



PRESENTED BY
TEGELER & ASSOCIATES
 PO BOX 829
 PINEDALE, WY 82941

PROPOSED ON 05/01/2025 FOR
CITY OF LANDER
 240 LINCOLN ST
 LANDER, WY 82520

On behalf of **TEGELER & ASSOCIATES** and **The Travelers Companies, Inc.** and its affiliates, we appreciate the opportunity to provide **CITY OF LANDER** with the following policy proposal.



Travelers Risk Control: Our Expertise is Your Advantage

Travelers Risk Control is an innovative provider of cost-effective risk management services and products. As one of the largest Risk Control departments in the industry, our scale allows the right resource at the right time to meet customer needs. For over 110 years, our loss prevention professionals have assisted agents, brokers and customers across the country and around the world.

<https://www.travelers.com/risk-control>



Claim Services:

Travelers has over 11,000 highly trained Claim professionals located across the U.S. Our local field representatives are supported by teams of dedicated customer service, catastrophe response, legal, medical, investigative, engineering, and large loss experts. Claims can be complex and expensive. We'll help you manage claims to control your total risk-related costs.

<https://www.travelers.com/claims>

Meet your Travelers team

General

Overall Account

Kristen Brown
Account Executive
KNBROWN@travelers.com
210-525-3905

Policy Services

Brandon Karges
Operations Account Specialist
BKARGES@travelers.com
612-968-2572

To report, ask a question or discuss a claim please call 1-800-238-6225. A Claim Customer Service Representative is available 24 hours a day, 7 days a week to take the first notice of loss or provide assistance on any existing claim.

Your policies

Commercial Package Program - Simp. Occ.

| | |
|-------------------------|--|
| Policy Number | H-630-9K508583-TIL-25 |
| Effective | 07/01/2025 – 07/01/2026 |
| Insuring Company | TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA |

Auto Liability

| | |
|-------------------------|---------------------------------|
| Policy Number | H-BA-9K508583-IND-25 |
| Effective | 07/01/2025 – 07/01/2026 |
| Insuring Company | THE TRAVELERS INDEMNITY COMPANY |

Auto Physical Damage

| | |
|-------------------------|---------------------------------|
| Policy Number | H-BA-9K508583-IND-25 |
| Effective | 07/01/2025 – 07/01/2026 |
| Insuring Company | THE TRAVELERS INDEMNITY COMPANY |

Locations schedule

630 - 9K508583 – Commercial Package Program - Simp. Occ.

| LOC/BLDG | DESCRIPTION | ADDRESS |
|----------|-------------------------|---|
| 1/1 | CITY HALL | 240 LINCOLN, LANDER, WY 82520 |
| 2/2 | CHAMBER COMMERCE | 160 N 1ST ST, LANDER, WY 82520 |
| 2/3 | NEW CHAMBER BLDG | 100 N 1ST ST, LANDER, WY 82520 |
| 2/4 | LANDER LIVE STAGE | CITY PARK 405 FREMONT ST, LANDER, WY 82520 |
| 3/5 | COMMUNITY CEN | 950 BUENA VISTA, LANDER, WY 82520 |
| 4/6 | GOLF STORAGE | BUENA VISTA AND WIND RIVER, LANDER, WY 82520 |
| 4/7 | CART STORAGE | BUENA VISTA AND WIND RIVER, LANDER, WY 82520 |
| 5/8 | AIRPORT TERMN | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 5/9 | WEATHER OBSER | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 5/10 | HANGAR 1 | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 5/11 | HANGAR 2 | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 5/12 | HANGAR 3 | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 5/13 | CITY HANGAR | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 5/14 | CITYHANGARREN | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 5/15 | AVIAT FUELTKN | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 6/16 | P AND R OFFICE | 405 FREMONT ST, LANDER, WY 82520 |
| 6/17 | GAZEBO | 405 FREMONT ST, LANDER, WY 82520 |
| 6/18 | MAINT BLDG | 405 FREMONT ST, LANDER, WY 82520 |
| 6/19 | RESTROOM 1 | 405 FREMONT ST, LANDER, WY 82520 |
| 6/20 | RESTROOM 2 | 405 FREMONT ST, LANDER, WY 82520 |
| 6/21 | PICNIC SHELTE | 405 FREMONT ST, LANDER, WY 82520 |
| 6/22 | FIREMANSPICNI | 405 FREMONT ST, LANDER, WY 82520 |
| 6/23 | TENNIS COURT | 405 FREMONT ST, LANDER, WY 82520 |
| 6/24 | SPORTS BOX | 405 FREMONT ST, LANDER, WY 82520 |
| 7/25 | RESTROOMS | 300 LEEDY DR, LANDER, WY 82520 |
| 7/26 | PICNIC SHELTE | 300 LEEDY DR, LANDER, WY 82520 |
| 8/27 | PICNIC SHELTE | 738-798 N 8TH STREET, LANDER, WY 82520 |
| 8/28 | RESTROOMS | 738-798 N 8TH STREET, LANDER, WY 82520 |
| 8/29 | SKATE PARK | 738-798 N 8TH STREET, LANDER, WY 82520 |
| 9/30 | RESTROOMS | 320 BALDWIN CREEK RD, LANDER, WY 82520 |
| 11/32 | RESTROOMS | 1663 RODEO DRIVE, LANDER, WY 82520 |
| 11/33 | ANNOUNCERBOOTH | 1663 RODEO DRIVE, LANDER, WY 82520 |
| 12/34 | MAINTGARAGE | 130 GARFIELD ST, LANDER, WY 82520 |
| 13/35 | OFFICE | 805 MOUNT HOPE DRIVE, LANDER, WY 82520 |
| 13/36 | STORAGE | 805 MOUNT HOPE DRIVE, LANDER, WY 82520 |
| 14/37 | PUBLIC WORKS | 125 BUENA VISTA, LANDER, WY 82520 |
| 14/38 | WATER HOUSE | 125 BUENA VISTA, LANDER, WY 82520 |
| 14/39 | PUBLIC WORKS STORAGE | 125 BUENA VISTA, LANDER, WY 82520 |
| 15/40 | WATER TANK | 2843 SINKS CANYON RD, LANDER, WY 82520 |
| 15/41 | TREATMENT PLA | 2843 SINKS CANYON RD, LANDER, WY 82520 |
| 16/42 | WASTE WATER B | 100 INDUSTRIAL PARK RD N 2ND ST, LANDER, WY 82520 |
| 16/43 | DISINFECT BLD | 100 INDUSTRIAL PARK RD N 2ND ST, LANDER, WY 82520 |
| 17/44 | MAINTBLDG | 1390 BUENA VISTA DR, LANDER, WY 82520 |
| 18/45 | PRO SHOP | 1 GOLF COURSE RD, LANDER, WY 82520 |
| 18/46 | STORAGE | 1 GOLF COURSE RD, LANDER, WY 82520 |
| 19/47 | WATER TANK | 2796 SINKS CANYON RD, LANDER, WY 82520 |

| | | |
|-------|--------------------------------------|--|
| 20/48 | MAINT SHOP | 1390 BUENA VISTA DR, LANDER, WY 82520 |
| 20/49 | SALT SHED | 1390 BUENA VISTA DR, LANDER, WY 82520 |
| 21/50 | WATER BOOSTER | 1050 BUENA VISTA DR, LANDER, WY 82520 |
| 22/51 | SENIOR CENTER | 205 S 10TH ST, LANDER, WY 82520 |
| 23/52 | FIRE HALL | 430 GARFIELD ST, LANDER, WY 82520 |
| 24/53 | FIRE DEPT AND GOLF COURSE STORAGE | 1520 RODEO DRIVE, LANDER, WY 82520 |
| 25/54 | MAVEN LEASE | 1042 PRONGHORN DR, LANDER, WY 82520 |
| 26/55 | GAZEBO CENTENNIAL PARK | 215 MAIN ST, LANDER, WY 82520 |
| 27/56 | PUMP STATION | 1320 BISHOP RANDALL DR, LANDER, WY 82520 |
| 28/57 | NEW WATER TANK | 2751 SINKS CANYON RD, LANDER, WY 82520 |



Property coverage premium summary

Policy Number 630-9K508583

Coverages and limits of insurance – described premises

Insurance applies on a BLANKET basis only to a coverage or type of property for which a Limit of Insurance is shown below, and then only at the premises locations for which a value for such coverage or property is shown on the Statement of Values dated 4/23/2025 , or subsequently reported to and insured by us. For Insurance that applies to a specific premises location see Deluxe Property Coverage Part Schedule - Specific Limits

| BLANKET DESCRIPTION OF COVERAGE OR PROPERTY | LIMITS OF INSURANCE |
|---|---------------------|
| Building and Your Business Personal Property | \$65,855,988 |

Co-insurance provision

Coinsurance does not apply to Blanket Coverages shown above.

Valuation provision

Replacement cost (subject to limitations) applies to most types of covered property (See Valuation Loss Condition).

Additional covered property

| | LIMITS OF INSURANCE |
|---|---------------------|
| Personal Property at Undescribed Premises | |
| At any "exhibition" premises | \$50,000 |
| At any installation premises or temporary storage premises | \$50,000 |
| At any other not owned, leased or regularly operated premises | \$50,000 |
| Personal Property in Transit | \$50,000 |

Deluxe property coverage form - additional coverages & coverage extensions

The Limits of Insurance shown in the left column are included in the coverage form and apply unless a Revised Limit of Insurance or Not Covered is shown in the Revised Limits of Insurance column on the right. The Limits of Insurance apply in any one occurrence unless otherwise stated.

| | LIMITS OF INSURANCE | REVISED LIMITS OF INSURANCE |
|--|---------------------|-----------------------------|
| Accounts Receivable | | |
| At all described premises | \$50,000 | \$200,000 |
| In transit or at all undescribed premises | \$25,000 | \$100,000 |
| Appurtenant Buildings and Structures | \$100,000 | |
| Claim Data Expense | \$25,000 | |
| Covered Leasehold Interest – Undamaged Improvements & Betterments | | |
| Lesser of Your Business Personal Property limit or: | \$100,000 | |
| Debris Removal (additional amount) | \$250,000 | |
| Deferred Payments | \$25,000 | |
| Duplicate Electronic Data Processing Data and Media | \$50,000 | |
| Electronic Data Processing Data and Media | | |
| At all described premises | Included* | |
| Employee Tools | | |
| In any one occurrence | \$25,000 | |
| Any one item | \$2,500 | |
| Expediting Expenses | \$25,000 | |
| Extra Expense | \$25,000 | |
| Fine Arts | | |
| At all described premises | \$50,000 | \$100,000 |
| In transit | \$25,000 | |
| Fire Department Service Charge | Included* | |
| Fire Protective Equipment Discharge | Included* | |
| Green Building Alternatives – Increased Cost Percentage 1% | | |
| Maximum amount – each building | \$100,000 | |
| Green Building Reengineering and Recertification Expense | \$25,000 | |
| Limited Coverage for Fungus, Wet Rot or Dry Rot – Annual Aggregate | \$25,000 | |
| Loss of Master Key | \$25,000 | |
| Newly Constructed or Acquired Property | | |
| Buildings - each | \$2,000,000 | |
| Personal Property at each premises | \$1,000,000 | |

*Included means included in applicable Covered Property Limit of Insurance

Deluxe property coverage form - additional coverages & coverage extensions

| | LIMITS OF INSURANCE | REVISED LIMITS OF INSURANCE |
|---|---------------------|-----------------------------|
| Non-Owned Detached Trailers | \$25,000 | |
| Ordinance or Law Coverage | \$250,000 | |
| Outdoor Property | \$25,000 | \$50,000 |
| Any one tree, shrub or plant | \$2,500 | \$5,000 |
| Outside Signs | | |
| At all described premises | \$100,000 | |
| At all undescribed premises | \$5,000 | |
| Personal Effects | \$25,000 | \$50,000 |
| Personal Property At Premises Outside of the Coverage Territory | \$50,000 | |
| Personal Property In Transit Outside of the Coverage Territory | \$25,000 | |
| Pollutant Cleanup and Removal – Annual Aggregate | \$100,000 | |
| Preservation of Property | | |
| Expenses to move and temporarily store property | \$250,000 | |
| Direct loss or damage to moved property | Included* | |
| Reward Coverage | | |
| 25% of covered loss up to a maximum of: | \$25,000 | |
| Stored Water | \$25,000 | |
| Theft Damage to Rented Property | Included* | |
| Undamaged Parts of Stock in Process | \$50,000 | |
| Valuable Papers and Records – Cost of Research | | |
| At all described premises | \$50,000 | \$250,000 |
| In transit or at all undescribed premises | \$25,000 | \$150,000 |
| Water or Other Substance Loss – Tear Out and Replacement Expense | Included* | |

*Included means included in applicable Covered Property Limit of Insurance

Deluxe business income (and extra expense) coverage form - described premises

PREMISES LOCATION NO.
ALL

BUILDING NO.
ALL

LIMITS OF INSURANCE

\$500,000

Rental Value: Included

Ordinary Payroll: Included

Deluxe business income - additional coverages and coverage extensions

The Limits of Insurance, Coverage Period and Coverage Radius shown in the left column are included in the coverage form and apply unless a revised Limit of Insurance, Coverage Period, Coverage Radius or Not Covered is shown under the column on the right. The Limits of Insurance apply in any one occurrence unless otherwise stated.

| | LIMITS OF INSURANCE, COVERAGE PERIOD OR COVERAGE RADIUS | REVISED LIMITS OF INSURANCE, COVERAGE PERIOD OR COVERAGE RADIUS |
|--|--|--|
| Business Income from Dependent Property | | |
| At Premises Within the Coverage Territory | \$100,000 | \$250,000 |
| At Premises Outside of the Coverage Territory | \$100,000 | |
| Civil Authority | | |
| Coverage Period | 30 days | |
| Coverage Radius | 100 miles | |
| Claim Data Expense | \$25,000 | |
| Contract Penalties | \$25,000 | |
| Extended Business Income | | |
| Coverage Period | 180 days | |
| Fungus, Wet Rot or Dry Rot – Amended Period of Restoration | | |
| Coverage Period | 30 days | |
| Green Building Alternatives – Increased Period of Restoration | | |
| Coverage Period | 30 days | |
| Ingress or Egress | \$25,000 | |
| Coverage Radius | 1 mile | |
| Newly Acquired Locations | \$500,000 | |
| Ordinance or Law - Increased Period of Restoration | \$250,000 | |
| Pollutant Cleanup and Removal – Annual Aggregate | \$25,000 | |
| Transit Business Income | \$25,000 | |
| Undescribed Premises | \$25,000 | |

Causes of loss – Earthquake – aggregate in any one policy year, for all losses covered under the Causes of loss – Earthquake endorsement, commencing with the inception date of this policy:

| | | AGGREGATE LIMITS OF INSURANCE |
|---|-------------|----------------------------------|
| 01. Applies at the following Building(s) numbered: | 01-30,32-57 | \$5,000,000 |

If more than one Annual Aggregate Limit applies in any one occurrence, the most we will pay is the highest involved Annual Aggregate Limit. The most we will pay during each annual period is the highest of the Annual Aggregate Limits shown.

Causes of loss – Broad Form Flood – aggregate in any one policy year, for all losses covered under the Causes of loss – Broad Form Flood endorsement, commencing with the inception date of this policy:

| | | AGGREGATE LIMITS OF INSURANCE |
|---|--|----------------------------------|
| 01. Applies at the following Building(s) numbered: | 01,05-15,25-26,35- 38,40-41,45-47,51- 52 | \$2,500,000 |
| 02. Applies at the following Building(s) numbered: | 02-03,34 | \$1,000,000 |

If more than one Annual Aggregate Limit applies in any one occurrence, the most we will pay is the highest involved Annual Aggregate Limit. The most we will pay during each annual period is the highest of the Annual Aggregate Limits shown.

EXCESS OF LOSS LIMITATION APPLIES – See Causes of Loss – Broad Form Flood endorsement.

Causes of loss – equipment breakdown DX T3 19

The insurance provided for loss or damage caused by or resulting from Equipment Breakdown is included in, and does not increase the Covered Property, Business Income, Extra Expense, and/or other coverage Limits of Insurance that otherwise apply under this Coverage Part.

| COVERAGE EXTENSION: | LIMITS OF INSURANCE | REVISED LIMITS OF INSURANCE |
|---------------------|---------------------|-----------------------------|
| Spoilage | | |

| | | |
|--|----------|-----------|
| | \$25,000 | \$250,000 |
|--|----------|-----------|

| LIMITATIONS: | LIMITS OF INSURANCE | REVISED LIMITS OF INSURANCE |
|-----------------------|---------------------|-----------------------------|
| Ammonia Contamination | | |
| Hazardous Substance | | |

| | | |
|--|----------|-----------|
| | \$25,000 | \$250,000 |
|--|----------|-----------|

| | | |
|--|----------|-----------|
| | \$25,000 | \$250,000 |
|--|----------|-----------|

All Coverage Property Damage Deductible

| | |
|-----------------------------------|----------|
| Direct Damage to Covered Property | \$10,000 |
|-----------------------------------|----------|

Business Income & Extra Expense

| | |
|---|----------|
| Business Income and Extra Expense loss or expense caused by physical damage to covered property | 72 Hours |
|---|----------|

Utility services

| | LIMITS OF INSURANCE |
|---|---------------------|
| Direct Damage - in any one occurrence (See Utility Services – Direct Damage endorsement) | \$50,000 |

Coverage is provided for the following:

Water Supply

Communication Supply

Power Supply

Coverage for Overhead Transmission Lines is: excluded.

Electronic Vandalism Limitation Endorsement DX T3 98

ELECTRONIC VANDALISM

LIMIT OF INSURANCE

Aggregate in any 12 month period of this policy:

\$10,000

Public Sector Services Additional Coverage Endorsements

LIMIT OF INSURANCE

Spoilage Coverage Extension DX T3 15

\$25,000

LIMIT OF INSURANCE

Sewer or Drain Backup Amendment DX T4 45

\$25,000

Public Entity Property Extensions DX T4 47

LIMIT OF INSURANCE

| | |
|---|-----------|
| Confiscated Property | \$100,000 |
| Street Lights – each item | \$25,000 |
| Street Lights – maximum per occurrence | \$250,000 |
| Street Signs – each item | \$25,000 |
| Street Signs – maximum per occurrence | \$250,000 |
| Traffic Signs and Lights – each item | \$25,000 |
| Traffic Signs and Lights – maximum per occurrence | \$250,000 |
| Stadium Lights – per occurrence | \$25,000 |
| Stadium Lights – maximum per occurrence | \$250,000 |

Deductibles

By Earthquake

| | PERCENTAGE | OCCURENCE |
|--|------------|-----------|
| 01. in any one occurrence, at the following Building(s) numbered: 001-030,032-057 | | \$25,000 |
| As respects Business Income Coverage a 72 hour deductible applies at all premises locations. | | |

By Flood

| | OCCURENCE |
|--|-----------|
| 01. At each of the following Building(s) numbered: 001,005-015,025-026,035-038,040-041,045-047,051-052 in any one occurrence | \$25,000 |
| As respects Business Income Coverage a 72 hour deductible applies at all premises locations. | |
| 02. At each of the following Building(s) numbered: 002-003,034 in any one occurrence | \$100,000 |
| As respects Business Income Coverage a 72 hour deductible applies at all premises locations. | |

By Windstorm or Hail

At the following described premises:

| PREMISES | BUILDINGS | |
|--|-----------|----------|
| LOCATION NO | NO | |
| ALL | ALL | |
| in any one occurrence: | | \$25,000 |
| As respects Business Income Coverage a 72 hour deductible applies at all premises locations above. | | |

To Utility Services

Direct Damage, in any one occurrence:

\$10,000

Business Income

As respects Business Income Coverage, for which no other deductible is stated above or in the coverage description, a 72 hour deductible applies.

Any Other Covered Loss

in any one occurrence:

\$10,000

Rating Basis

| | |
|---------------------------------|--------------|
| Total Rating Basis | \$66,355,988 |
| Building Rate | 0.149 |
| Business Personal Property Rate | 0.176 |
| Time Element Rate | 0.08 |
| Premium for Policy Period | \$103,673 |

Note: The Premium shown above includes the premium charged for Equipment Breakdown coverage. The premium for Equipment Breakdown coverage is \$4,283.
If you elect not to purchase Equipment Breakdown coverage, please contact your Account Executive and a revised quote without Equipment Breakdown coverage will be sent to you.



Inland Marine coverage premium summary

Policy Number 630-9K508583

Miscellaneous Property Coverage Form CM T2 39

COVERAGE AND LIMITS OF INSURANCE

Covered property consists of the following when indicated by an 'X' below:

☒ **Scheduled items:**

☒ As shown on the most current schedule on file with us. The amount shown on such schedule for each item is the limit of insurance applying to that item.

Total limit of insurance for all scheduled items: \$2,103,251

| COVERAGE EXTENSIONS | LIMITS OF INSURANCE |
|--|---------------------|
| Fire Protective Systems: | \$75,000 |
| Newly Acquired Property: | \$25,000 |
| Preservation Of Property Expense: | \$5,000 |
| Valuable Papers and Records: | \$50,000 |

| ADDITIONAL COVERAGES: | LIMITS OF INSURANCE |
|--|---------------------|
| Claim Data Expense: | \$5,000 |
| Debris Removal Increased Limit: | \$75,000 |
| Fire Or Police Department Service Charge: | \$25,000 |
| Pollutant Cleanup And Removal: | \$25,000 |
| Reward Coverage: | \$2,500 |

Deductible

Deductible applying to all covered loss or damage unless a more specific deductible for the covered loss is shown below or elsewhere in this proposal: \$1,000

Deductible applying to covered loss or damage caused by or resulting from Flood or Earthquake when indicated by an 'X' below:

☒ Flood Deductible \$50,000 or % subject to \$ minimum and \$ maximum

Actual Cash Value

The following Coinsurance applies when indicated by an 'X':

Premium

Minimum earned premium: None

CM T7 53 – Earth Movement Deductible

CM T7 56 – Earth Movement Limitation – Described Property Or Locations

CM T7 66 – Flood Limitation – Described Property Or Locations

Contractors Equipment Coverage Form CM T2 42

COVERAGE AND LIMITS OF INSURANCE

Covered Property

Coverage consists of the following when indicated by an 'X':

☒ **Scheduled Equipment**

☒ As shown on the most current schedule on file with us. The amount shown on such schedule for each item of equipment is the limit of insurance applying to that item.

Total limit of insurance for all Scheduled Equipment: \$2,114,499

☒ **Unscheduled Owned Equipment**

Total limit of insurance for all unscheduled owned equipment: \$175,000

Limit of insurance for any one unscheduled owned item of equipment: \$5,000

☒ **Unscheduled Equipment Owned By Others**

Limit of insurance for any one unscheduled item of equipment leased, rented, or borrowed from others: \$100,000

Total limit of insurance for all items of Equipment in any one Occurrence: \$2,389,499

Deductible

Deductible applying to all covered loss or damage indicated by an 'X' below unless a more specific Deductible for the covered loss or damage is shown elsewhere in this proposal:

☒ Dollar Deductible: \$1,000

Valuation and Coinsurance

Valuation

The following Valuation applies to the applicable Covered Property:

Scheduled Equipment:

Actual Cash Value Valuation applies unless replaced by the Optional Valuation indicated by an X'.

Unscheduled Owned Equipment:

Actual Cash Value Valuation applies unless replaced by the Optional Valuation indicated by an X'.

Equipment Owned By Others:

The amount for which you are legally liable, not to exceed Replacement Cost.

Coinsurance

The following coinsurance applies to Scheduled Items when indicated by an 'X':

☐ 100% ☐ 90% ☐ 80% ☒ No Coinsurance Applies

Premium

The following Premium options apply when indicated by an 'X':

☒ **Scheduled and Unscheduled Owned Equipment**

☒ Non Reporting
Premium \$7,532

☐ Premium Adjustment
Premium Base Values
Estimated Premium Base Amount
Annual Rate Per \$100
Inception Premium
Adjustment Rate Per \$100

☒ **Leased Or Rented From Others**

☒ Non Reporting
Premium \$370

☐ Premium Adjustment
Premium Base Values
Estimated Premium Base Amount
Inception Premium
Adjustment Rate Per \$100

Total Premium Due At Inception: \$7,902

Other Terms and Conditions

CM B0 97 - Contractors Equipment Supplemental Declarations

| COVERAGE EXTENSIONS | LIMIT OF INSURANCE |
|--|--------------------|
| Business Personal Property In Job Trailers: | \$10,000 |
| Document And Data Restoration Costs: | \$50,000 |
| Fire Protective Systems: | \$75,000 |
| Hauling Property Of Others: | \$100,000 |
| Newly Acquired Equipment - Per Item: | \$250,000 |
| Rental Costs: | |
| Any One Item: | \$5,000 |
| Any One Occurrence: | \$25,000 |
| Upgrades To Covered Property: | \$25,000 |

| ADDITIONAL COVERAGES | LIMIT OF INSURANCE |
|--|--------------------|
| Claim Data Expenses: | \$5,000 |
| Continuing Rental Payments: | |
| Any One Item: | \$5,000 |
| Any One Occurrence: | \$25,000 |
| Contract Penalty: | \$25,000 |
| Debris Removal Increased Limit: | \$75,000 |
| Employee Tools, Equipment And Clothing: | |
| Any One Item: | \$1,000 |
| Any One Employee: | \$2,500 |
| Any One Occurrence: | \$5,000 |
| Errors Or Unintentional Omissions: | \$100,000 |
| Expediting Expenses: | \$25,000 |
| Expendable Supplies: | \$10,000 |
| Fire Or Police Department Service Charge: | \$25,000 |
| Lost Warranty Or Service Contract: | \$10,000 |
| Pollutant Clean Up And Removal: | \$25,000 |
| Preservation Of Property Expense: | \$50,000 |
| Reward Coverage: | \$2,500 |
| Tracking System Deductible Waiver Amount: | \$10,000 |

CM B0 99 - Contractors Equipment Deductible Schedule

The following specific Deductible(s) apply to loss or damage to the type of property, or to loss or damage by the cause of loss, as indicated by an 'X' below:

☒ **Earth Movement Deductible:**

☒ Dollar Deductible: \$25,000

☒ **Flood Deductible:**

☒ Dollar Deductible: \$50,000

CM U3 52 – Flood Limitation – Described Property or Locations

| SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS | FLOOD OCCURRENCE LIMIT OF INSURANCE | FLOOD ANNUAL AGGREGATE LIMIT OF INSURANCE |
|---|--|--|
| ALL COVERED PROPERTY | 1,000,000 | 1,000,000 |

CM U3 67 – Earth Movement Limitation – Described Property or Locations

| SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS | OCCURRENCE LIMIT OF INSURANCE | ANNUAL AGGREGATE LIMIT OF INSURANCE |
|---|----------------------------------|--|
| ALL COVERED PROPERTY | 1,000,000 | 1,000,000 |

Gross Premium: \$16,021

Electronic Vandalism Limitation And Other Changes CM U6 17

| ELECTRONIC VANDALISM | LIMIT OF INSURANCE |
|--|--------------------|
| Aggregate in any 12 month period of this policy: | \$10,000 |



Crime coverage premium summary

Policy Number 630-9K508583

Government Crime - Discovery Coverage

The Government Crime - Discovery Coverage Part consists of this Declarations Form and the Government Crime - Discovery Coverage Form.

Employee benefit plan(s) included as insureds:

| INSURING AGREEMENTS | LIMIT OF INSURANCE PER OCCURRENCE | DEDUCTIBLE AMOUNT PER OCCURRENCE |
|---|--------------------------------------|-------------------------------------|
| Employee Theft – Per Loss Coverage | \$500,000 | \$1,000 |
| Forgery Or Alteration | \$100,000 | \$1,000 |
| Inside The Premises – Theft of Money And Securities | \$100,000 | \$1,000 |
| Inside The Premises – Robbery Or Safe Burglary Of Other Property | Not Covered | Not Covered |
| Outside The Premises | \$100,000 | \$1,000 |
| Computer Fraud | \$100,000 | \$1,000 |
| Funds Transfer Fraud | Not Covered | Not Covered |
| Money Orders And Counterfeit Paper Currency | \$100,000 | \$1,000 |

Cancellation of prior insurance issued by us:

By acceptance of this Coverage Part you give us notice cancelling prior policy Nos. _____; the cancellation to be effective at the time this Coverage Part becomes effective.

Gross Premium:

\$613



Commercial Auto coverage premium summary

Option 1

Gross Premium

\$613

| COVERAGE | AUTO SYMBOLS | LIMITS |
|-------------------------------------|--------------|-------------|
| Liability | 7 only | \$1,000,000 |
| Uninsured/Underinsured Motorist | 2 only | Rejected |
| Number of autos, excluding trailers | 2 | |
| Number of trailers | 0 | |

Statutory Cap Limits Of Insurance Endorsement

| | LIMIT |
|---|-----------|
| Wyoming Each Claimant Limit - Statutory Cap | \$250,000 |
| Wyoming Each Accident Limit - Statutory Cap | \$500,000 |

Amendments

| DESCRIPTION |
|--|
| Amendment Of Bodily Injury Definition |
| Public Entity Auto Extension |
| Professional Services Not Covered |
| Emergency Services - Volunteer Firefighters' & Workers' Injuries Excluded |
| Amendment Of Employee Definition |
| Preservation Of Governmental Immunity - Wyoming |
| Amendment Of Common Policy Conditions - Prohibited Coverage - Unlicensed Insurance And Trade Or Economic Sanctions |



Commercial Auto Physical Damage

Option 1

Gross Premium

\$18,595

| COVERAGE | VALUATION | UNITS | DEDUCTIBLE |
|---------------|-------------------|-------|------------|
| Symbol 2,8 | | | |
| Comprehensive | Actual Cash Value | 5 | \$2,500 |
| Comprehensive | Actual Cash Value | 34 | \$1,000 |
| Comprehensive | Actual Cash Value | 2 | \$25,000 |
| Comprehensive | Stated Amount | 2 | \$1,000 |
| Collision | Actual Cash Value | 5 | \$2,500 |
| Collision | Actual Cash Value | 34 | \$1,000 |
| Collision | Actual Cash Value | 2 | \$25,000 |
| Collision | Stated Amount | 2 | \$1,000 |

Miscellaneous Items

DESCRIPTION

Hired Auto Physical Damage-Loss Of Use-Comprehensive/Collision-Deductible: \$1,000/\$1,000

Amendments

DESCRIPTION

Public Entity Auto Extension

Preservation Of Governmental Immunity - Wyoming

Federal Terrorism Risk Insurance Act Disclosure

The Federal Terrorism Risk Insurance Act of 2002 as amended ("TRIA") establishes a program under which the Federal Government may partially reimburse "Insured Losses" (as defined in TRIA) caused by "Acts Of Terrorism" (as defined in TRIA). "Act Of Terrorism" is defined in Section 102(1) of TRIA to mean any act that is certified by the Secretary of the Treasury – in consultation with the Secretary of Homeland Security and the Attorney General of the United States – to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States Mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

The Federal Government's share of compensation for such Insured Losses is 80% of the amount of such Insured Losses in excess of each Insurer's "Insurer Deductible" (as defined in TRIA), subject to the "Program Trigger" (as defined in TRIA).

In no event, however, will the Federal Government be required to pay any portion of the amount of such Insured Losses occurring in a calendar year that in the aggregate exceeds \$100 billion, nor will any Insurer be required to pay any portion of such amount provided that such Insurer has met its Insurer Deductible. Therefore, if such Insured Losses occurring in a calendar year exceed \$100 billion in the aggregate, the amount of any payments by the Federal Government and any coverage provided by this policy for losses caused by Acts Of Terrorism may be reduced.

For each coverage provided by this policy that applies to such Insured Losses, the charge for such Insured Losses is included in the premium for such coverage. The charge for such Insured Losses that has been included for each such coverage is the percentage of the premium for such coverage indicated below, and does not include any charge for the portion of such Insured Losses covered by the Federal Government under TRIA.

Account summary

Premium summary

| COVERAGE | POLICY NUMBER | PREMIUM |
|----------------------|---------------|------------------|
| DELUXE | 630-9K508583 | \$103,673 |
| INLAND MARINE | 630-9K508583 | \$16,021 |
| CRIME | 630-9K508583 | \$613 |
| AUTO LIABILITY | BA-9K508583 | \$613 |
| AUTO PHYSICAL DAMAGE | BA-9K508583 | \$18,595 |
| Total | | \$139,515 |

Note: The estimated premium shown in the Premium Schedule and Quote Options, if any, may differ from actual premiums shown on the policies and installment bills due to installment charges, estimated taxes and surcharges, as well as rounding. Estimated taxes and surcharges may differ depending on selection of Quote Options, if any.

IMPORTANT NOTE REGARDING ACCOUNT MINIMUM PREMIUM

The lines of business shown in the Premium Schedule and Quote Options, if any, are subject to a \$5,000 account minimum premium. If the line(s) of business selected for binding do not total at least \$5,000, then the premiums shown for those lines of business will be adjusted to total \$5,000.

Payment plan

Agency Bill - Yearly

Bill Payment Options can be found at: Travelers.com/AutoPay

Note: The amount of each installment will be reflected on your policy invoicing.

Account summary

Disclosure

Unless accepted, the offer(s) of insurance contained in this proposal expire(s) automatically thirty (30) days after the proposal date referenced on the cover page, or the proposed effective date if earlier. This proposal is not a binding contract of insurance. If you have questions regarding this proposal, please contact your Travelers Representative.

The following outlines the coverage forms, limits of insurance, policy endorsements and other terms and conditions provided in this proposal/quote. Any policy coverages, limits of insurance, policy endorsements, coverage specifications, or other terms and conditions that you have requested that are not included in this proposal/quote have not been agreed to by Travelers. Please review this proposal/quote carefully and if you have any questions, please contact your Travelers representative.

This proposal/quote does not amend, or otherwise affect, the provisions of coverage of any resulting insurance policy issued by Travelers. It is not a representation that coverage does or does not exist for any particular claim or loss under any such policy. Coverage depends on the applicable provisions of the actual policy issued, the facts and circumstances involved in the claim or loss and any applicable law.

Please note that changes in the exposures, limits, or coverages may result in changes in rates and/or account pricing. Additionally, due to the expense of processing and servicing this account, in the event this quote is not accepted in its entirety, we reserve the right to reprice and reunderwrite this quote.

The policies will also be subject to all state-mandated endorsements.

At our discretion, we may decide to perform an interim test audit during the upcoming policy period to verify the adequacy of the exposure estimates that have been provided to us. If we decide to perform an interim test audit, a Travelers Auditor will contact the insured at the appropriate time to set up an appointment. The results of any interim test audit that we perform will be shared with you as soon as possible after the audit report has been completed.

As Broker/Agent you will be responsible for being aware of and complying with the various legal requirements associated with countersignature in various jurisdictions covered in the policies.



Property coverage form index

Policy Number

630-9K508583

Coverage and amendments

| DESCRIPTION | FORM NUMBER |
|--|-------------|
| TABLE OF CONTENTS - DELUXE PROP COV PART | DX 00 04 |
| CANCELLATION CHANGES - DELUXE | DX 00 05 |
| WY CHANGES | DX 01 11 |
| DELUXE PROP COV PART DECLARATIONS | DX T0 00 |
| DELUXE PROPERTY COVERAGE FORM | DX T1 00 |
| DELUXE BI (AND EE) COVERAGE FORM | DX T1 01 |
| CAUSES OF LOSS-EARTHQUAKE | DX T3 01 |
| CAUSES OF LOSS - BROAD FORM FLOOD | DX T3 02 |
| SPOILAGE COVERAGE EXTENSION | DX T3 15 |
| CAUSES OF LOSS-EQUIPMENT BREAKDOWN | DX T3 19 |
| WINDSTORM OR HAIL DEDUCTIBLE | DX T3 37 |
| UTILITY SERVICES-DIRECT DAMAGE | DX T3 85 |
| ELECTRONIC VANDALISM LIMIT & OTHER CHANG | DX T3 98 |
| FEDERAL TERRORISM RISK INSURANCE ACT DIS | DX T4 02 |
| LIMITED SEWER DRAIN BACK-UP COVERAGE | DX T4 45 |
| PUBLIC ENTITY PROPERTY EXTENSIONS | DX T4 47 |
| DIGITAL ASSETS EXCLUSIONS | DX T5 21 |

Package common coverage form index

Policy Number 630-9K508583

630 Common coverage and amendments

| DESCRIPTION | FORM NUMBER |
|--|-------------|
| COMMON DEC | IL T0 02 |
| LOCATION SCHEDULE | IL T0 03 |
| COMMON POLICY CONDITIONS-DELUXE | IL T3 18 |
| EXCLUSION OF CERTAIN COMPUTER LOSSES | IL T3 55 |
| EXCL OF LOSS DUE TO VIRUS OR BACTERIA | IL T3 82 |
| AMNDT COMMON POLICY COND-PROHIBITED COVG | IL T4 12 |
| CAP ON LOSSES FROM CERT ACTS OF TERRORIS | IL T4 14 |
| ADDITIONAL BENEFITS | IL T4 27 |
| PROTECTION OF PROPERTY | IL T4 40 |
| DEFENSE FEES,COSTS,EXP-RIGHT TO REIMBURS | IL T4 49 |
| WY CHANGES-CANCELLATION & NONRENEWAL | IL T9 48 |



Inland Marine coverage form index

Policy Number 630-9K508583

Coverage and amendments

Inland Marine

| DESCRIPTION | FORM NUMBER |
|--|-------------|
| COMMERCIAL INLAND MARINE CONDITIONS | CM 00 01 |
| WYOMING CHANGES-LEGAL ACTION AGAINST US | CM 01 09 |
| MISC PROPERTY COVERAGE FORM DEC | CM B0 72 |
| CONTRACTORS EQUIPMENT COVERAGE FORM DEC | CM B0 96 |
| CONTRACTORS EQUIPMENT SUPPLEMENTAL DEC | CM B0 97 |
| CONTRACTORS EQUIPMENT DEDUCTIBLE SCHED | CM B0 99 |
| TABLE OF CONTENTS | CM T0 11 |
| MISCELLANEOUS PROPERTY COVERAGE FORM | CM T2 39 |
| CONTRACTORS EQUIPMENT COVERAGE FORM | CM T2 42 |
| FEDERAL TERRORISM RISK INSURANCE ACT DIS | CM T3 98 |
| EARTH MOVEMENT DEDUCTIBLE | CM T7 53 |
| EARTH MVMNT LIMIT-DESCRIBED PROP OR LOCS | CM T7 56 |
| FLOOD DEDUCTIBLE | CM T7 62 |
| FLOOD LIMIT-DESCRIBED PROP OR LOCS | CM T7 66 |
| FLOOD DEDUCTIBLE | CM U3 49 |
| FLOOD LIMITATION-DESC PROP OR LOCS | CM U3 52 |
| EARTH MOVEMENT DEDUCTIBLE | CM U3 65 |
| EM LIMITATION-DESC PROP OR LOCS | CM U3 67 |
| ELECTRONIC VAND LIMITATION & OTHER CHGS | CM U6 17 |
| DIGITAL ASSETS EXCL - DIGITAL CURRENCY | CM U6 41 |



Crime coverage form index

Policy Number 630-9K508583

Coverage and amendments

| DESCRIPTION | FORM NUMBER |
|--|-------------|
| GOV'T CRIME COV FORM (DISCOVERY FORM) | CR 00 24 |
| WYOMING CHANGES -LEGAL ACTION AGAINST US | CR 01 08 |
| CONVERT TO AGGREGATE LIMIT OF INSURANCE | CR 20 08 |
| ADD FAITHFUL PERF OF DUTY COV GOVT EMPL | CR 25 19 |
| ADD FAITHFULL PERF OF DUTY COV FOR SPEC | CR 25 43 |
| GOVERNMENT CRIME COV PART DECLARATIONS | CR T0 22 |
| TABLE OF CONTENTS - GOV'T DISCOVERY FORM | CR T0 29 |

Commission summary

| COVERAGE | POLICY NUMBER | COMMISSION |
|----------------------|---------------|------------|
| DELUXE | 630-9K508583 | 12.00 % |
| INLAND MARINE | 630-9K508583 | 12.00 % |
| CRIME | 630-9K508583 | 12.00 % |
| AUTO LIABILITY | BA-9K508583 | 12.00 % |
| AUTO PHYSICAL DAMAGE | BA-9K508583 | 12.00 % |

Note: *It is the agent's or broker's responsibility to comply with any applicable laws regarding disclosure to the policyholder of commission or other compensation we pay, if any, in connection with this policy or program.*

* Commission percentage displayed does not apply to any North Carolina Reinsurance Facility loss recoupment surcharge amounts included in the liability premium of the Commercial Auto Policy, if applicable.

Important Notice Regarding Compensation Disclosure

For information about how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website:

http://www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Travelers, Enterprise Development, One Tower Square, Hartford, CT 06183.