder who are legally entitled to recover from owners or operators of uninsured motor vehicles because of bodily injury, sickness or disease, including death, suffered by any person insured under that coverage in the policy to which this form references.

Underinsured Motorist Coverage provides protection for insureds under that coverage in the policy for bodily injury, sickness, disease, including death, suffered by any person insured under the policy to which this form references, where the limits of coverage available for payment to the insured under all insurance policies covering persons liable to the insured are less than the limits for the insured's uninsured motorist coverage.

Limitations on Coverage Uninsured Motorist and Underinsured Motorist coverage are subject to the limitations, conditions, and exclusions approved by the applicable state Department or Bureau of Insurance and the laws of the applicable state.

C. ACCEPTANCE/REJECTION OF UNINSURED/UNDERINSURED (other than Commercial Umbrella)

Uninsured/Underinsured Motorist Coverage has been explained to me and I have read the foregoing explanation of UM/UIM coverage and I hereby:

Totally Reject UM/UIM coverage.

Accept UM/UIM coverage in limits equal to the limits of the motor vehicle liability coverage.

Wish to purchase limits of UM/UIM as indicated below:

<input type="checkbox"/>	\$35,000	<input type="checkbox"/>	\$100,000	<input type="checkbox"/>	\$500,000
<input type="checkbox"/>	\$50,000	<input type="checkbox"/>	\$250,000	<input type="checkbox"/>	\$1,000,000

D. COMMERCIAL UMBRELLA (where applicable) - Uninsured Motorists/Underinsured Motorists

Uninsured/Underinsured Motorists Coverage has been explained to me and I have read the foregoing explanation of UM/UIM coverage and I hereby:

Totally Reject all UM/UIM coverage under the Commercial Umbrella.

Wish to purchase Umbrella limits of UM/UIM as indicated below:

Limit	\$1,000,000	\$2,000,000	\$3,000,000	\$4,000,000	\$5,000,000
Premium	\$50,000	\$100,000	\$150,000	\$200,000	\$250,000
Selection	<input type="checkbox"/>				

The limit of liability indicated cannot be greater than the limit of liability afforded by the motor vehicle liability coverage under the commercial umbrella coverage.

E. UNINSURED/UNDERINSURED COVERAGE REJECTED OR ACCEPTED IN LESSER LIMITS NEED NOT BE REOFFERED UPON RENEWAL UNLESS REQUESTED IN WRITING.

I understand that the coverage selection or rejection indicated in Item C. above shall apply on policy(ies) in effect at the time this form is executed and all future renewal policies until the carrier is notified in WRITING of any changes. If I sign below, and/or pay any premium, I have evidenced my actual knowledge and understanding of the availability of these benefits and limits as well as the benefits and limits you have selected.

FRAUD WARNING: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

The signature written below must be executed by a duly authorized representative of the Named Insured and applicant listed within this form.

For the purposes of this application, a represented entity (as listed under the Named Insured(s) or Applicant(s)) is defined as a public entity that the individual authorized with signing this application represents. The signing individual is a public official, employee or other representative authorized to enter into contracts on the entity's behalf.

Policyholder / Applicant's Signature

Date Signed

Print Name and Title

Insured Name: VILLAGE OF LONG GROVE
3110 OLD MCHENRY ROAD
LONG GROVE, IL 60047

Policy Period: DEC. 31, 2014 to DEC. 31, 2015
Policy Number: