



Amwins Insurance Brokerage, LLC
10 S. LaSalle Street
Suite 2000
Chicago, IL 60603

amwins.com

October 9, 2023

Chad Beth
Beth & Rudnicki Insurance Agency, Inc.
5411 E. State St., Suite 204
Rockford, IL 61108

RE: City of Rochelle

PROPERTY CONFIRMATION OF COVERAGE

Dear Chad:

In accordance with your instructions to bind, please find the attached Binder for City of Rochelle which confirms that coverage is bound for your client as follows:

DATE OF ISSUANCE: 10/9/2023

INSURED: City of Rochelle

MAILING ADDRESS: 420 North 6th St.
Rochelle, IL 61068

CARRIER: Landmark American Insurance Company (Non-Admitted)

POLICY NUMBER: LHD937230

POLICY PERIOD: From 10/6/2023 to 10/6/2024
12:01 A.M. Standard Time at the Mailing Address shown above

POLICY PREMIUM:	Premium	\$167,000.00
	TRIA	Rejected
	Fees	\$500.00
	Surplus Lines Taxes and Fees	\$6,747.00
	Total	\$174,247.00

MINIMUM EARNED PREMIUM: 35%

SURPLUS LINES TAX SUMMARY

HOME STATE: Illinois

FEES:

Fee	Taxable	Amount
Amwins Service Fee	No	\$500.00
Total Fees		\$500.00

SURPLUS LINES TAX CALCULATION:

State	Description	Taxable Premium	Taxable Fee	Tax Basis	Rate	Tax
Illinois	Surplus Lines Tax	\$167,000.00	\$0.00	\$167,000.00	3.500%	\$5,845.00
	Stamping Fee	\$167,000.00	\$0.00	\$167,000.00	0.040%	\$67.00
	Fire Marshal Tax	\$167,000.00	\$0.00	\$167,000.00	0.500%	\$835.00
Total Surplus Lines Taxes and Fees						\$6,747.00

Important Notice: Surplus Lines Tax Rates and Regulations are subject to change which could result in an increase or decrease of the total Surplus Lines Taxes and Fees owed on this placement. If a change is required, we will promptly notify you. Any additional taxes owed must be promptly remitted.

The attached Binder from the carrier sets forth the coverage as bound. Please review carefully with your client to ensure the bound coverage matches the terms and conditions of the bind order. It is your responsibility to ensure the bound terms and conditions are accurate and consistent with the agreed bind order terms.

If after reviewing you should have any questions or requested changes, please let us know as soon as possible so we can discuss with the carrier.

Thank you for your business. We truly appreciate it.

Sincerely,

Lars Hansen

Associate Broker

T 312.601.9300 | lars.hansen@amwins.com

Amwins Insurance Brokerage, LLC

10 S. LaSalle Street | Suite 2000 | Chicago, IL 60603 | amwins.com

On behalf of,

Joe Blakeley

Vice President

T 312.575.9272 | M 331.238.2310 | joe.blakeley@amwins.com

Amwins Insurance Brokerage, LLC

In California: Amwins Brokerage Insurance Services | License 0F19710

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SURPLUS LINES DISCLOSURE

Illinois

Notice to Policyholder: This contract is issued, pursuant to Section 445 of the Illinois Insurance Code, by a company not authorized and licensed to transact business in Illinois and as such is not covered by the Illinois Insurance Guaranty Fund.

For Domestic Insurers:

Notice to Policyholders: This contract is issued by a domestic surplus lines insurer, as defined in section 445a of the Illinois Insurance Code, pursuant to section 445 and as such is not covered by the Illinois Insurance Guaranty Fund.



Notice to Policyholders: This contract is issued pursuant to Section 445 of the Illinois Insurance Code, by a company not authorized and licensed to transact business in Illinois and as such is not covered by the Illinois Insurance Guaranty Fund.

Illinois Premium:	\$167,000.00
Fees:	\$500.00
Surplus Lines Tax:	\$5,845.00
Stamping Fee:	\$67.00
Fire Marshal Tax:	\$835.00

RE: Property Binder

Policy Number: LHD937230
Company: Landmark American Insurance Company
(A.M. Best rating: A++ XIV and S&P rating: AA+)
Coverage: Property
Insured: City of Rochelle / Rochelle IL
Rochelle, IL
Policy Dates: October 06, 2023 - October 06, 2024
Property Limits: \$2,500,000 Per Occurrence, subject to conditions of the Scheduled Limit of Liability form
Valuation: Replacement Cost
Actual Cash Value on Roofs 10 Years Old or Older at Time of Loss
Excluding Cosmetic Damage to Roof Surfacing
Total Insured Value: \$29,837,000 per Statement of Values on file with Company submitted 10/04/2023
Coverages:

- Building
- Personal Property

Perils: Special Excluding Flood & Earth Movement

- Excluding Earth Movement Sprinkler Leakage
- Excluding Terrorism
- Excluding Mechanical Breakdown

Form: ISO Forms – Current to 2017 Versions
Deductible: **All Covered Perils** - \$100,000 Per Occurrence (Property Damage), *except*
Windstorm or Hail - 2.00% Per Location, subject to a minimum of \$100,000 per occurrence (Property Damage)

Policy Attachments

- Appraisal Clause Amendment
- Asbestos Exclusion
- Cyber, Electronic Data and Systems Exclusion
- Exclusion - Marijuana
- Exclusion of Pathogenic or Poisonous Biological or Chemical Materials
- Exclusion of Terrorism
- Limitations on Coverage for Roof Surfacing
- Scheduled Limit Of Liability
- Windstorm or Hail Loss Conditions

Premium Amount

Premium:	\$167,000.00
Gross Premium:	\$167,000.00
Minimum Earned Premium:	35.00%

Comments:

Coverage has been "rejected" by the insured for all acts of terrorism including but not limited to those that are certified by the Secretary of the Treasury under the Terrorism Risk Insurance Act.

Please read all terms and conditions shown above carefully as they may not conform to specifications shown on your submission.

Coverage bound herewith shall be subject to all terms and conditions of the policy to be issued which, when delivered, replaces this binder.

Please consider this your invoice for accounting purposes. Payment is due 45 days from the end of the month in which the policy is effective. Remit payment to RSUI Group Inc., P.O. Box 932995, Atlanta, GA 31193-2995.

This Binder is valid for 90 days from the effective date.

We greatly appreciate your business.

