

Liberty Mutual Group
Umbrella Liability Proposal



Account Name	LINCOLNWOOD SCHOOL DISTRICT 74	Broker	LAMB LITTLE & COMPANY
Address	6950 N EAST PRAIRIE RD	Address	1101 PERIMETER DR STE 500
City	Lincolnwood	City	SCHAUMBURG
State	IL	State	IL
Zip	60712	Zip	60173-5060
Underwriter	Daniel Corsiuk	Broker Contact	Tom Cummings

Writing Company: Liberty Insurance Corporation (7)
Proposal Effective: 1/1/2021 to 1/1/2022

Coverages:	Limits:
Each Occurrence Limit	\$10,000,000
General Aggregate Limit	\$10,000,000
Products - Completed Operations Aggregate Limit	\$10,000,000
Self-Insured Retention - Each Occurrence	\$0
Flat Charge	N/A
Minimum Retained Premium	\$0
Premium Subtotal	\$12,530
State Surcharges	\$0
FIGA Surcharge	\$0
Kentucky Municipal Tax	\$0
Terrorism Risk Insurance Act	\$313
UM/UIM Charge	\$0
Crisis Response Charge	\$0
Total Estimated Premium	\$12,843
Commission	15.0%
Payment Terms	Premium is due 20 days from invoice date

<u>Underlying Schedule</u>	<u>Limits</u>	<u>Carrier</u>	<u>Premium</u>
General Liability	Each Occurrence 1,000,000	LM Insurance Corporation	\$3,350
	General Aggregate 2,000,000		
	Products/Completed Ops Aggregate 2,000,000		
	Pers & Adv Injury Limit 1,000,000		
Employee Benefits Liability	Each Employee 1,000,000	The First Liberty Insurance Corporation	\$916
	Aggregate 3,000,000		
Auto Liability	CSL 1,000,000	LM Insurance Corporation	\$3,119
School Leaders Errors and Omissions Liability	Each Wrongful Act 1,000,000	Liberty Mutual Insurance Company	\$3,188
	Aggregate 1,000,000		
Sexual Misconduct and Molestation Liability	Each Loss 1,000,000	Liberty Mutual Insurance Company	\$1,216
	Aggregate 1,000,000		
Estimated Exposures	Students 1,234		
	Power Units 0		
	PPT 0		
	LT 0		
	MT 0		
	HT 0		
	EHT 0		
	Tractor 0		
	Number of Employees 0		

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Policy Form and Endorsements:

LCU 21 19 01 18 Silica or Silica-Related Dust Exclusion
LCU 21 47 01 18 Damage First Occurring Prior To Policy Period Exclusion
LCU 21 85 01 18 Access or Disclosure of Confidential or Personal Information and Data-Related Liability Exclusion – With Limited Bodily Injury Exception
LCU 25 09 01 18 Non-Cumulation Of Liability (Same Occurrence)
LCU 99 05 01 18 Declarations Extension – Named Insured
Item 1. Named Insured of the Declarations is amended as follows:
LCU 32 143 01 18 Crisis Management Coverage
Crisis Management Expense Aggregate Limit: \$250,000
Liberty Mutual Preferred Public Relations Vendor: Weber Shandwick
Liberty Mutual Claims: 1-800-362-0000
LCU 24 09 09 19 Foreign Liability Limitation
LCU 02 26 01 18 Illinois Changes – Cancellation And Nonrenewal
SNI 12 01 07 18 Illinois Notice To Policyholders
LIL 90 05 06 13 Participating Provision
LCU 00 01 01 18 Commercial Liability – Umbrella Coverage Form
LCU 32 97 05 19 Illinois Changes - Defense Costs
SNI 04 01 01 20 Liberty Mutual Group California Privacy Notice
IL N 175 11 11 Illinois Notice To Policyholders Regarding The Religious Freedom Protection And Civil Union Act
SNI 90 02 01 20 Policyholder Disclosure Terrorism Risk Insurance Act
LCU 21 109 08 18 School Law Enforcement Professional Liability Exclusion

Important Considerations:

Please read this proposal carefully, as the terms and conditions may differ from those in the submission.

Quote expires on: 1/1/2021.

We reserve the right to amend premium, terms & conditions or withdraw the proposal if underlying carriers, pricing or terms change.

All underlying carriers must be rated A- V or better by A.M. Best.

Underlying policy numbers must be received upon binding for policy issuance.

The Terrorism Risk Insurance Act offer letter is included in this document.

Copies of all non-Liberty Mutual underlying policies must be received within 60 days of binding.

An important notice regarding the expiration of the Terrorism Risk Insurance Act is included in this document.

To learn more about Liberty Mutual's privacy policy,
go to: <https://www.libertymutualgroup.com/about-lm/corporate-information/privacy-policy>



Terrorism Risk Insurance Act, Including all Amendments, ("TRIA" or the "Act")

ACCEPT OR REJECT OPTION: The following notice will be added to your policy:

POLICYHOLDER DISCLOSURE, TERRORISM RISK INSURANCE ACT

If you ACCEPT TRIA: The following endorsements will be added to your policy:

The Terrorism endorsements described below **do not apply** to umbrella coverage over underlying Commercial Automobile insurance, but otherwise apply as follows if attached to your policy:

Underlying Coverage Requirement for Certified Acts of Terrorism – LCU 60 01

Cap on Losses from Certified Acts of Terrorism – LCU 60 04

Punitive Damages Related to a Certified Act of Terrorism Exclusion – LCU 60 06

Punitive Damages Related to a Certified Act of Terrorism Exclusion – LCU 60 10
(This endorsement applies only in Arkansas.)

If you REJECT TRIA: The following endorsement will be added to your policy:

The Terrorism endorsement described below **does not apply** to umbrella coverage over underlying Commercial Automobile insurance, but otherwise applies as follows if attached to your policy:

Certified Acts of Terrorism Exclusion – LCU 60 05

November 18, 2020

LINCOLNWOOD SCHOOL DISTRICT 74



Umbrella Policy

Effective: January 1, 2021

POLICYHOLDER DISCLOSURE

**NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE
FOR POLICY PERIOD**

This notice contains important information about the Terrorism Risk Insurance Act and your option to purchase terrorism insurance coverage. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments ("TRIA" or the "Act") establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer's losses from "certified acts of terrorism" exceed a specified deductible amount, the government will generally reimburse the insurer for a percentage of losses (the "Federal Share") paid in excess of the deductible, but only if aggregate industry losses from "certified acts of terrorism" exceed the "Program Trigger". An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

Beginning in calendar year 2020, the Federal Share is 80% and Program Trigger is \$200,000,000.

MANDATORY OFFER OF COVERAGE FOR "CERTIFIED ACTS OF TERRORISM" AND DISCLOSURE OF PREMIUM

TRIA requires insurers to make coverage available for any loss that occurs within the United States (or outside of the U.S. in the case of U.S. missions and certain air carriers and vessels), results from a "certified act of terrorism" AND that is otherwise covered under this policy. You have the option to accept or reject this coverage.

A "certified act of terrorism" means:

[A]ny 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

(i) to be an act of terrorism;

(ii) to be a violent act or an act that is dangerous to –

(I) human life;

(II) property; or

(III) infrastructure;

(iii) to have resulted in damage within the United States, or outside of the United States in the case of –

(I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or

(II) the premises of a United States mission; and

(iv) 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.

How the act affects your policy and what you must do

SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE

You have the option of purchasing coverage for losses resulting from “certified acts of terrorism” where it could otherwise be excluded. This offer pertains only to those lines of business covered by TRIA and, more specifically, does not apply to commercial automobile insurance. This offer is also expressly conditioned upon your acceptance of coverage for “certified acts of terrorism” on all underlying insurance policies that are subject to TRIA or, where applicable, the existence of such coverage on all TRIA eligible lines for which you self insure. If you reject TRIA coverage on your primary liability policies, you must also reject it on your Excess, Umbrella or Umbrella Excess policy.

The premium charge for this coverage for the policy period is \$313 and does not include any charges for the portion of loss covered by the Federal government under the Act.

If you reject this offer, you will not be covered for losses resulting from “certified acts of terrorism.”

Please indicate on the attached coverage election form, whether you accept or reject this offer. If we do not receive a completed Terrorism Coverage Election Form from you, coverage for “certified acts of terrorism” will be excluded from your policy.

TERRORISM COVERAGE ELECTION FORM

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

☐ I hereby elect to purchase coverage for "certified acts of terrorism" for the policy period for \$313

☐ I hereby reject this offer of coverage. I understand that by rejecting this offer, I will have no coverage for losses arising from "certified acts of terrorism" and my policy will be endorsed accordingly.

POLICYHOLDER ACKNOWLEDGEMENT

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for "certified acts of terrorism," and the premium charge for losses covered by TRIA.

Policyholder/Applicant Signature

Date

Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.