

### Insurance quote presented to:

Williamson County

Proposed policy period

10/01/2023 - 10/01/2024

NO FLAT CANCELLATIONS ONCE COVERAGE IS BOUND

# **Kinsale Insurance Company**

A.M. Best Company Rating: A (Excellent) Financial Size Category: X

## **QUOTE**

**RE:** Williamson County

100 Wilco Way, Suite HR101 Georgetown, TX 78626

Submission #:04250111 Quote Letter #:14939747

Renewal of Policy:0100208950-0

We are pleased to offer the following quote. This quote is valid until 10/01/2023 unless extended and agreed to in writing by us. Please read carefully as the terms and conditions of coverage may differ from those requested. THIS IS NOT A BINDER OF INSURANCE.

Company: Kinsale Insurance Company Policy Term: 10/01/2023 - 10/01/2024

**Retro Date:** 10/01/2022 Coverage Form: Excess Casualty - Claims Made

**Limits of Liability:** 

\$2,750,000 Each Occurrence \$2,750,000 Annual Aggregate

**Business Description:** 

Schedule of Underlying Insurance:

Law Enforcement

Lexington Insurance Company Carrier: Policy Term: 10/01/2023 - 10/01/2024

Coverage Form: Claims Made (Retro Date:

10/01/2021)

Each Occurrence

\$1,750,000 General Aggregate \$1,750,000

Minimum Earned Premium: 25.00% Premium: \$487,766

Terrorism Premium \$0

(Optional):

**Total Premium:** \$487,766 **Company Fees:** \$50 **Total Amount Due:** \$487,816

Premium is 100.00% minimum and deposit.

If this quote indicates the policy would be subject to audit, the initial premium charged is estimated and considered a deposit premium, the final premium charged for the policy will be determined by audit based on the actual risk exposure during the policy term. Audit will take place at the end of the policy term or upon policy cancellation.

This quote is subject to the specified conditions and may be withdrawn at any time prior to acceptance and in no event will it remain open beyond the quote expiration date unless extended by us in writing. Changes in classifications, operations, exposure or risk specific information require notification to us and may result in changes to this quote. Coverage may not be bound without written confirmation from us. By accepting this quote, you consent to receiving the policy electronically. You agree that such electronic delivery satisfies any legal requirement that such delivery be in writing.

Once bound, coverage cannot be cancelled flat. If you cancel coverage or the policy, the greater of the minimum earned premium or the 10% short-rate penalty will apply.

#### Contingencies:

This Quote is subject to our receipt and acceptance of the following items:

- 1) Currently valued 5 year loss runs (valued within 30 days of the effective date)
- Currently signed and dated version of the submitted PRU LEL application (within 30 day period prior to effective date).
- 3) Complete copies of all underlying policies within 60 days of binding coverage.
- 4) Copy of primary binder
- 5) Copy of any subjectivity materials requested by the primary carrier.

Contingency items must be submitted to a Kinsale Underwriter for favorable review prior to a bind request to confirm this quote remains valid. Quote subject to revision or withdrawal pending final review.

#### Comments:

#### **Exclusions and Endorsements:**

PEX1000-1021 - Excess Liability Declarations

ADF9013-0323 - Notice - Where To Report A Claim

ADF9003-0723 - Texas Notice

ADF4001-0110 - Schedule of Forms

PEX1001-0323 - Schedule of Underlying Insurance (FOLLOWED POLICY: Refer to Endorsement PEX2000 Policy Type:

Limited to the Specified Coverage Section named below: Law Enforcement Liability)

PEX0001-1021 - Excess Follow Form Liability Insurance Policy

PEX2000-0622 - Limitation of Coverage to Specified Coverage Section of Followed Policy

PEX2002-0323 - Retroactive Date Endorsement (10/1/2022)

PEX3000-0323 - Exclusion - Prior or Pending Litigation (10/1/2022)

PEX3001-1021 - Exclusion - Pathogen and Related Hazards

PEX3006-1021 - Exclusion - Cyber-Attack

ADF9004-0110 - Signature Endorsement

ADF9009-0110 - U.S. Treasury Department's Office of Foreign Assets Control (OFAC) Advisory Notice to Policyholders