

CONDITIONAL



Personalized Proposal Prepared for

PIPESTONE AREA SCHOOLS ISD
2689



FIRSTMAINSTREET INSURANCE

500 1ST ST SE
PO BOX 1863
CEDAR RAPIDS, IA
52401-2002



PIPESTONE AREA SCHOOLS ISD 2689

Your Business

**PIPESTONE AREA SCHOOLS ISD
2689**
1401 7TH ST SW
PIPESTONE, MN 56164-1877

Your Agent

FIRSTMAINSTREET INSURANCE
500 1ST ST SE
PO BOX 1863
CEDAR RAPIDS, IA 52401-2002

Your Quote

Quote: 0420857 002
Prepared on 06/10/2025
Policy Term: 07/01/2025-07/01/2026

Valid Through: 07/25/2025

Your Account Summary

Your Premium Estimate

Commercial Property (Version #5)	\$103,885.53
General Liability (Version #3)	\$12,240.00
Business Auto (E-04)	\$11,324.00
Commercial Inland Marine (C-03)	\$4,770.00
Commercial Umbrella (J-07)	\$4,303.00
Crime/Fidelity Package (F-01)	\$343.00
Linebacker - Claims Made (K-06)	\$16,417.00

**Total Account
Premium Estimate**

\$153,282.53

Your Policy

Benefits Include...

- 1 Industry leading loss control services to help protect your business
- 2 Flexible payment options designed to fit your needs
- 3 Fast, responsive claims service when you need it

Your Payment Options



Electronic Funds Transfer (EFT)

Set up automatic payments and skip transaction fees with EFT. Sign up in Policyholder Access or contact your agent to get started.



Online

www.emcinsurance.com
Visit our website to make a single payment by eCheck or credit/debit card.



Mail

Submit check, money order or cashier's check to our centralized lockbox.



Commercial Property Declarations

Prepared For

PIPESTONE AREA SCHOOLS ISD 2689
1401 7TH ST SW
PIPESTONE, MN 56164-1877
DIRECT BILL

Presented By

FIRSTMAINSTREET INSURANCE
500 1ST ST SE
PO BOX 1863
CEDAR RAPIDS, IA 52401-2002
AGENT NO. C0136
AGENT PHONE: 319-364-5193
CLAIM REPORTING: 888-362-2255
SERVICING CARRIER: 612-643-4700

This policy renewal is offered contingent upon the receipt of payment which is due on 08/01/2025.

See attached schedule for description of locations, special interests and deductibles.

Coverages

Coverages Provided	Premium
Blanket ID Number - 1 - See Schedule for Description	\$96,126.00
Equipment Breakdown Coverage (Including Electronic Circuitry Impairment)	\$6,985.00
Property off Premises and In Transit	\$650.00
Property Premium	\$103,761.00
Minnesota Fire Safety Surcharge	\$124.53
Total Property Premium	\$103,885.53

Forms Applicable

CP0090(07/88), CP0108(05/20), CP0140(07/06), CP0150(10/00), CP0157(09/18), CP0321(10/12), CP0329(04/18), CP0411(09/17), CP1075(12/20), CP1615A(02/12), CP7001A(02/12), CP7123.4(10/20), CP7123(11/23), CP7173(12/19), CP7175(09/24), CP7358(02/17), CP8036(07/21), CP8118(02/24), CP8121(10/24), IL0017(11/98), IL0245(09/08), IL0952(01/15), IL7004(03/20), IL7131A(04/01), IL7170(09/24), IL7306(08/98), IL8383.2A(12/20), IL8384A(01/08), IL8493(01/25), IL8720(08/15)

Commercial Property Summary Proposal

Endorsement Schedule

Form	Edition Date	Description/Additional Information	Premium
CP 00 90	07 88	Commercial Property Conditions	
CP 01 08	05 20	Minnesota Changes	
CP 01 40	07 06	Exclusion Of Loss Due To Virus Or Bacteria	
CP 01 50	10 00	Minnesota Changes - Replacement Cost Personal Property	
CP 01 57	09 18	Minnesota Changes - Coinsurance	
CP 03 21	10 12	Windstorm Or Hail Percentage Deductible	
CP 03 29	04 18	Deductibles By Location Location 1 Building 1 Covered Cause Of Loss 5 Location 1 Building 2 Covered Cause Of Loss 5 Location 1 Building 3 Covered Cause Of Loss 5 Location 1 Special Class 3 Covered Cause Of Loss 5 Location 1 Special Class 6 Covered Cause Of Loss 5 Location 1 Special Class 7 Covered Cause Of Loss 5 Location 1 Special Class 8 Covered Cause Of Loss 5	

Form	Edition Date	Description/Additional Information	Premium
		Location 1 Special Class 9 Covered Cause Of Loss 5 Location 1 Special Class 12 Covered Cause Of Loss 5 Location 2 Special Class 1 Covered Cause Of Loss 5 Location 2 Special Class 3 Covered Cause Of Loss 5 Location 2 Special Class 4 Covered Cause Of Loss 5	
CP 04 11	09 17	Protective Safeguards	
CP 10 75	12 20	Cyber Incident Exclusion	
CP 16 15A	02 12	Statement Of Values	
CP 70 01A	02 12	Commercial Property Schedule	
CP 71 23	11 23	Building and Personal Property Coverage Form - Schools	
CP 71 23.4	10 20	School Quick Reference	
CP 71 73	12 19	Cannabis Exclusion	
CP 71 75	09 24	Limitations On Coverage For Roof System Location 1 Building 1 Paragraphs A and B Apply Roof Age (Years) : 15 Location 1 Building 2 Paragraphs A and B Apply Roof Age (Years) : 15	

Form	Edition Date	Description/Additional Information	Premium
		Location 1 Building 3 Paragraphs A and B Apply Roof Age (Years) : 15 Location 1 Building 4 Paragraphs A and B Apply Roof Age (Years) : 15 Location 1 Building 5 Paragraphs A and B Apply Roof Age (Years) : 15 Location 1 Building 6 Paragraphs A and B Apply Roof Age (Years) : 15 Location 1 Building 7 Paragraphs A and B Apply Roof Age (Years) : 15 Location 1 Building 8 Paragraphs A and B Apply Roof Age (Years) : 15 Location 1 Building 9 Paragraphs A and B Apply Roof Age (Years) : 15 Location 2 Building 1 Paragraphs A and B Apply Roof Age (Years) : 15 Location 2 Building 2 Paragraphs A and B Apply Roof Age (Years) : 15 Location 2 Building 3 Paragraphs A and B Apply	

Form	Edition Date	Description/Additional Information	Premium
		Roof Age (Years) : 15 Location 2 Building 4 Paragraphs A and B Apply Roof Age (Years) : 15	
CP 73 58	02 17	Equipment Breakdown Coverage (Including Electronic Circuitry Impairment)	
CP 80 36	07 21	Commercial Property Valuation Increase	
CP 81 18	02 24	Important Notice To Policyholders	
CP 81 21	10 24	Important Notice To Policyholders	
IL 00 17	11 98	Common Policy Conditions	
IL 02 45	09 08	Minnesota Changes - Cancellation And Nonrenewal	
IL 09 52	01 15	Cap On Losses From Certified Acts Of Terrorism	
IL 70 04	03 20	Mutual Policy Provisions	
IL 71 31A	04 01	Commercial Policy Endorsement Schedule	
IL 71 70	09 24	Actual Cash Value Definition	
IL 73 06	08 98	Exclusion Of Certain Computer-Related Losses	
IL 83 83.2A	12 20	Disclosure Pursuant To Terrorism Risk Insurance Act	\$2,246.00
IL 83 84A	01 08	Terrorism Notice	
IL 84 93	01 25	Actual Cash Value Definition - PHN	
IL 87 20	08 15	Advisory Notice To Policyholders	



Terrorism Notice

This insurance may include coverage for certified acts of terrorism as defined in the terrorism risk insurance act, as amended.

Attached you will find a disclosure, which identifies the specific charge for certified acts of terrorism.

You may have the option to reject this terrorism coverage.

For additional information, please contact your agent.



This endorsement is attached to and made part of your policy in response to the disclosure requirements of the Terrorism Risk Insurance Act. This endorsement does not grant any coverage or change the terms and conditions of any coverage under the policy.

Disclosure Pursuant to Terrorism Risk Insurance Act

Schedule

Terrorism Premium (Certified Acts)	\$2,246.00
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A. Disclosure Of Premium:

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorism acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

B. Disclosure Of Federal Participation In Payment Of Terrorism Losses:

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals 80% of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

C. Cap On Insurer Participation In Payment Of Terrorism Losses:

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rate allocations in accordance with the procedures established by the Secretary of the Treasury.

The following statement is required to be part of the disclosure notice in MISSOURI:

The premium above is for certain losses resulting from certified acts of terrorism as covered pursuant to coverage provisions, limitations and exclusions in this policy. You should read the definition in your policy carefully, but generally speaking, "certified" acts of terrorism are acts that exceed \$5 million in aggregate losses to the insurance industry and which are subsequently declared by the U.S. Secretary of Treasury as a certified terrorist act under the Terrorism Risk Insurance Act. Some losses resulting from certified acts of terrorism are not covered. Read your policy and endorsements carefully.



Commercial Property Summary Proposal

Blanket coverage applies only as indicated by an entry below:

Blanket: 1

Building & Personal Property Combined: Only at Locations/Buildings as indicated in the Schedule below

Blanket Limit of Insurance

\$112,136,810

Coinsurance: 100%

Locations

For inspection contact: Klint Willert

Location 1

1401 7th St SW

Pipestone, MN 56164

Building 1

Description: 2 Story Masonry Non-Combustible - Other Than Reinforced - Light Steel - Superior Roofing Building

In Protection Class: 4

Occupancy: PIPESTONE AREA HIGH SCHOOL (2S)

Deductible Per Occurrence: \$25,000

Except: 1% On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)

Protective Safeguards: P-1 Automatic Sprinkler System,P-2 Automatic Fire Alarm

Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
All Personal Property	See Blkt 1	Special	See Blkt 1		Replacement Cost

Building 2	Description: 2 Story Masonry Non-Combustible - Other Than Reinforced - Light Steel - Superior Roofing Building In Protection Class: 4 Occupancy: PIPESTONE ELEMENTARY SCHOOL (2S) Deductible Per Occurrence: \$25,000 Except: 1% On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply) Protective Safeguards: P-1 Automatic Sprinkler System,P-2 Automatic Fire Alarm					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
	All Personal Property	See Blkt 1	Special	See Blkt 1		Replacement Cost
Building 3	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: STORAGE GARAGE,NORTH OF HIGH SCHOOL Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000

Building 4	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: SHED NORTH OF GARAGE Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
Building 5	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: SHED WITH SCREENED IN AREA Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
Building 6	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: SHED ON SW CORNER OF SCHOOL Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					

	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
Building 7	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: PAULSEN SPORTS FIELD HIGH SCHOOL BASEBALL FIELD SHED Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
Building 8	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: PAULSEN SPORTS FIELD HIGH SCHOOL TRACK SHED Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000

Building 9	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: PAULSEN SPORTS FIELD YOUTH BASEBALL FIELD SHED Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
Special Class 1	Description: Property In The Open - SIGNS Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 2	Description: Property In The Open - signs/signage around the entire buildings and complex Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 3	Description: Property In The Open - playground Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					

	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 4	Description: Property In The Open - playground Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 5	Description: Property In The Open - 2 basketball courts w/hoops Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 6	Description: Property In The Open - 2 youth baseball fields with fencing,backstop,dugouts,scoreboard Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 7	Description: Property In The Open-high school baseball field,including goal posts,scorebaord,grandstands,bleachers Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					

Special Class 7	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 8	Description: Property In The Open - high school football field,including goal posts,scoreboard,grandstands,bleachers Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 9	Description: Property In The Open - High school track (400 meters) Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 10	Description: Property In The Open - fencing around the entire complex Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 11	Description: Property In The Open - misc track and football equipment that stays onsite (hurdles,yard markers,etc) Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					

Special Class 11	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 12	Description: Property In The Open - lighting for the football and baseball complex Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost

Location 2

1133 2ND ST SW
PIPESTONE, MN 56164

Building 1	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: PAULSEN FIELD CONCESSION STAND Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000

Building 2	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: STORAGE SHED Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
Building 3	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: STORAGE GARAGE Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
Building 4	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: STORAGE BUILDING Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					

	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Building	See Blkt 1	Special	See Blkt 1		Replacement Cost Limitations On Coverage For Roof System Debris Removal \$250,000
	All Personal Property	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 1	Description: Property In The Open - 2 Softball field grandstands,lighting,fencing,foul poles,scoreboards,dugouts Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 2	Description: Property In The Open - a third utility field grandstands,lighting,fencing,foul poles,scoreboards,dugouts,etc Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 3	Description: Property In The Open - SOFTBALL SHELTER Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					



	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost
Special Class 4	Description: Property In The Open - TENNIS COURT Deductible Per Occurrence: \$25,000 Except: \$25,000 On Windstorm Or Hail (Deductible Provisions Under CP0329 apply), (Deductible Provisions Under CP0329 apply)					
	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance	Spec Int	Optional Coverages
	Property In The Open	See Blkt 1	Special	See Blkt 1		Replacement Cost

Miscellaneous Location Level Coverages

See coverage form for deductible amounts applicable to these coverages.

Location	Coverage	Limit of Insurance
1	School Location Additional Coverages and Coverage Extensions	See Coverage Form
1	Fire Department Service Charge	\$50,000
2	School Location Additional Coverages and Coverage Extensions	See Coverage Form
2	Fire Department Service Charge	\$50,000

Miscellaneous Policy Level Coverages

School Line Additional Coverages and Coverage Extensions	See Coverage Form
Unreported Buildings, Structures and Outdoor Fixtures	\$50,000
School - Property off Premises and In Transit	
Limit	\$500,000
Deductible: Deductible - \$1,000	



Equipment Breakdown Endorsement

See Coverage Form

Coverages

Expediting Expenses	\$100,000
Hazardous Substances	\$100,000
Perishable Goods/Spoilage	\$100,000
Equipment Breakdown Limit	\$114,136,810
Business Income Option	Included
Extra Expense Option	Included
Data Restoration	\$100,000
"Fungus", Wet Rot, Dry Rot and Bacteria	\$15,000

Deductibles

Direct Coverages	\$25,000
Indirect Coverages	72 Hours



Statement of Values

Location 1

1401 7th St SW

Pipestone, MN 56164

Building 1	Description: 2 Story Masonry Non-Combustible - Other Than Reinforced - Light Steel - Superior Roofing Building In Protection Class: 4 Occupancy: PIPESTONE AREA HIGH SCHOOL (2S)		
	Coverage	100% Values	Value Type
	Building	\$62,007,940.00	Replacement Cost
	All Personal Property	\$12,401,588.00	Replacement Cost
Building 2	Description: 2 Story Masonry Non-Combustible - Other Than Reinforced - Light Steel - Superior Roofing Building In Protection Class: 4 Occupancy: PIPESTONE ELEMENTARY SCHOOL (2S)		
	Coverage	100% Values	Value Type
	Building	\$24,557,600.00	Replacement Cost
	All Personal Property	\$4,911,520.00	Replacement Cost
Building 3	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: STORAGE GARAGE,NORTH OF HIGH SCHOOL		
	Coverage	100% Values	Value Type
	Building	\$551,200.00	Replacement Cost

Building 4	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: SHED NORTH OF GARAGE		
	Coverage	100% Values	Value Type
	Building	\$26,000.00	Replacement Cost
Building 5	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: SHED WITH SCREENED IN AREA		
	Coverage	100% Values	Value Type
	Building	\$26,000.00	Replacement Cost
Building 6	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: SHED ON SW CORNER OF SCHOOL		
	Coverage	100% Values	Value Type
	Building	\$26,000.00	Replacement Cost
Building 7	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: PAULSEN SPORTS FIELD HIGH SCHOOL BASEBALL FIELD SHED		
	Coverage	100% Values	Value Type
	Building	\$16,640.00	Replacement Cost

Building 8	Description: 1 Story Frame Building		
	In Protection Class: 4		
	Occupancy: PAULSEN SPORTS FIELD HIGH SCHOOL TRACK SHED		
Building 9	Coverage	100% Values	Value Type
	Building	\$41,600.00	Replacement Cost
Special Class 1	Description: 1 Story Frame Building		
	In Protection Class: 4		
	Occupancy: PAULSEN SPORTS FIELD YOUTH BASEBALL FIELD SHED		
Special Class 2	Coverage	100% Values	Value Type
	Property In The Open - SIGNS	192,400	Replacement Cost
Special Class 3	Coverage	100% Values	Value Type
	Property In The Open - signs/signage around the entire buildings and complex	82,210	Replacement Cost
Special Class 3	Coverage	100% Values	Value Type
	Property In The Open - playground	156,000	Replacement Cost

Special Class 4	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - playground	156,000	Replacement Cost
Special Class 5	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - 2 basketball courts w/hoops	156,000	Replacement Cost
Special Class 6	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - 2 youth baseball fields with fencing,backstop,dugouts,scoreboard	572,000	Replacement Cost
Special Class 7	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open-high school baseball field,including goal posts,scorebaord,grandstands,bleachers	1,560,000	Replacement Cost
Special Class 8	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - high school football field,including goal posts,scoreboard,grandstands,bleachers	1,560,000	Replacement Cost
Special Class 9	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - High school track (400 meters)	208,000	Replacement Cost



Special Class 10	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - fencing around the entire complex	260,000	Replacement Cost
Special Class 11	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - misc track and football equipment that stays onsite (hurdles,yard markers,etc)	52,000	Replacement Cost
Special Class 12	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - lighting for the football and baseball complex	520,000	Replacement Cost

Location 2

1133 2ND ST SW
PIPESTONE, MN 56164

Building 1	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: PAULSEN FIELD CONCESSION STAND		
	Coverage	100% Values	Value Type
	Building	\$104,337.00	Replacement Cost
Building 2	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: STORAGE SHED		

Building 2	Coverage	100% Values	Value Type
	Building	\$34,235.00	Replacement Cost
Building 3	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: STORAGE GARAGE		
	Coverage	100% Values	Value Type
	Building	\$17,116.00	Replacement Cost
Building 4	Description: 1 Story Frame Building In Protection Class: 4 Occupancy: STORAGE BUILDING		
	Coverage	100% Values	Value Type
	Building	\$17,116.00	Replacement Cost
	All Personal Property	\$34,560.00	Replacement Cost
Special Class 1	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - 2 Softball field grandstands,lighting,fencing,foul poles,scoreboards,dugouts	728,000	Replacement Cost
Special Class 2	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - a third utility field grandstands,lighting,fencing,foul poles,scoreboards,dugouts,etc	119,759	Replacement Cost



Special Class 3	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - SOFTBALL SHELTER	176,957	Replacement Cost
Special Class 4	In Protection Class: 4		
	Coverage	100% Values	Value Type
	Property In The Open - TENNIS COURT	838,032	Replacement Cost

Total Building	\$87,451,784.00 RC
Total Personal Property	\$17,347,668.00 RC
Total Property in the Open	\$7,337,358.00 RC

Combined Total	\$112,136,810.00
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1. Values shown must be 100% actual cash value or replacement cost and should reflect coverage basis for each item of buildings, personal property or both.
2. Value shall be submitted to insurance company, subject to its acceptance.
3. Nothing contained in these instructions shall be construed as changing in any manner the conditions of this policy.
4. The company may require this statement of values to be signed by the insured or in the case of firms, by a partner or an officer.

All values submitted are correct to the best of my knowledge and belief.

Signed: _____

Title: _____ Date: _____



General Liability Summary Proposal

Prepared For

PIPESTONE AREA SCHOOLS ISD 2689
1401 7TH ST SW
PIPESTONE, MN 56164-1877
DIRECT BILL

Presented By

FIRSTMAINSTREET INSURANCE
500 1ST ST SE
PO BOX 1863
CEDAR RAPIDS, IA 52401-2002
AGENT NO. C0136
AGENT PHONE: 319-364-5193
CLAIM REPORTING: 888-362-2255
SERVICING CARRIER: 612-643-4700

This policy renewal is offered contingent upon the receipt of payment which is due on **08/01/2025**.

Limits of Insurance

Each Occurrence Limit	\$1,000,000
Damage To Premises Rented To You Limit	\$500,000 (any one premises)
Medical Expense Limit	\$10,000 (any one person)
Personal and Advertising Injury Limit	\$1,000,000 (any one person or organization)
General Aggregate Limit	\$2,000,000
Products/Completed Operations Aggregate Limit	\$2,000,000

Coverages Provided

Other Than Products/Completed Operations	\$12,240.00
Total Estimated Policy Premium	\$12,240.00

See attached schedule for location of all premises owned, rented or occupied.

Forms Applicable

CG0001(04/13), CG0069(12/23), CG0122(12/07), CG0435(12/07), CG2002(11/85), CG2106(12/23), CG2147(12/07), CG2167(12/04), CG2170(01/15), CG2230(07/98), CG2271(12/19), CG2294(10/01), CG2605(02/07), CG2681(12/04), CG4032(05/23), CG4035(12/23), CG7001A(10/12), CG7003(10/13), CG7114(01/21), CG7117.1(10/01), CG7185(10/13), CG7551(10/19), CG7614(10/19), CG7627(01/21), CG7690(08/14), CG7699(01/21), CG7740(11/20), CG7748(10/22), CG8301(10/22), CG8318(12/23), CG9909(12/19), IL0017(11/98), IL0021(09/08), IL0245(09/08), IL7004(03/20), IL7131A(04/01), IL7168(01/22), IL8383.2A(12/20), IL8384A(01/08), IL8576(10/17)

Audit Period: Annual

General Liability Summary Proposal

Endorsement Schedule

Form	Edition Date	Description/Additional Information	Premium
CG 00 01	04 13	Commercial General Liability Coverage Form	
CG 00 69	12 23	Exclusion - Violation of Law Addressing Data Privacy	
CG 01 22	12 07	Minnesota Changes - Contractual Liability Exclusion And Supplementary Payments	
CG 04 35	12 07	Employee Benefits Liability Coverage Each Employee Limit \$1,000,000 Aggregate Limit \$2,000,000 Each Employee Deductible \$1,000 Retroactive Date 07/01/2024	
CG 20 02	11 85	Additional Insured - Club Members	
CG 21 06	12 23	Exclusion- Access or Disclosure of Confidential or Personal Material or Information	
CG 21 47	12 07	Employment-Related Practices Exclusion	
CG 21 67	12 04	Fungi Or Bacteria Exclusion	
CG 21 70	01 15	Cap On Losses From Certified Acts Of Terrorism	
CG 22 30	07 98	Exclusion - Corporal Punishment	
CG 22 71	12 19	Colleges Or Schools (Limited Form)	
CG 22 94	10 01	Exclusion - Damage To Work Performed By Subcontractors On Your Behalf	
CG 26 05	02 07	Minnesota Changes	
CG 26 81	12 04	Minnesota Changes - Duties Condition	
CG 40 32	05 23	Exclusion-Perfluoroalkyl and Polyfluoroalkyl Substances	
CG 40 35	12 23	Exclusion - Cyber Incident	
CG 70 01A	10 12	General Liability Schedule	
CG 70 03	10 13	GL Quick Reference (Occurrence)	
CG 71 14	01 21	Trampoline Exclusion	
CG 71 17.1	10 01	Tort Liability Of Governmental Subdivisions-Minnesota	
CG 71 85	10 13	Exclusion - Lead	
CG 75 51	10 19	Abuse Or Molestation Liability	

**Employers Mutual Casualty Company**

Quote: BCCC429 - Option 002

Prepared on 06/10/2025

Policy Term: 07/01/2025-07/01/2026

Valid Through: 07/25/2025

Form	Edition Date	Description/Additional Information	Premium
CG 76 14	10 19	School Violent Event Response Coverage Aggregate Limit \$1,000,000 Each Event Limit \$1,000,000 Each Person Limit \$25,000	
CG 76 27	01 21	Amendment of Employee Benefits Program Definition	
CG 76 90	08 14	School Key Person Special Expenses Coverage Aggregate Limit \$50,000	
CG 76 99	01 21	General Liability Schools Elite Extension	
CG 77 40	11 20	Communicable Disease Exclusion - Pandemic, Epidemic or Public Health Emergency	
CG 77 48	10 22	Cannabis Exclusion With Limited Exception For Retail Sales Of CBD Products And Hemp Exception	
CG 83 01	10 22	Important Notice to Policyholders	
CG 83 18	12 23	Cyber Incident and Data Privacy Exclusion Endorsement Advisory Notice to Policyholders	
CG 99 09	12 19	Premium Audit Noncompliance Charge Audit Noncompliance Charge Factor 1 Number of Written Attempts To Obtain Audit Information 2 Reassessment Charge 0	
IL 00 17	11 98	Common Policy Conditions	
IL 00 21	09 08	Nuclear Energy Liability Exclusion Endorsement	
IL 02 45	09 08	Minnesota Changes - Cancellation And Nonrenewal	
IL 70 04	03 20	Mutual Policy Provisions	
IL 71 31A	04 01	Commercial Policy Endorsement Schedule	
IL 71 68	01 22	Asbestos Exclusion	
IL 83 83.2A	12 20	Disclosure Pursuant To Terrorism Risk Insurance Act	\$99.00
IL 83 84A	01 08	Notice	
IL 85 76	10 17	Important Notice To Policyholders	



Terrorism Notice

This insurance may include coverage for certified acts of terrorism as defined in the terrorism risk insurance act, as amended.

Attached you will find a disclosure, which identifies the specific charge for certified acts of terrorism.

You may have the option to reject this terrorism coverage.

For additional information, please contact your agent.



This endorsement is attached to and made part of your policy in response to the disclosure requirements of the Terrorism Risk Insurance Act. This endorsement does not grant any coverage or change the terms and conditions of any coverage under the policy.

Disclosure Pursuant to Terrorism Risk Insurance Act

Schedule

Terrorism Premium (Certified Acts)	\$99.00
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A. Disclosure Of Premium:

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorism acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

B. Disclosure Of Federal Participation In Payment Of Terrorism Losses:

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals 80% of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

C. Cap On Insurer Participation In Payment Of Terrorism Losses:

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rate allocations in accordance with the procedures established by the Secretary of the Treasury.

The following statement is required to be part of the disclosure notice in MISSOURI:

The premium above is for certain losses resulting from certified acts of terrorism as covered pursuant to coverage provisions, limitations and exclusions in this policy. You should read the definition in your policy carefully, but generally speaking, "certified" acts of terrorism are acts that exceed \$5 million in aggregate losses to the insurance industry and which are subsequently declared by the U.S. Secretary of Treasury as a certified terrorist act under the Terrorism Risk Insurance Act. Some losses resulting from certified acts of terrorism are not covered. Read your policy and endorsements carefully.



General Liability Summary Proposal

Code No./Exposure/Classification	Products/ Compl Ops Rate	Products/ Compl Ops Advance Prem	All Other Rate	All Other Advance Prem
Location 000				
Abuse Or Molestation Liability				\$1,005
Employee Benefits Liability				\$279
Exclusion - Damage To Work Performed By Subcontractors On Your Behalf				(\$290)
Fungi Or Bacteria Exclusion				(\$97)
Location MN				
School Key Person Special Expenses				\$250
School Violent Event Response				\$1,015
Location 001				
44194 Grandstands or Bleachers - Not-For-Profit only Prem Basis: Number of Grandstands or Bleachers Exposure: 1 Products/Completed Operations are subject to the General Aggregate Limit			1.782	\$2
47471 Schools - public - elementary, kindergarten or junior high Prem Basis: Per Student Exposure: 780 Products/Completed Operations are subject to the General Aggregate Limit			6.764	\$5,277
47473 Schools - public - high Prem Basis: Per Student Exposure: 390 Products/Completed Operations are subject to the General Aggregate Limit			8.847	\$3,450

Policy Level Coverages

Coverages	Limit of Insurance	Premium
General Liability Elite Extension		\$300
Premium For Certified Acts of Terrorism		\$99.00
Total Estimated Policy Premium		\$12,240.00



Location of All Premises Owned, Rented or Occupied

Rated Locations	
Location 1	1401 7th St SW Pipestone, MN 56164
Location 2	900 6th Ave SW Pipestone, MN 56164-1031
Location 3	SECTION 11-106-46 PIPESTON, MN 56164



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: E045582-04

Q U O T A T I O N - B U S I N E S S A U T O P O L I C Y

QUOTATION IS VALID: FROM 06/10/25 TO 07/01/25
PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R	P R E S E N T E D B Y
PIPESTONE AREA SCHOOLS ISD 2689 1401 7TH ST SW PIPESTONE MN 56164-1877	FirstMainstreet Insurance 500 1ST ST SE PO Box 1863 CEDAR RAPIDS IA 52401-2002

DIRECT BILL

AGENT: AC 0136

AGENT PHONE: (319) 364-5193

INSURED IS: SCHOOL

BUSINESS DESC: PUBLIC EDUCATION

COVERAGES	COV AUTOS	LIMITS/DEDUCTIBLES	P R E M I U M
COVERED AUTOS LIABILITY	01	\$ 1,000,000	4,126.00
PERSONAL INJURY PROT.	05		162.00
UNINSURED MOTORISTS	06	SEE ENDORSEMENT CA7093A	282.00
UNDERINSURED MOTORISTS	06	SEE ENDORSEMENT CA7093A	906.00
PHYSICAL DAMAGE COVERAGE			
COMPREHENSIVE	07		2,230.00
COLLISION	07		2,156.00
HIRED OR BORROWED AUTO			151.00
NON-OWNERSHIP LIABILITY	EMPLOYEES: 26 - 100		575.00
PREMIUM FOR ENDORSEMENTS			736.00
ESTIMATED TOTAL POLICY PREMIUM			11,324.00

AS QUOTED ON: 06/10/25 (BPP)

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: E045582-04

PIPESTONE AREA SCHOOLS ISD

EFF DATE: 07/01/25

EXP DATE: 07/01/26

COMMERCIAL AUTO POLICY QUOTE

ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*CA0001	11-20	BUSINESS AUTO COVERAGE FORM TERRORISM COVG INCL IN MAIN COV FORM	\$ 19
*CA0138	05-20	MINNESOTA CHANGES	
*CA0194	10-13	MINNESOTA GARAGEKEEPERS ENDORSEMENT	
*CA0194A	10-13	MINNESOTA GARAGEKEEPERS ENDORSEMENT	
*CA0218	11-22	MN CHANGES - CANCELLATION/NONRENEWAL	
*CA2124	05-20	MN UNINSURED/UNDERINSURED MOTORISTS	
*CA2225	02-21	MINNESOTA PERSONAL INJURY PROTECTION THE NAMED INSURED DOES NOT ELECT TO ADD TOGETHER 2 OR MORE PERSONAL INJURY PROTECTION COVERAGES.	
*CA7001A	02-22	COMM AUTO DECLARATIONS/ADDIT'L ITEMS	
*CA7002A	02-22	COMM AUTO DECLARATIONS - ITEMS 4 & 5	
*CA7007	11-20	QUICK REFERENCE BUSINESS AUTO FORM	
*CA7093A	02-22	UM/UIM SUPPLEMENTAL SCHEDULE	
*CA7313	11-15	PREJUDGMENT INTEREST	
*CA7493	09-24	COMMERCIAL AUTO ELITE EXT SCHOOLS	
*CA8259	05-16	IMPORTANT NOTICE NO FAULT COVERAGE	
*CA8301	02-18	MN UM/UIM REJECTION FORM	
*CA8346	05-20	IMPORTANT NOTICE TO POLICYHOLDERS	
*IL0017	11-98	COMMON POLICY CONDITIONS	
*IL0021	09-08	NUCLEAR ENERGY LIAB EXCL/BROAD FORM	
*IL7004	03-20	MUTUAL POLICY PROVISIONS	
*IL7130A	04-01	NAMED INSURED ENDORSEMENT	
*IL7131A	04-01	COMM'L POLICY ENDORSEMENT SCHEDULE	
*IL8042	09-95	SUMMARY OF CRIMINAL PENALTIES	
*IL8576	10-17	MEDICARE IMPT NOTICE TO POLICYHOLDER	

AS QUOTED ON: 06/10/25



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

Q U O T A T I O N - N A M E D I N S U R E D

QUOTE NUMBER
E045582-04

PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R :

P R E S E N T E D B Y :

PIPESTONE AREA SCHOOLS ISD
2689
1401 7TH ST SW
PIPESTONE MN 56164-1877

FirstMainstreet Insurance
500 1ST ST SE
PO Box 1863
CEDAR RAPIDS IA 52401-2002

DIRECT BILL

AGENT: AC 0136

AGENT PHONE: (319) 364-5193

IT IS HEREBY AGREED AND UNDERSTOOD THAT THE NAMED INSURED
IS AMENDED TO READ AS FOLLOWS:

1ST NAMED INSURED:
PIPESTONE AREA SCHOOLS ISD 2689

AS QUOTED ON: 06/10/25



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER E045582-04

PIPESTONE AREA SCHOOLS ISD 268 EFF DATE: 07/01/25

EXP DATE: 07/01/26

COMMERCIAL AUTO DECLARATIONS - BUSINESS AUTO COVERAGE FORM

SUPPLEMENTARY SCHEDULE

ITEM TWO - UNINSURED MOTORISTS COVERAGE AND UNDERINSURED MOTORISTS COVERAGE

THE LIMIT OF INSURANCE FOR THE COVERAGE SHOWN BELOW IS THE LIMIT OF INSURANCE SHOWN FOR THE STATE WHERE A COVERED 'AUTO' IS PRINCIPALLY GARAGED. REFER TO THE SPECIFIC COVERAGE ENDORSEMENT FOR THE DESCRIPTION OF THE COVERAGE PROVIDED FOR EACH STATE LISTED BELOW.

COVERAGE

UNINSURED MOTORISTS LIMIT OF INSURANCE

	"BODILY INJURY" AND "PROPERTY DAMAGE" COMBINED ST SINGLE LIMIT	"BODILY INJURY" EACH PERSON EACH "ACCIDENT"	"BODILY INJURY" EACH "ACCIDENT"	"PROPERTY DAMAGE" EACH "ACCIDENT"
MN			\$ 1,000,000	

UNDERINSURED MOTORISTS LIMIT OF INSURANCE

(WHEN NOT INCLUDED IN UNINSURED MOTORISTS COVERAGE)

	"BODILY INJURY" AND "PROPERTY DAMAGE" COMBINED ST SINGLE LIMIT	"BODILY INJURY" EACH PERSON EACH "ACCIDENT"	"BODILY INJURY" EACH "ACCIDENT"	"PROPERTY DAMAGE" EACH "ACCIDENT"
MN			\$ 1,000,000	

AS QUOTED ON: 06/10/25 (BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD 268

EFF DATE: 07/01/25

QUOTE NUMBER E045582-04
EXP DATE: 07/01/26

COMMERCIAL AUTO DECLARATIONS - BUSINESS AUTO

ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN

COVERED AUTO DESCRIPTION / COVERAGE . PREMIUM

LOC: 001 1401 7TH ST SW
PIPESTONE MN. 56164-1877

VEH NO 1 TERR: 115 .
2002 DODGE CARAVAN ID NO 1B4GP264312B69228.
ADDITIONAL INFORMATION:
COST NEW: 23730 RADIUS: LOCAL USE: SERVICE .
AGE: LIAB-U PHYS-U .
LIGHT TRUCK CLASS: 01499 .
COVERED AUTOS LIABILITY . \$ 293.00
PERSONAL INJURY PROTECTION 0 DED . 11.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED
COMPREHENSIVE ACV 1000 DED . 76.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION	ACV	1000 DED	.	102.00
TOTAL VEHICLE PREMIUM			.\$	590.00

VEH NO 2 TERR: 115 .
2019 CHEVROLET SUBURBAN ID NO 1GNSKGECKXR157829.
ADDITIONAL INFORMATION:
COST NEW: 53600 RADIUS: LOCAL USE: SERVICE .
AGE: LIAB-B PHYS-B .
LIGHT TRUCK CLASS: 01499 .
COVERED AUTOS LIABILITY . \$ 458.00
PERSONAL INJURY PROTECTION 0 DED . 11.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED
COMPREHENSIVE ACV 1000 DED . 301.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION	ACV	1000 DED	.	286.00
TOTAL VEHICLE PREMIUM			.\$	1,164.00

AS QUOTED ON: 06/10/25 (BPP)

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD 268

EFF DATE: 07/01/25

QUOTE NUMBER E045582-04
EXP DATE: 07/01/26

VEH NO 3 TERR: 115
2007 GMC-CHEVY K24 HD ID NO 1GTHK24K47E593427.
ADDITIONAL INFORMATION:
COST NEW: 24955 RADIUS: LOCAL USE: SERVICE .
AGE: LIAB-N PHYS-N .
LIGHT TRUCK CLASS: 01499 .
COVERED AUTOS LIABILITY . \$ 316.00
PERSONAL INJURY PROTECTION 0 DED . 11.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED
COMPREHENSIVE ACV 1000 DED . 95.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION	ACV	1000 DED	.	102.00
TOTAL VEHICLE PREMIUM			.\$	632.00

VEH NO 4 TERR: 115
2013 DODGE GRAND CARA ID NO 2C4RDGBG8DR765211.
ADDITIONAL INFORMATION:
COST NEW: 19995 RADIUS: LOCAL USE: SERVICE .
AGE: LIAB-H PHYS-H .
LIGHT TRUCK CLASS: 01499 .
COVERED AUTOS LIABILITY . \$ 343.00
PERSONAL INJURY PROTECTION 0 DED . 11.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED
COMPREHENSIVE ACV 1000 DED . 116.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION	ACV	1000 DED	.	102.00
TOTAL VEHICLE PREMIUM			.\$	680.00

VEH NO 5 TERR: 115
1995 FORD F-150 ID NO 1FTEF15N1SLB74269.
ADDITIONAL INFORMATION:
COST NEW: 14256 RADIUS: LOCAL USE: SERVICE .
AGE: LIAB-Z PHYS-Z .
LIGHT TRUCK CLASS: 01499 .
COVERED AUTOS LIABILITY . \$ 259.00
PERSONAL INJURY PROTECTION 0 DED . 11.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED

AS QUOTED ON: 06/10/25 (BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD 268

EFF DATE: 07/01/25

QUOTE NUMBER E045582-04
EXP DATE: 07/01/26

COMPREHENSIVE ACV 1000 DED . 76.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION ACV 1000 DED . 102.00
TOTAL VEHICLE PREMIUM . \$ 556.00

VEH NO 6 TERR: 115 .
2017 CHEVROLET SUBURBAN ID NO 1GNSKGEC4HR234753.
ADDITIONAL INFORMATION:
COST NEW: 52915 RADIUS: LOCAL USE: SERVICE .
AGE: LIAB-D PHYS-D .
LIGHT TRUCK CLASS: 01499 .
COVERED AUTOS LIABILITY . \$ 432.00
PERSONAL INJURY PROTECTION 0 DED . 11.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED
COMPREHENSIVE ACV 1000 DED . 268.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION ACV 1000 DED . 229.00
TOTAL VEHICLE PREMIUM . \$ 1,048.00

VEH NO 7 TERR: 115 .
2019 CHEVROLET EQUINOX ID NO 2GNAXUEV7K6201343.
ADDITIONAL INFORMATION:
COST NEW: 28800 RADIUS: USE: NA .
AGE: LIAB-b PHYS-B .
DRIVER TRNG-EDUC. VEH CLASS: 7202 .
COVERED AUTOS LIABILITY . \$ 501.00
PERSONAL INJURY PROTECTION 0 DED . 43.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED

AS QUOTED ON: 06/10/25 (BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD 268

EFF DATE: 07/01/25

QUOTE NUMBER E045582-04
EXP DATE: 07/01/26

COMPREHENSIVE ACV 1000 DED . 315.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION ACV 1000 DED . 217.00
TOTAL VEHICLE PREMIUM . \$ 1,236.00

VEH NO 8 TERR: 115 .
2022 CHEVROLET SUBURBAN ID NO 1GNSKBEDXNR136723.
ADDITIONAL INFORMATION:
COST NEW: 55400 RADIUS: LOCAL USE: SERVICE .
AGE: LIAB-4 PHYS-4 .
LIGHT TRUCK CLASS: 01499 .
COVERED AUTOS LIABILITY . \$ 497.00
PERSONAL INJURY PROTECTION 0 DED . 11.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED
COMPREHENSIVE ACV 1000 DED . 395.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION ACV 1000 DED . 421.00
TOTAL VEHICLE PREMIUM . \$ 1,432.00

VEH NO 9 TERR: 115 .
2023 CHEVROLET SUBURBAN ID NO 1GNSKBKD1PR126900.
ADDITIONAL INFORMATION:
COST NEW: 58695 RADIUS: LOCAL USE: SERVICE .
AGE: LIAB-3 PHYS-3 .
LIGHT TRUCK CLASS: 01499 .
COVERED AUTOS LIABILITY . \$ 488.00
PERSONAL INJURY PROTECTION 0 DED . 11.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED

AS QUOTED ON: 06/10/25 (BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD 268

EFF DATE: 07/01/25

QUOTE NUMBER E045582-04
EXP DATE: 07/01/26

COMPREHENSIVE ACV 1000 DED . 417.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION	ACV	1000 DED	.	450.00
TOTAL VEHICLE PREMIUM			.\$	1,474.00

VEH NO 10 TERR: 115 (9 MOS RATING) .
2023 GMC-CHEVY G3500 ID NO 1GB3GSB78P1125531.
ADDITIONAL INFORMATION:
COST NEW: 47880 RADIUS: LOCAL USE: NA .
AGE: LIAB-3 PHYS-3 .
SCHOOL BUS-PUBLIC CLASS: 6181 .
COVERED AUTOS LIABILITY . \$ 244.00
PERSONAL INJURY PROTECTION 0 DED . 14.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED
COMPREHENSIVE ACV 2000 DED . 124.00
\$ 2000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION	ACV	2000 DED	.	117.00
TOTAL VEHICLE PREMIUM			.\$	581.00

VEH NO 11 TERR: 115 (9 MOS RATING) .
2003 GMC-CHEVY C34 ID NO 1GBJC34U53E149073.
ADDITIONAL INFORMATION:
COST NEW: 24780 RADIUS: LOCAL USE: NA .
AGE: LIAB-x PHYS-x .
SCHOOL BUS-PUBLIC CLASS: 6183 .
COVERED AUTOS LIABILITY . \$ 295.00
PERSONAL INJURY PROTECTION 0 DED . 17.00
UNINSURED MOTORISTS . INCLUDED
UNDERINSURED MOTORISTS . INCLUDED

AS QUOTED ON: 06/10/25 (BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD 268

EFF DATE: 07/01/25

QUOTE NUMBER E045582-04
EXP DATE: 07/01/26

COMPREHENSIVE ACV 1000 DED . 47.00
\$ 1000 DEDUCTIBLE FOR ALL PERILS FOR EACH COVERED AUTO
(A MAXIMUM DEDUCTIBLE MAY ALSO APPLY REFER TO COVERAGE FORM
FOR DETAILS.)

SEE ITEM FOUR FOR HIRED OR BORROWED AUTOS

COLLISION ACV 1000 DED . 28.00
TOTAL VEHICLE PREMIUM . \$ 469.00

PREMIUM SUMMARY

COVERED AUTOS LIABILITY	.\$	4,126.00
PERSONAL INJURY PROTECTION	.	162.00
UNINSURED MOTORISTS	.	282.00
UNDERINSURED MOTORISTS	.	906.00
COMPREHENSIVE	.	2,230.00
COLLISION	.	2,156.00
	.	-----
TOTAL	.\$	9,862.00

AS QUOTED ON: 06/10/25 (BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER E045582-04

PIPESTONE AREA SCHOOLS ISD 268 EFF DATE: 07/01/25

EXP DATE: 07/01/26

COMMERCIAL AUTO DECLARATIONS - BUSINESS AUTO

ITEM FOUR: SCHEDULE OF HIRED OR BORROWED COVERED AUTO
COVERAGE AND PREMIUMS

COVERED AUTOS LIABILITY COVERAGE - COST OF HIRE BASIS

FOR AUTOS NOT USED IN YOUR MOTOR

CARRIER OPERATIONS (OTHER THAN MOBILE OR FARM EQUIPMENT)

COVERED AUTOS STATE ESTIMATED ANNUAL COST OF	RATE	PREMIUM
LIABILITY COVERAGE	HIRE FOR ALL STATES	

EXCESS	MN	IF ANY	100	\$	151.00
FOR 'AUTOS' NOT USED IN YOUR MOTOR CARRIER OPERATIONS, COST OF HIRE MEANS THE TOTAL AMOUNT YOU INCUR FOR THE HIRE OF 'AUTOS' YOU DON'T OWN (NOT INCLUDING 'AUTOS' YOU BORROW OR RENT FROM YOUR PARTNERS OR 'EMPLOYEES' OR THEIR FAMILY MEMBERS). COST OF HIRE DOES NOT INCLUDE CHARGES FOR SERVICES PERFORMED BY MOTOR CARRIERS OF PROPERTY OR PASSENGERS.					

TOTAL PREMIUM	\$	151.00
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ITEM FIVE: SCHEDULE FOR NON-OWNERSHIP COVERED AUTOS LIABILITY

OTHER THAN A SOCIAL SERVICE AGENCY

NUMBER OF EMPLOYEES	26 - 100	\$	575.00
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TOTAL NON-OWNERSHIP COVERED AUTOS PREMIUM	\$	575.00
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AS QUOTED ON: 06/10/25 (BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER E045582-04

PIPESTONE AREA SCHOOLS ISD 268 EFF DATE: 07/01/25

EXP DATE: 07/01/26

ENDORSEMENT PREMIUM DETAIL

ENDORSEMENTS		CLASS	PREMIUM	
GARAGEKEEPERS COVERAGE	LOC 001	8554	\$	467.00
Auto Elite Extension School		8579	\$	250.00

AS QUOTED ON: 06/10/25 (BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER E045582-04

PIPESTONE AREA SCHOOLS ISD 268 EFF DATE: 07/01/25

EXP DATE: 07/01/26

MINNESOTA GARAGEKEEPERS COVERAGE

* SCHEDULE

LOCATIONS WHERE YOU CONDUCT YOUR GARAGE OPERATIONS

LOCATION NO.

001 1401 7TH ST SW
PIPESTONE, MN. 56164-1877

LOCATION NO.	COVERAGES	LIMIT OF INSURANCE AND DEDUCTIBLE	PREMIUM
001	COMPREHENSIVE	\$120,000 LIMIT OF INSURANCE \$ 500 DEDUCTIBLE FOR ALL PERILS FOR EACH CUSTOMER'S AUTO \$ 2,500 MAXIMUM DEDUCTIBLE FOR ALL LOSS IN ANY ONE EVENT.	\$ 246.00
	COLLISION	\$120,000 LIMIT OF INSURANCE \$ 500 DEDUCTIBLE FOR EACH CUSTOMER'S AUTO.	\$ 221.00
		TOTAL PREMIUM FOR LOCATION	\$ 467.00
		TOTAL GARAGEKEEPERS PREMIUM FOR ALL LOCATIONS	\$ 467.00
		COMPREHENSIVE	\$ 246.00
		COLLISION	\$ 221.00

GARAGEKEEPERS COVERAGE APPLIES ON A LEGAL LIABILITY BASIS.

*SEE FORM CA0194 FOR COVERAGE INFORMATION.

Commercial Auto

Coverage Highlights CA7450



EMC's Elite Commercial Auto Extension CA7450 is available for most policies.

Commercial Auto Coverage	CA7450
Airbag Accidental Discharge	Included; mechanical breakdown exclusion does not apply
Audio, Visual, Electronic Equipment Coverage	\$5,000 limit
Auto Loan Lease Gap Coverage	\$10,000; \$500 max for fees and penalties
Autos Rented or Hired by Employees	Included
Blanket Additional Insureds	Written agreement
Blanket Waiver of Subrogation	Included
Business Auto Conditions	Included
Duties in event of accident	Included
Unintentional failure to disclose exposures	Included
Data Electronic Equipment	\$5,000
Employees as Additional Insureds	Included
Extra Expense for Stolen Auto	\$1,000 limit
Fellow Employee	Included
Glass Repair or Replacement	No deductible glass repair; \$500 glass replacement
Hired Auto Physical Damage	\$100,000 limit
Hired Auto Physical Damage Lessors Loss	\$1,000
Liberalization	Automatic revisions
Lockout/Key Expense (including electronic)	\$250 private passenger
Loss of Two or More Covered Autos Same Accident	2X Highest Deductible
Mental Anguish	Included in definition of "bodily injury"
Newly Formed or Acquired Organizations	Up to 180 days after acquisition
Personal Effects	\$500 limit
Personal Property of Others	\$500 limit
Primary and NonContributory Other Insurance	Included
Rental Reimbursement: Not theft	\$75 day; 30 days; \$2,250 max
Replacement Cost on New Autos	Included; if less than 180 days
Subsidiaries as Insureds	When you own 50% of the voting stock on the effective date of this policy
Supplementary Payments	\$5,000 for bail bonds; \$500 loss of earnings
Temporary Substitute Autos: Physical damage coverage	Included
Towing	\$100 private passenger type; \$500 other than private passenger type
Transportation Expense: For total theft	\$75 per day; \$2,500 max
Vehicle Wrap Coverage	\$2,000
Vehicle Tracking	Included; 50% Comprehensive Deductible

Disclaimer: This is only a summary of coverage and is subject to policy conditions, limitations and exclusions that may vary from state to state. Please refer to the issued policy for specific details regarding coverages, conditions and exclusions. In the event of a conflict between the terms contained herein and the policy, the policy terms and conditions will prevail.



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: C045582-03

Q U O T A T I O N - C O M M E R C I A L I N L A N D M A R I N E

QUOTATION IS VALID: FROM 06/10/25 TO 07/01/25
PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R : P R E S E N T E D B Y :

PIPESTONE AREA SCHOOLS ISD
2689
1401 7TH ST SW
PIPESTONE MN 56164-1877

FirstMainstreet Insurance
500 1ST ST SE
PO Box 1863
CEDAR RAPIDS IA 52401-2002

DIRECT BILL

AGENT: AC 0136

AGENT PHONE: (319) 364-5193

INSURED IS: SCHOOL

BUSINESS DESC: PUBLIC EDUCATION

SEE ATTACHED SCHEDULE FOR LIMITS AND DESCRIPTION OF COVERAGES

C O V E R A G E S H E A D I N G S	P R E M I U M
#COMMERCIAL ARTICLES	\$ 170.00
ELECTRONIC DATA PROCESSING	\$ 4,600.00
TOTAL INLAND MARINE PREMIUM	\$ 4,770.00

A DEDUCTIBLE MAY APPLY FOR THE COVERAGE PROVIDED. IN THE EVENT A LOSS (OTHER THAN EARTHQUAKE) INVOLVES COVERED PROPERTY AT MORE THAN ONE LOCATION OR IN MORE THAN ONE CLASS, ONLY ONE DEDUCTIBLE, THE LARGEST DEDUCTIBLE SHOWN ON THE SCHEDULE FOR THE LOCATION OR CLASSES INVOLVED IN THE LOSS, WILL APPLY PER OCCURRENCE.

AS QUOTED ON: 06/10/25

(BPP)

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: C045582-03

PIPESTONE AREA SCHOOLS ISD

EFF DATE: 07/01/25

EXP DATE: 07/01/26

C O M M L I N L A N D M A R I N E P O L I C Y Q U O T E

ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*CL0100	03-99	COMMON POLICY CONDITIONS	
*CL0142	04-24	AMENDATORY ENDORSEMENT MINNESOTA	
*CL0600	01-15	CERTIFIED TERRORISM LOSS	
*CL0700	10-06	VIRUS OR BACTERIA EXCLUSION	
*CL0811	09-18	CANNABIS ITEMS AND ACTIVITIES EXCL	
*CM0001	09-04	COMM. INLAND MARINE CONDITIONS	
*CM0020	01-13	COMMERCIAL ARTICLES COVERAGE FORM	
*CM0117	05-20	MINNESOTA CHANGES	
*CM7001A	09-97	COMMERCIAL INLAND MARINE SCHEDULE	
*CM7002	09-00	QUICK REFERENCE	
*CM7004	09-06	QUICK REFERENCE	
*CM8068	12-19	ADVISORY NOTICE TO POLICYHOLDERS	
*CM9905	12-19	CANNABIS EXCLUSION	
*IL0017	11-98	COMMON POLICY CONDITIONS	
*IL0245	09-08	MN CHANGES - CANCELLATION/NONRENEWAL	
*IL0952	01-15	CAP/LOSSES/CERTIFD ACTS OF TERRORISM	
*IL7004	03-20	MUTUAL POLICY PROVISIONS	
*IL7130A	04-01	NAMED INSURED ENDORSEMENT	
*IL7131A	04-01	COMM'L POLICY ENDORSEMENT SCHEDULE	
*IL7306	08-98	EXCLUSION OF CERTAIN COMPUTER LOSSES	
*IL8383.2A	12-20	DISCL PURSUANT TERRSM RISK INS. ACT	WAIVED
*IL8491	04-19	DISCLOSURE NOTICE CANNABIS EXCLUSION	
*IM2047	05-12	AMENDATORY ENDORSEMENT MINNESOTA	
*IM7202	10-02	EDP EQUIPMENT COVERAGE - BLANKET	
*IM7231	05-01	COINSURANCE PROVISIONS	
*IM7238	10-02	EARTHQUAKE, FLOOD AND SEWER BACKUP	

AS QUOTED ON: 06/10/25

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD

QUOTE NUMBER: C045582-03
EFF DATE: 07/01/25 EXP DATE: 07/01/26

THIS ENDORSEMENT IS ATTACHED TO AND MADE PART OF YOUR POLICY IN RESPONSE TO THE DISCLOSURE REQUIREMENTS OF THE TERRORISM RISK INSURANCE ACT. THIS ENDORSEMENT DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER THE POLICY.

DISCLOSURE PURSUANT TO
TERRORISM RISK INSURANCE ACT

SCHEDULE

Terrorism Premium (Certified Acts) Waived

A. Disclosure Of Premium:

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

B. Disclosure Of Federal Participation In Payment Of Terrorism Losses:

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals 80% of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

C. Cap On Insurer Participation In Payment Of Terrorism Losses:

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

The following statement is required to be part of the disclosure notice in MISSOURI:

The premium above is for certain losses resulting from certified acts of terrorism as covered pursuant to coverage provisions, limitations and exclusions in this policy. You should read the definition in your policy carefully, but generally speaking, "certified" acts of terrorism are acts that exceed \$5 million in aggregate losses to the insurance industry and which are subsequently declared by the U.S. Secretary of the Treasury as a certified terrorist act under the Terrorism Risk Insurance Act. Some losses resulting from certified acts of terrorism are not covered. Read your policy and endorsements carefully.



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

Q U O T A T I O N - N A M E D I N S U R E D

QUOTE NUMBER
C045582-03

PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R :	P R E S E N T E D B Y :
PIPESTONE AREA SCHOOLS ISD 2689 1401 7TH ST SW PIPESTONE MN 56164-1877	FirstMainstreet Insurance 500 1ST ST SE PO Box 1863 CEDAR RAPIDS IA 52401-2002

DIRECT BILL	AGENT: AC 0136 AGENT PHONE: (319) 364-5193
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IT IS HEREBY AGREED AND UNDERSTOOD THAT THE NAMED INSURED
IS AMENDED TO READ AS FOLLOWS:

1ST NAMED INSURED:
PIPESTONE AREA SCHOOLS ISD 2689

AS QUOTED ON: 06/10/25

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NO: C045582-03

PIPESTONE AREA SCHOOLS ISD 268 EFF DATE: 07/01/25

EXP DATE: 07/01/26

C O M M E R C I A L I N L A N D M A R I N E S C H E D U L E

P O L I C Y W I D E C O V E R A G E S

CLASS/ITEM	DESCRIPTION	*SPEC INTEREST	LIMITS
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ELECTRONIC DATA PROCESSING

863 ELECTRONIC DATA PROCESSING - BLANKET LIMITS

\$ 1,000 DEDUCTIBLE APPLIES TO ALL COVERED PERILS
UNLESS A DIFFERENT DEDUCTIBLE IS INDICATED BELOW
NOT COVERED DEDUCTIBLE - EARTHQUAKE AND VOLCANIC ERUPTION
NOT COVERED DEDUCTIBLE - "FLOOD"
NOT COVERED DEDUCTIBLE - "MECHANICAL BREAKDOWN", "ELECTRICAL
DISTURBANCE" AND "POWER SUPPLY DISTURBANCE"

COINSURANCE WAIVED-"hardware","media",& "programs and applications"
COINSURANCE WAIVED-"data records" and "proprietary programs"

\$ 1,810,000	EARTHQUAKE "AGGREGATE" LIMIT
\$ 1,810,000	EARTHQUAKE "OCCURRENCE" LIMIT
\$ 1,810,000	EARTHQUAKE "CATASTROPHE" LIMIT
NOT COVERED	FLOOD "AGGREGATE" LIMIT
NOT COVERED	FLOOD "OCCURRENCE" LIMIT
NOT COVERED	FLOOD "CATASTROPHE" LIMIT
\$ 1,810,000	SEWER BACKUP "AGGREGATE" LIMIT
\$ 1,810,000	SEWER BACKUP "OCCURRENCE" LIMIT
\$ 1,810,000	SEWER BACKUP "CATASTROPHE" LIMIT

COVERAGE LIMITS

\$ 1,810,000 CATASTROPHE LIMIT- THE MOST "WE" PAY FOR ANY COMBINATION
OF OR TOTAL OF LOSSES ARISING UNDER ONE OR MORE
COVERAGES IN ANY ONE OCCURRENCE

EQUIPMENT LIMITS

\$ 1,300,000	HARDWARE - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION
NOT COVERED	PROTECTION AND CONTROL SYSTEMS - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION
NOT COVERED	TELECOMMUNICATIONS EQUIPMENT - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION
NOT COVERED	REPRODUCTION EQUIPMENT - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NO: C045582-03

PIPESTONE AREA SCHOOLS ISD 268 EFF DATE: 07/01/25

EXP DATE: 07/01/26

C O M M E R C I A L I N L A N D M A R I N E S C H E D U L E

SOFTWARE LIMITS

\$ 510,000	SOFTWARE LIMITS - SOFTWARE
INCLUDED	DATA RECORDS - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION
INCLUDED	PROPRIETARY PROGRAMS - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION
INCLUDED	PROGRAMS AND APPLICATIONS - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION
INCLUDED	MEDIA - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION

INCOME COVERAGE -

NOT COVERED	INCOME COVERAGE - THE MOST "WE" PAY FOR LOSS AT ANY ONE LOCATION
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COVERAGE EXTENSIONS

Additional Debris Removal Expenses	\$ 25,000
ELECTRICAL AND POWER SUPPLY DISTURBANCE	COVERED
Emergency Removal (Number of DAYS)	365
Emergency Removal Expenses	\$ 5,000
Fraud and Deceit	\$ 5,000
MECHANICAL BREAKDOWN COVERAGE	COVERED

SUPPLEMENTAL COVERAGES

Acquired Locations	\$ 500,000
Earthquake Coverage	COVERED
Flood Coverage	NOT COVERED
FOREIGN TRANSIT AND LOCATION COVERAGE	\$ 5,000
Incompatible Hardware and Media	\$ 10,000
NEWLY PURCHASED OR LEASED HARDWARE	\$ 500,000
Off-Site Computers	\$ 10,000
Pollutant Cleanup and Removal	\$ 15,000
Property in Transit	\$ 15,000
RECHARGE OF FIRE EXTINGUISHING EQUIPMENT	\$ 15,000
Sewer Backup	COVERED
REWARDS	\$ 5,000
Software Storage	\$ 50,000
Virus and Hacking	
Limit any one occurrence	\$ 50,000
Limit each separate 12 month period	\$ 150,000



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

PIPESTONE AREA SCHOOLS ISD 268 EFF DATE: 07/01/25

QUOTE NO: C045582-03

EXP DATE: 07/01/26

C O M M E R C I A L I N L A N D M A R I N E S C H E D U L E

PREMIUM	\$	4,600
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LOCATION: 001 1401 7TH ST SW
PIPESTONE, MN 56164-1877

CLASS	DESCRIPTION	SPECIAL* INTEREST	LIMITS
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COMMERCIAL ARTICLES

454 MUSICAL INSTRUMENTS - ALL OTHER BANDS, ETC.

\$ 1,000 DEDUCTIBLE APPLIES PER OCCURRENCE TO THE FOLLOWING ITEMS

001	FINE ARTS INSTRUMENT	\$	525,000
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PREMIUM	\$	170
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AS QUOTED ON: 06/10/25

(BPP)



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

Quote Number: J045582-07

Q U O T A T I O N C O M M E R C I A L U M B R E L L A

Quotation is Valid From 06/10/25 to 07/25/25
Proposed Policy Period: From 07/01/25 to 07/01/26
(Quote may be subject to change)

P R E P A R E D F O R :

PIPESTONE AREA SCHOOLS ISD
2689
1401 7TH ST SW
PIPESTONE MN 56164-1877

P R E S E N T E D B Y :

FirstMainstreet Insurance
500 1ST ST SE
PO Box 1863
CEDAR RAPIDS IA 52401-2002

D I R E C T B I L L

AGENT: AC 0136
AGENT PHONE: (319)364-5193

Insured is SCHOOL Business Desc: PUBLIC EDUCATION

L I M I T S O F I N S U R A N C E

Each Occurrence Limit (Liability Coverage) \$ 3,000,000

Personal & Advertising Injury Limit \$ 3,000,000
(Any one person or organization)

Aggregate Limit (Liability Coverage) \$ 3,000,000
(except with respect to "covered autos")

PREMIUM NOT SUBJECT TO AUDIT \$ 4,303.00

A \$100 MINIMUM POLICY PREMIUM APPLIES
IF POLICY IS CANCELLED AFTER THE EFFECTIVE DATE.

AS QUOTED ON: 06/10/25 BPP

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: J045582-07

PIPESTONE AREA SCHOOLS ISD

EFF DATE: 07/01/25

EXP DATE: 07/01/26

COMMERCIAL UMBRELLA POLICY QUOTE

ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*CU0001	04-13	COMM LIABILITY UMBRELLA COV FORM	
*CU0005	12-23	EXCL-VIOLATION/LAW ADDRESSING DATA	
*CU0106	12-07	MINNESOTA CHANGES	
*CU0403	12-19	EMPLOYEE BENEFITS LIABILITY COVERAGE	
		LIMITS OF INSURANCE	
		\$ 10,000 RETAINED LIMIT	
		\$ 3,000,000 EACH EMPLOYEE	
		\$ 3,000,000 AGGREGATE	
		RETROACTIVE DATE: 07/01/2024	
*CU2123	02-02	NUCLEAR ENERGY LIAB EXCL BROAD FORM	
*CU2127	12-04	FUNGI OR BACTERIA EXCLUSION	
*CU2130	01-15	CAP OF LOSSES FROM CERT ACTS OF TERR	
*CU2136	01-15	EXCL PUNITIVE DMG CERT ACTS OF TERR	
*CU2171	06-15	EXCLUSION-UNMANNED AIRCRAFT	
*CU2186	12-23	EXCL-ACCESS/DISCL OF CONFID/PERSONAL	
*CU2202	09-00	EXCL - CORPORAL PUNISHMENT	
*CU2264	12-01	EXCL - DAMAGE TO WORK PERF BY SUB	
*CU3444	09-22	BROAD ABUSE OR MOLESTATION EXCLUSION	
*CU3454	05-23	EXCL PERFLUOROALKYL/POLYFLUROALKYL	
*CU3456	12-23	CYBER INCIDENT	
*CU7001A	11-15	SCHED OF PRIMARY INS - AUTOMATED	
*CU7275	08-06	COLLEGES AND SCHOOLS RESTRICTIVE END	
*CU7276	03-21	COMMERCIAL UMBRELLA AMENDMENT OF COV	
*CU7290.1	10-23	LINEBACKER PUBLIC OFFICIALS/EPL END	
		PUBLIC OFFICIALS WRONGFUL ACT	
		AND EMPLOYMENT PRACTICES LIABILITY	
		RETROACTIVE DATE: 07/01/2024	
*CU7293	08-06	FOREIGN EXPOSURE FOLLOWING FORM	
*CU7299	08-06	EXCLUSION - LEAD	
*CU7346	11-20	COMMUNICABLE DISEASE EXCLUSION	
*CU7404.1	10-08	UMBRELLA LIAB AMEND - FOLLOW FORM	
*CU7431	10-08	AMENDMENT OF EMPLOYEE BENEFITS PROG	
*CU7441	05-19	EXCLUSION-VIOLENT EVENT RESPONSE COV	
*CU7464	07-15	LAW ENFORCEMENT LIABILITY	
*CU7486	10-22	CANNABIS EXCL/EXCP RETAIL SALES CBD	
*CU7487	07-23	ABUSE OR MOLESTATION LIAB SUB/OCCUR	
		ABUSE OR MOLESTATION LIABILITY SUBLIMIT	
		WITHIN POLICY LIMIT	
		ABUSE OR MOLESTATION LIABILITY EACH	
		OCCURRENCE LIMIT:	\$3,000,000
		ABUSE OR MOLESTATION LIABILITY	
		AGGREGATE LIMIT:	\$3,000,000
*CU8160	12-23	CYBER INCIDENT/DATA PRIVACY EXCL PH	
*IL0017	11-98	COMMON POLICY CONDITIONS	
*IL7004	03-20	MUTUAL POLICY PROVISIONS	

AS QUOTED ON: 06/10/25



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: J045582-07

PIPESTONE AREA SCHOOLS ISD

EFF DATE: 07/01/25

EXP DATE: 07/01/26

C O M M E R C I A L U M B R E L L A P O L I C Y
Q U O T E

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ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*IL7130A	04-01	NAMED INSURED ENDORSEMENT	
*IL7131A	04-01	COMM'L POLICY ENDORSEMENT SCHEDULE	
*IL7168	01-22	ASBESTOS EXCLUSION	
*IL8383.2A	12-20	DISCL PURSUANT TERRSM RISK INS. ACT	\$ 43
*IL8384A	01-08	TERRORISM NOTICE	
*IL8771	10-23	IMPORTANT NOTICE TO POLICYHOLDER	

AS QUOTED ON: 06/10/25



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD

QUOTE NUMBER: J045582-07
EFF DATE: 07/01/25 EXP DATE: 07/01/26

T E R R O R I S M N O T I C E

This insurance may include coverage for certified acts of terrorism as defined in the Terrorism Risk Insurance Act, as amended.

Attached you will find a disclosure, which identifies the specific charge for certified acts of terrorism.

YOU MAY HAVE THE OPTION TO REJECT THIS TERRORISM COVERAGE

For additional information, please contact your agent

AS QUOTED ON: 06/10/25

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD

QUOTE NUMBER: J045582-07
EFF DATE: 07/01/25 EXP DATE: 07/01/26

THIS ENDORSEMENT IS ATTACHED TO AND MADE PART OF YOUR POLICY IN RESPONSE TO THE DISCLOSURE REQUIREMENTS OF THE TERRORISM RISK INSURANCE ACT. THIS ENDORSEMENT DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER THE POLICY.

DISCLOSURE PURSUANT TO
TERRORISM RISK INSURANCE ACT

SCHEDULE

Terrorism Premium (Certified Acts) \$43.00

A. Disclosure Of Premium:

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

B. Disclosure Of Federal Participation In Payment Of Terrorism Losses:

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals 80% of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

C. Cap On Insurer Participation In Payment Of Terrorism Losses:

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

The following statement is required to be part of the disclosure notice in MISSOURI:

The premium above is for certain losses resulting from certified acts of terrorism as covered pursuant to coverage provisions, limitations and exclusions in this policy. You should read the definition in your policy carefully, but generally speaking, "certified" acts of terrorism are acts that exceed \$5 million in aggregate losses to the insurance industry and which are subsequently declared by the U.S. Secretary of the Treasury as a certified terrorist act under the Terrorism Risk Insurance Act. Some losses resulting from certified acts of terrorism are not covered. Read your policy and endorsements carefully.



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

Q U O T A T I O N - N A M E D I N S U R E D

QUOTE NUMBER
J045582-07

PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R :

P R E S E N T E D B Y :

PIPESTONE AREA SCHOOLS ISD
2689
1401 7TH ST SW
PIPESTONE MN 56164-1877

FirstMainstreet Insurance
500 1ST ST SE
PO Box 1863
CEDAR RAPIDS IA 52401-2002

DIRECT BILL

AGENT: AC 0136

AGENT PHONE: (319) 364-5193

IT IS HEREBY AGREED AND UNDERSTOOD THAT THE NAMED INSURED
IS AMENDED TO READ AS FOLLOWS:

1ST NAMED INSURED:
PIPESTONE AREA SCHOOLS ISD 2689

AS QUOTED ON: 06/10/25



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD 268

Quote Number: J045582-07
Eff Date: 07/01/25 Exp Date: 07/01/26

C O M M E R C I A L U M B R E L L A S C H E D U L E

R E T A I N E D L I M I T

Self Insured Retention \$10,000

SCHEDULE OF UNDERLYING INSURANCE

Commercial General Liability

Company: Employers Mutual Casualty Company
Policy Number: BCCC429 Policy Period: 07/01/25 to 07/01/26

Occurrence Basis

Minimum Applicable Limits

General Aggregate	\$ 2,000,000
Products-Completed Operations Aggregate	\$ 2,000,000
Personal and Advertising Injury	\$ 1,000,000
Each Occurrence	\$ 1,000,000
Employee Benefit Liability	\$ 1,000,000 Each Employee \$ 2,000,000 Aggregate

Commercial Auto Liability

Company: Employers Mutual Casualty Company
Policy Number: E045582 Policy Period: 07/01/25 to 07/01/26

Minimum Applicable Limits

Covered Auto Liability	\$ 1,000,000 Each Accident
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Public Officials Liability (Claims Made)

Company: Employers Mutual Casualty Company
Policy Number: K045582 Policy Period: 07/01/25 to 07/01/26

Minimum Applicable Limits

\$ 1,000,000 Each Loss
\$ 2,000,000 Aggregate



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: F045582-01

CRIME AND FIDELITY COVERAGE PART QUOTATION (COMMERCIAL ENTITIES)

QUOTATION IS VALID: FROM 03/20/25 TO 07/01/25
PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R : P R E S E N T E D B Y :

PIPESTONE AREA SCHOOLS ISD
2689
1401 7TH ST SW
PIPESTONE MN 56164-1877

FirstMainstreet Insurance
500 1ST ST SE
PO Box 1863
CEDAR RAPIDS IA 52401-2002

DIRECT BILL

AGENT: AC 0136

AGENT PHONE: (319) 364-5193

INSURED IS: SCHOOL

BUSINESS DESC: PUBLIC EDUCATION

SEE ATTACHED SCHEDULE FOR DESCRIPTION OF LOCATIONS,
LIMITS, AND DEDUCTIBLES.

I N S U R I N G A G R E E M E N T S

P R E M I U M

FIDELITY - EMPLOYEE THEFT	\$	263.00
FORGERY OR ALTERATION - NEGOTIABLE INSTRUMENTS	\$	27.00
INSIDE THE PREMISES - THEFT OF MONEY & SECURITIES	\$	20.00
OUTSIDE THE PREMISES	\$	2.00
COMPUTER AND FUNDS TRANSFER FRAUD	\$	31.00

TOTAL POLICY PREMIUM \$ 343.00

AS QUOTED ON: 03/20/2025



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: F045582-01

PIPESTONE AREA SCHOOLS ISD

EFF DATE: 07/01/25

EXP DATE: 07/01/26

COMMERCIAL CRIME POLICY QUOTE

ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*CR0021	06-22	COMM. CRIME COV. FORM - LOSS SUST.	
*CR0125	06-22	MINNESOTA CHANGES	
*CR0750	06-22	AMENDMENT-DELETE PROV REGARD TERROR	
*CR2042	05-23	EXCL. DIGITAL TOKENS & OTHER ELEC.	
*CR7004A	12-22	CRIME & FID. COV. PART DECLARTIONS	
*CR7115A	12-22	CRIME & FID COV PART SCHEDULE (COMML)	
*CR7C21	06-22	COMM. CRIME COV. FORM TABLE OF CONT.	
*IL0017	11-98	COMMON POLICY CONDITIONS	
*IL0245	09-08	MN CHANGES - CANCELLATION/NONRENEWAL	
*IL7004	03-20	MUTUAL POLICY PROVISIONS	
*IL7130A	04-01	NAMED INSURED ENDORSEMENT	
*IL7131A	04-01	COMM'L POLICY ENDORSEMENT SCHEDULE	
*IL7306	08-98	EXC. OF CERT. COMPUTER LOSSES	

AS QUOTED ON: 03/20/2025



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

Q U O T A T I O N - N A M E D I N S U R E D

QUOTE NUMBER
F045582-01

PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R :

P R E S E N T E D B Y :

PIPESTONE AREA SCHOOLS ISD
2689
1401 7TH ST SW
PIPESTONE MN 56164-1877

FirstMainstreet Insurance
500 1ST ST SE
PO Box 1863
CEDAR RAPIDS IA 52401-2002

DIRECT BILL

AGENT: AC 0136

AGENT PHONE: (319) 364-5193

IT IS HEREBY AGREED AND UNDERSTOOD THAT THE NAMED INSURED
IS AMENDED TO READ AS FOLLOWS:

1ST NAMED INSURED:
PIPESTONE AREA SCHOOLS ISD 2689

AS QUOTED ON: 03/20/2025



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS

EFF DATE: 07/01/25

QUOTE NUMBER: F045582-01
EXP DATE: 07/01/26

CRIME AND FIDELITY COVERAGE PART
QUOTATION SCHEDULE (COMMERCIAL ENTITIES)
=====

DESCRIPTION	DED (PER OCCURRENCE)	LIMIT (PER OCCURRENCE)
FIDELITY - EMPLOYEE THEFT =====	\$ 1,500	\$ 150,000
FORGERY OR ALTERATION - NEGOTIABLE INSTRUMENTS =====	\$ 500	\$ 15,000
INSIDE THE PREMISES - THEFT OF MONEY & SECURITIES =====	\$ 500	\$ 10,000
OUTSIDE THE PREMISES =====	\$ 500	\$ 10,000
COMPUTER AND FUNDS TRANSFER FRAUD =====	\$ 500	\$ 50,000

AS QUOTED ON: 03/20/2025



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: K045582-06

Q U O T A T I O N - L I N E B A C K E R

QUOTATION IS VALID FROM 06/10/25 TO 07/25/25
PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R:	P R E S E N T E D B Y:
PIPESTONE AREA SCHOOLS ISD 2689 1401 7TH ST SW PIPESTONE MN 56164-1877	FirstMainstreet Insurance 500 1ST ST SE PO Box 1863 CEDAR RAPIDS IA 52401-2002

DIRECT BILL	AGENT: AC 0136 AGENT PHONE: (319)364-5193
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INSURED IS: SCHOOL	BUSINESS DESC: PUBLIC EDUCATION
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RETROACTIVE DATE AND EXCESS EXTENDED REPORTING PERIOD:
THIS INSURANCE DOES NOT APPLY TO WRONGFUL ACTS WHICH OCCUR
BEFORE THE RETROACTIVE DATE SHOWN BELOW.
RETROACTIVE DATE: 07/01/24
AVAILABLE SUPPLEMENTAL EXTENDED REPORTING PERIOD: (1 YEARS)

L I M I T S O F L I A B I L I T Y	
EACH LOSS	\$ 1,000,000
AGGREGATE FOR EACH POLICY TERM	\$ 2,000,000
INSURED'S DEDUCTIBLE EACH CLAIM (INCLUDING DEFENSE EXPENSE)	\$ 7,500

TOTAL ADVANCE PREMIUM \$ 16,417.00

COVERAGE IS PROVIDED FOR BOARD AND ALL EMPLOYEES

(THE ADVANCE PREMIUM IS A MINIMUM PREMIUM FOR THE POLICY TERM)
A \$100 MINIMUM POLICY PREMIUM APPLIES
IF POLICY IS CANCELLED AFTER THE EFFECTIVE DATE

AS QUOTED ON: 06/10/25 BPP

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

QUOTE NUMBER: K045582-06

PIPESTONE AREA SCHOOLS ISD

EFF DATE: 07/01/25

EXP DATE: 07/01/26

LINEBACKER POLICY QUOTE

ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*CL7001	10-23	LNBKR PUBLIC/EPLI COVERAGE FORM	
*CL7110	01-18	NUCLEAR ENERGY LIABILITY EXCLUSION	
*CL7114	10-12	LTD PUBLIC OFFICIALS E&O ENDST PROF SCHEDULE:	
		.	
*CL7119.1	01-18	LTD ERRORS & OMISSIONS SCHOOL PROF	
*CL7128	05-20	TORT LIABILITY ENDORSEMENT	
*CL7153	01-18	EXCL-FUNGI OR BACTERIA	
*CL7156	01-18	CAP ON LOSSES CERT ACTS OF TERRORISM	
*CL7161	01-18	EXCL PUNITIVE DMGS ACTS OF TERRORISM	
*CL7202	10-15	DATA COMPROMISE & CYBER LIAB EXCL	
*CL8322	10-15	ADVISORY NOTICE TO POLICYHOLDERS	
*IL7004	03-20	MUTUAL POLICY PROVISIONS	
*IL7111	01-18	MN CHANGES - CANCELLATION/NONRENEWAL	
*IL7130A	04-01	NAMED INSURED ENDORSEMENT	
*IL7131A	04-01	COMM'L POLICY ENDORSEMENT SCHEDULE	
*IL7149	01-08	COMMON POLICY CONDITIONS	
*IL7326	01-18	CALCULATION OF PREMIUM	
*IL7329	01-18	MINNESOTA CHANGES	
*IL8383.2A	12-20	DISCL PURSUANT TERRSM RISK INS. ACT	\$ 163
*IL8384A	01-08	TERRORISM NOTICE	
*IL8771	10-23	IMPORTANT NOTICE TO POLICYHOLDER	

AS QUOTED ON: 06/10/25



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD

QUOTE NUMBER: K045582-06
EFF DATE: 07/01/25 EXP DATE: 07/01/26

T E R R O R I S M N O T I C E

This insurance may include coverage for certified acts of terrorism as defined in the Terrorism Risk Insurance Act, as amended.

Attached you will find a disclosure, which identifies the specific charge for certified acts of terrorism.

YOU MAY HAVE THE OPTION TO REJECT THIS TERRORISM COVERAGE

For additional information, please contact your agent

AS QUOTED ON: 06/10/25

CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY
PIPESTONE AREA SCHOOLS ISD

QUOTE NUMBER: K045582-06
EFF DATE: 07/01/25 EXP DATE: 07/01/26

THIS ENDORSEMENT IS ATTACHED TO AND MADE PART OF YOUR POLICY IN RESPONSE TO THE DISCLOSURE REQUIREMENTS OF THE TERRORISM RISK INSURANCE ACT. THIS ENDORSEMENT DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER THE POLICY.

DISCLOSURE PURSUANT TO
TERRORISM RISK INSURANCE ACT

SCHEDULE

Terrorism Premium (Certified Acts) \$163.00

A. Disclosure Of Premium:

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

B. Disclosure Of Federal Participation In Payment Of Terrorism Losses:

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals 80% of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

C. Cap On Insurer Participation In Payment Of Terrorism Losses:

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

The following statement is required to be part of the disclosure notice in MISSOURI:

The premium above is for certain losses resulting from certified acts of terrorism as covered pursuant to coverage provisions, limitations and exclusions in this policy. You should read the definition in your policy carefully, but generally speaking, "certified" acts of terrorism are acts that exceed \$5 million in aggregate losses to the insurance industry and which are subsequently declared by the U.S. Secretary of the Treasury as a certified terrorist act under the Terrorism Risk Insurance Act. Some losses resulting from certified acts of terrorism are not covered. Read your policy and endorsements carefully.



CONDITIONAL

EMPLOYERS MUTUAL CASUALTY COMPANY

Q U O T A T I O N - N A M E D I N S U R E D

QUOTE NUMBER
K045582-06

PROPOSED POLICY PERIOD: FROM 07/01/25 TO 07/01/26

P R E P A R E D F O R :	P R E S E N T E D B Y :
PIPESTONE AREA SCHOOLS ISD 2689 1401 7TH ST SW PIPESTONE MN 56164-1877	FirstMainstreet Insurance 500 1ST ST SE PO Box 1863 CEDAR RAPIDS IA 52401-2002

DIRECT BILL	AGENT: AC 0136 AGENT PHONE: (319) 364-5193
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IT IS HEREBY AGREED AND UNDERSTOOD THAT THE NAMED INSURED
IS AMENDED TO READ AS FOLLOWS:

1ST NAMED INSURED:
PIPESTONE AREA SCHOOLS ISD 2689

AS QUOTED ON: 06/10/25