

**Prepared for:**

***(9/1/16 - 9/1/17)***

Presented by:

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Agency Personnel/Service Team

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| Loc. # | Bldg. # | Description | Address | City | State | Zip |
| --- | --- | --- | --- | --- | --- | --- |
| 00001 | 00001 | Manufacturing | 2365 Research Dr. | Jackson | MI | 49203 |

* Named Insured:



Coverage Form Used

|  |  |
| --- | --- |
| Coverage Type | Commercial General Liability |
| Occurrence/Claims Made | Occurrence |

| Coverage | Limit | Deductible | Deductible Basis |
| --- | --- | --- | --- |
| General Aggregate | $2,000,000 |  |  |
| Products/Completed Ops Aggregate | $2,000,000 |  |  |
| Personal & Advertising Injury | $1,000,000 |  |  |
| Each Occurrence | $1,000,000 |  |  |
| Fire Damage | $300,000 |  |  |
| Medical Expense | $10,000 |  |  |
| Employee Benefits | $1,000,000 | $1,000 | Per Claim |

|  |  |
| --- | --- |
|  |  |
| ****Premises and Operations | ****Host Liquor Liability |
| ****Products and Completed Operations | ****Broad Form Property Damage |
| ****Independent Contractors | ****Incidental Medical Malpractice |
| ****Personal Injury | ****Non-Owned Watercraft (under 26 feet) |
| ****Advertising Injury | ****Limited Worldwide Products |
| ****Fire Damage Liability (Rented Premises) | ****Medical Expenses Incurred By Others |
| ****Blanket Contractual Liability | ****Employees as Additional Insureds |

Commercial General Liability Schedule of Hazards

| Loc. # | Classification | Class Code | Premium Basis | Exposure |
| --- | --- | --- | --- | --- |
| 00001 | Machinery/Machinery Parts Manufacturing | 56652 | Sales | $2,500,000 |
| 00001 | Tool Manufacturing – Accessories | 59781 | Sales | $2,500,000 |
| 00001 | Blanket Additional Insured |  |  |  |

**General Liability Ultra Plus Endorsement**

|  |  |
| --- | --- |
| Additional Insureds:  Manager or Lessor of Premise, Mortgagee, Assignee or Receiver, Owners or Other Interests from Whom Land has Been Leased, Lessor or Leased Equipment, State, Municipality, Govermental Agency of Subdivision of other Political Subdivision, Controlling Interest, Co-Owner of Insured Premise & Vendors | Included |
| Expected or Intended Injury of Damage | Included |
| Knowledge of Occurrence | Included |
| Fire Legal Liability | $300,000 |
| Medical Payments | $10,000 |
| Mobile Equipment Redefined | Included |
| Newly Formed of Acquired Organizations, Parternship or Limited Liability Company | Included Until Next Anniversary Date |
| Who is an Insured – Amendment | Included |
| Non-Owned Watercraft – max 51 feet | Included |
| Unintentional Omission or Unintentional Error or Disclosure | Included |
| Liberalization Clause | Included |
| Incidental Medical Malpractice | Included |
| Per Project and Per Location Aggregates | Included |
| Mental Anguish as Part of Bodily Injury | Included |
| Supplemental Payments – Increased Limits  Bail Bonds  Loss of Earnings | $3,000  $1,000 |



Subject of Insurance

| Loc. # | Sub of Insurance | Limits | Cause of Loss | Ded. | Coins % | Valuation |
| --- | --- | --- | --- | --- | --- | --- |
| 00001 | Building | $2,240,000 | Special | $2,500 | 80% | Agreed Value |
| 00001 | Business Personal Property | $2,086,880 | Special | $2,500 | 80% | Agreed Value |
| 00001 | BI w/o Extra Expense | $1,000,000 | Special | 24 hours |  | 1/6 Monthly Limit |
| 00001 | Equipment Breakdown | Included |  |  |  |  |

* **Utility Services – Time element $25,000 – DIrect Damage Overhead transmission and distribution lines - $25,000**
* **premier choice Property ENhancement**

**Abbreviations Defined**

Co-Ins % = Coinsurance Percentage

AV = Agreed Value Valuation

Blkt = Blanket Coverage

ALS = Actual Loss Sustained

ACV = Actual Cash Value

**Premier Choice Property Enhancement**

|  |  |
| --- | --- |
| Accounts Receivable | $100,000 |
| Brands & Labels | $25,000 or the BPP Limit of Described Premise, whichever is less |
| Business Personal Property – Seasonal Increase | 25% |
| Broadened Premises Boundary | $100,000 |
| Consequential Loss to Stock | $50,000 |
| Debris Removal | $100,000 |
| Discharge from Sewers, Drains and Sumps | $10,000 |
| Computer Equipment Including Electronic Data | $50,000 |
| Laptop | $5,000 |
| Employee Theft | $50,000 |
| Expediting Expense | $50,000 |
| Fine Arts at Market Value | $25,000 |
| Fire Department Service Charge | $25,000 |
| Fire Protection Equipment Recharge | $25,000 |
| Forgery or Alteration | $25,000 |
| Foundations, Underground Pipes, Flues or Drains | Included in the Building Limit of the Described Premises |
| Leasehold Interest – Improvements and Betterments | $25,000 |
| Loss Data Preparation Cost | $25,000 |
| Lost Key Consequential Loss | $25,000 |
| Money and Securities on Premise | $25,000 on Premise - $15,000 Off Premise |
| Money Orders and Counterfeit Money | $25,000 |
| Newly Acquired or Constructed Property | 180 Days Reporting |
| Building and/or Business Personal Property | $2,000,000 |
| Ordinance or Law  Undamaged Portion of Building  Demolition Cost and Increased Cost of Construction | Included in Building Limit of the Described  $100,000 |
| Outdoor Property  Per Tree, Shrub or Plant Sublimit | $50,000  $1,000 |
| Outdoor Signs | $25,000 |
| Personal Effects and Property of Others | $25,000 |
| Pollutant Clean-up & Removal | $50,000 |
| Preservation of Property | 90 Days |
| Property in the Care, Custody and Control of Salesperson | $15,000 |
| Property Off-Premises and in Transit | $50,000 |
| Reward Payment | $25,000 |
| Spoilage | $25,000 |
| Temporary Relocation of Property | $50,000 |
| Tenants Exterior Building Glass | Included in the BPP Limits of Described Premise |
| Theft Damage to Leased Building | $15,000 |
| Theft of Patterns, Dies, Molds and Forms | Included in the BPP Limits of the Described Premise |
| Utility Services – Direct Damage | $25,000 |
| Valuable Papers | $100,000 |
| Theft of Furs, Jewelry, Watches, Semiprecious Metals | $10,000 |



Coverages/Limits

| Coverage Description | Limits | Ded. | Type |
| --- | --- | --- | --- |
| Combined Single Limit | $1,000,000 |  |  |
| PIP-Personal Injury Protection | Statutory |  |  |
| PIP | $1,000,000 |  |  |
| Uninsured Motorist | $1,000,000 |  |  |
| Underinsured Motorist | $1,000,000 |  |  |
| Broadened Collision |  | $1,000 | Per Claim |
| Comprehensive |  | $1,000 | Per Claim |
| Property Damage Buy Back | $1,000 |  |  |
| Hired & Non-Owned Auto Liability | $1,000,000 |  |  |

* Platinum Auto Endorsement Included – Additional Insured Employees, Additional Insured Automatic with Written Contract Primary and Non-Contributory Wording Included, Lease Gap Coverage Included, Glass Deductible Waived when Repaired Instead of Replaced, Hired Physical Damage $100,000, Waiver of Subrogation Included

Vehicle Schedule

| Veh. # | Year | Make | Model | VIN | Liability | Comprehensive | Collision |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 00001 | 2004 | Chevrolet | Silverado | 1GCEC14X54Z251933 | X |  |  |
| 00002 | 2003 | Chrysler | 300M | 2C3HE66G53H577011 | X |  |  |
| 00003 | 2012 | Ford | Flex | 2FMGK5DC2CBD13057 | X | $1,000 | $1,000 |
| 00004 | 2012 | Chevrolet | Impala | 2G1WG5E34C1249280 | X | $1,000 | $1,000 |
| 00005 | 2014 | Chevrolet | Impala | 2G1WB5E32E1140091 | X | $1,000 | $1,000 |
| 00006 | 2013 | Chevrolet | Malibu | 1G11C5SA7DF134949 | X | $1,000 | $1,000 |

Drivers Schedule

| Driver # | Name | Date of Birth | DL Number | License State |
| --- | --- | --- | --- | --- |
| 0001 | John Grugel | 7/30/1955 | G624435115597 | MI |
| 0002 | Gary Hackworth | 5/19/1959 | H268271155379 | MI |
| 0003 | Matthew Atwood | 5/14/1970 | A330589887366 | MI |
| 0004 | John Hockaday | 07/18/1967 | H230429760567 | MI |



Part 2 Employers Liability Information

|  |  |
| --- | --- |
| Coverage | WC & Employer's liability |
| Each Accident | $5,000,000 |
| Disease-Policy Limit | $5,000,000 |
| Disease-Each Employee | $5,000,000 |

Rating Information

| State | Loc. Number | Class Code | Categories, Duties, Classifications | Rating Basis | Rate Per $100 |
| --- | --- | --- | --- | --- | --- |
| MI | 00001 | 3095 | Tool Manufacturing | $275,000 | $1.58 |
| MI | 00001 | 8810 | Clerical | $1,070,000 | $ .18 |
| MI | 00001 | 8742 | Outside Salesperson | $200,000 | $ .34 |
| MI | 00001 | 5191 | Office Machine Inst. | If Any | $ .98 |
| MI | 00001 | 3628 | Machinery Mfg. | $525,000 | $2.65 |
| MI | 00001 | 3724 | Millwright Work | If Any | $6.41 |

Partners, Officers Information

| Name | Date of Birth | Title | Ownership percent | Duties | Incl/Excl | Class Code | Remuneration |
| --- | --- | --- | --- | --- | --- | --- | --- |
| John Cross | 10/17/1946 | Treasurer |  |  | Include |  |  |
| Robert Rooney | 1/27/1970 | President |  |  | Include |  |  |

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**Flood Policy**

Property Location:

2365 Research Dr.

Jackson, MI 49203

|  |  |  |
| --- | --- | --- |
| **Coverage** | **Limit** | **Deductible** |
| Building | $500,000 | $1,250 |
| Contents | $500,000 | $1,250 |
| Lowest Ground Floor Only Above  Ground Level |  |  |

* Mortgagee: Fifth Third Bank

Management Liability

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Coverages** | **Primary** | **Excess** | **Limits** | **Retention** |
| Directors and Officers | [X ] | [ ] | Per Claim $1,000,000 | $10,000 |
| Aggregate $1,000,000 |
|  | | | | |
| Employment Practices Liability | [X ] | [ ] | Per Claim $1,000,000 | $10,000 |
| Aggregate $1,000,000 |
|  | | | | |
| EPLI 3rd Party Claim Coverage | [X ] | [ ] | Per Claim $1,000,000 | $10,000 |
| Aggregate $1,000,000 |
|  | | | | |

* Investigation Expense Limit - $100,000 – For Private Company Directors and Officers Liability Claims
* Supplemental Personal Indemnification Coverage - $500,000 – For Private Company Directors and Officers Liability Claims
* Global Coverage Compliance Endorsement Included
* **Renewal quote received from Travelers - $6,270.00**
* **Optional quote – Citizens $5,409.00**

Commercial Crime

|  |  |  |
| --- | --- | --- |
| **Coverage** | **Limits** | **Deductible** |
| **Fidelity:**  Employee Theft  ERISA  Employee Theft of Client Property | $500,000  $500,000  Not Covered | $5,000  $5,000 |
| **Forgery or Alteration** | $500,000 | $5,000 |
| **On Premise** | $500,000 | $5,000 |
| **In Transit** | $500,000 | $5,000 |
| **Money Orders and Counterfeit Money** | $500,000 | $5,000 |
| **Computer Crime:**  Computer Fraud  Computer Program and Electronic Data Restoration Expense | $500,000  $500,000 | $5,000  $5,000 |
| **Funds Transfer Fraud** | $500,000 | $5,000 |
| **Personal Accounts Protection**:  Personal Accounts Forgery or Alteration  Identity Fraud Expense  Reimbursement | $500,000  $25,000 | $5,000  $0 |
| **Claims Expense** | $5,000 | $0 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Description Of Coverage** | **Carrier** | **Expiring Premium** | **2016-17 Quote** |
| **Commercial Package – 1 Year Term**  **9/1/16 – 9/1/17** | **Continental Western Group** | $11,154.00 | $7,674.00 |
| **Commercial Auto – 9/1/16 – 9/1/17** | **Continental Western Group** | $ 6,315.00 | $4,506.00 |
| **Workers Compensation**  ***Dividend Credit 2016 $-2363*** | **MTM** | $13,302.00 | $10,530.00 $8,530.00 w/ Dividend |
| **Crime – 3 Year Term**  **9/1/14 - 9/1/17** | **Travelers** | $ 1,461.00 | $ 1,461.00 |
| **Management Liability**  ***Optional Quote– Hanover*** | **Travelers** | $ 6,263.00 | $ 5,409.00 |
| **Flood – 1 Year Term**  **4/8/15 – 4/8/16** | **Hartford** | $ 3,188.00 | $ 3,323.00 |
| **Total Estimated Annual Premium\*** |  | **$41,683.00** | **$32,903.00**  **$30,903.00 w/ Dividend Credit** |

**Premium Summary Page:**



