

**AN ORDINANCE APPROVING THE PURCHASE AND RENEWAL OF
COMMERCIAL INSURANCE COVERAGE FROM NICOUD INSURANCE SERVICES**

WHEREAS, on April 22, 2014 the South Sangamon Water Commission passed Ordinance No. 14-04 which approved the purchase of Commercial Insurance Coverage from Nicoud Insurance Services;

WHEREAS, it is necessary to renew said Commercial Insurance Coverage;

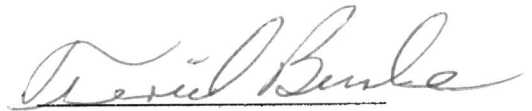
NOW, THEREFORE, BE IT ORDAINED BY THE SOUTH SANGAMON WATER COMMISSION, AS FOLLOWS:

SECTION 1: That the Commercial Insurance Coverage purchased pursuant to Ordinance No.14-04 from the Nicoud Insurance Services with an effective date of May 1, 2014, is hereby renewed with said renewal having an effective date of May 1, 2015.

SECTION 2: The Chairman shall execute appropriate contracts and/or binders for renewal of insurance to renew the insurance coverage that was purchased and obtained pursuant to Ordinance No. 14-04, and the proper officers of the Commission shall carry out such contracts of insurance according to their terms.

SECTION 3: This ordinance is effective immediately.

PASSED this 21 day of April, 2015.


CHAIRMAN

ATTEST:


Clerk

AYES: Hall Sander Burke

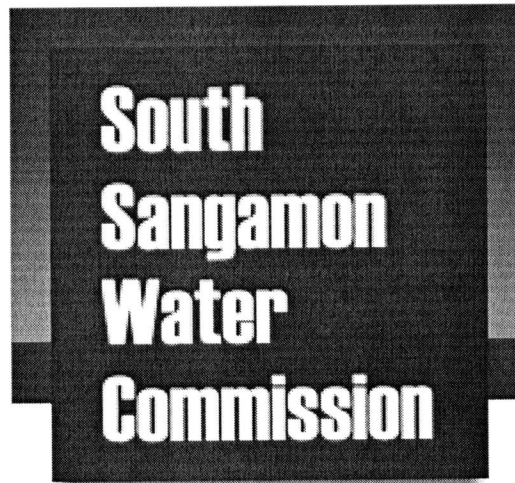
NAYES: none

PASSED: 4/21/2015

APPROVED: 4/21/2015 }

ABSENT: none

Commercial Insurance Proposal



**P.O. Box 83
New Berlin, IL 62670**

Proposed Effective Date:
May 1, 2015



Presented by James F. Hillestad
4481 Ash Grove Ste B, PO 13078
Springfield, IL 62791-3078
217-546-6900

"Nicoud Comes Through For You."

AGENCY SERVICE TEAM

Welcome to **Nicoud Insurance**! Our hours are 8:00 a.m. to 4:30 p.m. Monday through Friday. Voicemail is available after hours. Any other office hours are made by appointment. The service team assigned to manage your account is:

James F. Hillestad	Ext. 103	Account Executive	jim@nicoudinsurance.com
Alexis Galassi	Ext. 115	Account Manager	alexis.galassi@nicoudinsurance.com
Denise Davis	Ext. 106	Claims Coordinator	denise.davis@nicoudinsurance.com

Any of these staff members will be pleased to assist you with your service needs. Your primary contact will be **Alexis Galassi**.

Nicoud Insurance
www.nicoudinsurance.com
4481 Ash Grove Ste B, PO 13078
Springfield, IL 62791-3078
217-546-6900
Fax: 217-546-7034
(800) 982-6564 WATS

NAMED INSURED SCHEDULE

Entity(ies):

South Sangamon Water Commision

LOCATION SCHEDULE

Loc #	Bldg #	Address
1	1	9199 Buckhart Road • Rochester, IL 62563
2	1	Mansion Road • Chatham, IL 62629

PROPERTY

Coverage Detail

Valuation: RC – Replacement Cost AV – Agreed Value

Subject			Amount	Val	Co-Ins %	Cause of Loss	Deductible
Blanket Building			\$10,410,000	AV/RC	100%	Special	\$2,500
Blanket Business Personal Property			\$100,000	RC	100%	Special	\$2,500
Business Income/Extra Expense**			\$2,300,000		100%	Special	
Flood			\$2,000,000			Special	\$1,000
Earthquake			Included			EQ	5%
Data Compromise			\$50,000			Special	\$1,000
Identity Recovery			\$25,000			Special	\$250
Equipment Breakdown			Included			Special	\$2,500
Loc #: 1	Bldg #: 1	9199 Buckhart Road • Main Plant					
Building (including pumps & filters)			\$7,420,000	AV/RC	100%	Special	\$2,500
Business Personal Property			\$100,000	RC	100%	Special	\$2,500
Loc #: 1	Bldg #: 2	9199 Buckhart Road • Wells/Pumps					
Building (10 wells)			\$1,100,000	AV/RC	100%	Special	\$2,500
Loc #: 1	Bldg #: 3	9199 Buckhart Road • Steel Tanks					
Building			\$1,000,000	AV/RC	100%	Special	\$2,500
Loc #: 1	Bldg #: 4	9199 Buckhart Road • Generator					
Building			\$420,000	AV/RC	100%	Special	\$2,500
Loc #: 1	Bldg #: 5	9199 Buckhart Road • Fence/Lighting					
Building			\$120,000	AV/RC	100%	Special	\$2,500
Loc #: 1	Bldg #: 6	9199 Buckhart Road • Grinder Pump					
Building			\$100,000	AV/RC	100%	Special	\$2,500

Loc #: 1	Bldg #: 7	9199 Buckhart Road • Chemical Feed Building				
Building		\$150,000	AV/RC	100%	Special	\$2,500
Loc #: 2	Bldg #: 1	Mansion Road • Pump Station				
Building		\$100,000	AV/RC	100%	Special	\$2,500

NOTES: ** Business Income & Extra Expense coverage is blanket and extended to 180 days.

PROPERTY – Included Coverage's

Property Coverage's (all limits per location unless indicated otherwise)	Limits ¹
Accounts receivable (additional \$5,000 limit away from premises, not per location)	\$150,000 blanket coverage limit (BCL) 25% of loss within limit, plus BCL Subject to building limit Included within BCL Included within BCL Included within BCL Included within BCL Included within BCL BCL applies, subject to sub-limits of \$2,000 – in addition to BCL \$10,000 – in addition to BCL \$10,000 – included within BCL
Debris removal of covered property from a covered loss	
Ordinance or law: <ul style="list-style-type: none"> • Undamaged portion of the building • Demolition costs and increased costs of construction 	
Peak season for business personal property (BPP) (90 days maximum)	
Personal property of others	
Tenant move back expenses	
Valuable papers (additional \$5,000 limit away from premises, not per location)	
Worldwide laptop (not per location)	
Electronic data processing property (EDP): <ul style="list-style-type: none"> • Duplicate and backup electronic data • Newly acquired EDP property • In transit or away from premises 	
Brands and labels	\$25,000
Building glass – insured as part of the building	Included up to building limit
Business income/extra expense (BI/Ex Ex) (no waiting period) <ul style="list-style-type: none"> • Dependent properties (24-hour waiting period) • Computer operations (24-hour waiting period) 	\$100,000 \$5,000 – included in BI/Ex Ex \$25,000 – included in BI/Ex Ex (per coverage term) ²
Temperature Change	\$5,000
Fairs/exhibitions (not per location)	\$10,000
Fences (within 1,000 feet of premises)	\$5,000
Fine arts	\$25,000

Property Coverage's (all limits per location unless indicated otherwise)	Limits ¹
Fire department service charge – by contract or agreement or required by ordinance (not available in AZ)	\$25,000
Fire protection equipment recharge	\$50,000
Fungi, wet rot, dry rot and bacteria	\$15,000 (per coverage term) ²
Inflation guard	4% on building property
Inventory, appraisal, loss statement expenses	\$10,000
Key and lock expense	\$1,000
Newly acquired property – buildings (up to 90 days)	\$1,000,000
Newly acquired property – BPP (at acquired building up to 90 days)	\$500,000
Non-owned building damage: <ul style="list-style-type: none"> Caused by theft, burglary or robbery Caused by any other covered cause of loss 	Included in BPP limit \$25,000 included in BPP limit or BPP limit of insurance (whichever is less)
Outdoor property (trees, shrubs, plants \$1,000 limit per item)	\$25,000
Paved surfaces	\$20,000
Piping and Penstock	\$100,000
Personal effects (\$1,000 theft limit – excluding theft of employees' tools)	\$25,000
Pollutant cleanup and removal from land or water at each insured premises	\$25,000 (per coverage term) ²
Tenant Glass	\$5,000
Preservation of covered property (up to 60 days)	BPP limit
Property temporarily at other premises (not per location)	\$10,000
Property in transit in a vehicle (not per location)	\$10,000
Rewards for reporting arson, V&MM, theft and burglary (not available in NY)	\$10,000
Signs: <ul style="list-style-type: none"> If attached to building, include in building limit If detached but permanently installed within 1,000 feet of premises, may be scheduled Detached but not part of building (does not apply per location) 	Included Per Dec page \$10,000

Property Coverage's (all limits per location unless indicated otherwise)	Limits ¹
Trailers (detached and non-owned left in the insured's care, custody or control)	\$5,000
Underground property (within 1,000 feet of scheduled premises)	Included in building limit
Utility services (off-premises water, communication and power supply, excluding overhead lines) for direct and time element loss	\$25,000
Water backup from sewers, drains or sump pumps (not available in FL)	\$10,000

- ¹ All property coverage dollar limits are per any one occurrence. Some property coverage dollar limits may also be per coverage term² as indicated.
- ² Coverage term is defined in the policy. It generally means one policy year.

EQUIPMENT FLOATER

Coverage

Scheduled Contractor Equipment - \$63,200 (Replacement Cost Valuation)

Deductible

\$1,000

Unscheduled Equipment

Description	Amount of Insurance
Employee Owned Tools – Any One Tool	\$250
Employee Owned Tools – Any One Occurrence	\$1,000
Your Tools – Any One Tool	\$250
Your Tools – Any One Occurrence	\$1,000
Equipment Leased or Rented from Others	\$25,000
Newly Purchased Equipment	\$25,000 OR 30% OF TOTAL SCHEDULED EQUIPMENT-WHICHEVER IS GREATER
Newly Purchased Equipment-Number of Days	60 DAYS
Pollutant Clean up and Removal	\$10,000
Rental Reimbursement – Per Day	\$500
Rental Reimbursement – Per Year	\$5,000

Scheduled Equipment

Item #	Description	ID/Serial #	Amount of Ins.
001	2013 Caterpillar 289C2 Compact Track Loader	RTD01068	\$57,200
002	2013 Exmark 58" Riding mower		\$6,000

EQUIPMENT ADDITIONAL INTERESTS

Item#	Name & Address	Interest In:
1	Caterpillar Financial Svcs Cor 2120 West End Ave Nashville, TN 37203	Lessor/Loss Payee

ELECTRONIC DATA PROCESSING

Coverage Detail

Loc#	Bldg#	Subject	Amount
1	1	COVERAGE A	
		Electronic Data Processing Property (SCADA System)	\$150,000
		Debris Removal	\$50,000
		Duplicate & Backup Electronic Media & Records	\$10,000
		Off Premises	\$30,000
		Pollutant Clean Up & Removal	\$10,000
		Recharge or Refill of a Fire Protection Device	\$50,000
		Third Party Host	\$10,000
1	1	COVERAGE B	
		Business Income & Extra Expense	\$10,000
1	1	COVERAGE C	
		Denial of Service	\$10,000
		Loss Establishment Expenses	\$5,000
		Malicious Code	\$10,000
		Unauthorized Use	\$10,000

DEDUCTIBLES:

Coverage A: Basic - \$500
Specified Losses - \$1,000

Coverage B: 24 Hours

CRIME / FIDELITY

Coverage Detail

Subject	Amount	Deductible
Fidelity Bond / Employee Dishonesty	\$250,000	\$1,000
Forgery or Alteration	\$25,000	\$ 500
Theft, Disappearance & Destruction		
Inside the Premises	\$25,000	\$ 500
Outside the Premises	\$5,000	\$ 500
Money Orders and Counterfeit Money	\$25,000	\$ 500

GENERAL LIABILITY

Coverage Detail

Limits of Liability	Description
\$1,000,000	Per Occurrence
\$3,000,000	Annual Aggregate, Other Than Products
\$3,000,000	Annual Aggregate, Products & Completed Operations
\$1,000,000	Personal And Advertising Injury Aggregate
\$500,000	Fire Damage Liability
\$10,000	Medical Expense Each Claim
\$1,000,000	Employee Benefits Liability Limit - Per Occurrence
\$3,000,000	Employee Benefits Liability Limit - Per Occurrence
\$1,000	Employee Benefits - Deductible
\$1,000,000	Professional Liability - Per Occurrence
\$2,000,000	Professional Liability - Annual Aggregate

Schedule of Hazards

Loc#	Class Code	Classification	Premium Basis	Annual Exposure
1	99943	Water Company	Payroll	\$150,000

Premium Basis Codes: P – Payroll

GENERAL LIABILITY – INCLUDED COVERAGE'S

COMMERCIAL GENERAL LIABILITY BROADENED ENDORSEMENT

<u>Liability Coverage's</u>	<u>Limits</u>
Waiver of subrogation if required in a written contract	Included
Unintentional failure to disclose existing hazards provisions	Included
Broadened notice of occurrence	Included
Property damage to borrowed equipment when not in use (\$250 deductible)	\$10,000 each occurrence
Newly formed or newly acquired organizations for up to 180 days	Included
Automatic additional insured where required in a written contract or oral agreement (where a certificate of insurance showing that person or organization as an additional insured has been issued) for: lessors of premises, lessors of equipment, vendors, state or political subdivision's permits relating to premises	Included
Supplementary payments: a bail bonds	\$1,000
0 loss of earnings	\$350 per day
Employees as insureds for specified healthcare services (nurses, EMTs and paramedics)	Included

COMMERCIAL AUTOMOBILE

Coverage Detail

Liability Limits	Coverage Symbol	Description
\$1,000,000	8 & 9	Hired & Non-Owned Automobile Liability Bodily Injury & Property Damage Combined Single Limit
\$1,000,000	8 & 9	Uninsured & Underinsured Motorist Protection Bodily Injury & Property Damage Combined Single Limit

Coverage Symbols:

8 – Hired Autos
9 – Non Owned Autos

WORKERS COMPENSATION / EMPLOYERS LIABILITY

Coverage Detail

Limits	Description
\$1,000,000	Employers Liability: Each Accident
\$1,000,000	Employers Liability: Disease – Policy Limit
\$1,000,000	Employers Liability: Disease – Each Employee
Included	Workers Compensation: Statutory Benefit

Locations & Classifications

Loc#	St	Code	Description	Renewal Payroll
1	IL	8810	Clerical	\$15,000
1	IL	7520	Plant Operator	\$150,000

COMMERCIAL UMBRELLA

Coverage Detail

Limits	Description
\$5,000,000	Per Occurrence
\$5,000,000	Annual Aggregate Limit
None	Retained Limit

Underlying Coverage's

Policy Type	Carrier / Policy #	Policy Period	Limits
Automobile Liability Combined Single Limit Bodily Injury Property Damage	Cincinnati Insurance Company UPP0007920	05/01/15 - 05/01/16	\$1,000,000 None None
General Liability Each Occurrence General Aggregate Products & Comp Ops Personal & Advertising Injury	Cincinnati Insurance Company UPP0007920	05/01/15 - 05/01/16	\$1,000,000 \$3,000,000 \$3,000,000 \$1,000,000
Employers Liability Each Accident Disease Policy Limit Disease Each Employee	Cincinnati Insurance Company EWC0238049-00	05/01/15 - 05/01/16	\$1,000,000 \$1,000,000 \$1,000,000
Employee Benefits Liability Each Occurrence General Aggregate	Cincinnati Insurance Company UPP0007920	05/01/15 - 05/01/16	\$1,000,000 \$3,000,000

PREMIUM SUMMARY

Insurer: Cincinnati Insurance Company
Policy Term: 05/01/2015-05/01/2016

Premiums

Line of Business	Expiring Annual Premium	Renewal Annual Premium
Property	\$10,068.00	\$10,928.00
Equipment Floater	\$830.00	\$756.00
Crime	\$393.00	\$393.00
General Liability	\$4,151.00	\$3,409.00
Business Auto	\$125.00	\$125.00
Workers Compensation	\$8,075.00	\$7,640.00
Umbrella	\$5,000.00	\$4,000.00
Total Premium:	\$28,642.00	\$27,251.00

THIS DOCUMENT SUMMARIZES THE PROPOSAL FOR YOUR INSURANCE. THIS IS NOT A CONTRACT. THE TERMS OF THE POLICY FORMS WILL CONTROL THE INSURANCE CONTRACT WITHOUT REGARD TO ANY STATEMENT MADE IN THIS PROPOSAL.

ORDINANCE CERTIFICATE

STATE OF ILLINOIS)
) SS
COUNTY OF SANGAMON)

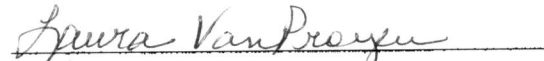
I, the undersigned, do hereby certify that I am the duly qualified and acting Clerk of the South Sangamon Water Commission.

I do further certify that the ordinance attached hereto is a full, true, and exact copy of Ordinance No. 15-~~06~~ adopted by the Commission on the 21 day of April, 2015, said Ordinance being entitled:

AN ORDINANCE APPROVING THE PURCHASE AND RENEWAL OF COMMERCIAL INSURANCE COVERAGE FROM NICLOUD INSURANCE SERVICES

I do further certify that prior to making of this certificate, the said Ordinance was spread at length upon the permanent records of said Commission, where it now appears and remains.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of said Commission this 21 day of April, 2015.


Clerk