



STIEL INSURANCE SERVICES

**CITY OF HAMMOND
MAYOR PETE PANEPINTO
HAMMOND CITY COUNCIL
May 1, 2018**

Presented by Donelson P Stiel



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COMMERCIAL PACKAGE POLICY

Insuring Company
The Travelers Indemnity Company (A++ Rated)

GENERAL LIABILITY

Aggregate Limit	\$ 3,000,000
Products/Completed Operations	3,000,000
Personal & Advertising Injury	1,000,000
Limit of Insurance for Each Occurrence	1,000,000
Damage to Premises Rented to You	1,000,000
Failure to Supply – Sudden and Accidental	1,000,000
Sewage Backup	1,000,000
Abuse or Molestation Aggregate Limit	1,000,000
Abuse or Molestation Offense Limit	500,000
Self-Insured Retention	100,000
Occurrence Form	

AUTOMOBILE COVERAGE

Limit of Insurance for Each Occurrence	\$ 1,000,000
Includes Hired & Non-Owned Liability	
Self-Insured Retention	100,000
Uninsured Motorist	Not Covered
Medical Payments	Not Covered
Auto Physical Damage Deductible - \$1,000	

Excludes Coverage for Fire Units (Covered Separately through VFIS)

PUBLIC OFFICIALS ERRORS AND OMISSIONS

Aggregate Limit	\$3,000,000
Limit of Insurance for Each Wrongful Act	1,000,000
Self-Insured Retention	100,000
Claims Made Form	
Retroactive Date: 7/1/93	

Employment Practices Liability

Aggregate Limit	\$3,000,000
Limit Each Offense	1,000,000
Self-Insured Retention	100,000
Claims Made Form	
Retroactive Date: 7/1/93	

Employee Benefits Liability

Aggregate Limit	\$3,000,000
Limit Each Offense	1,000,000
Self-Insured Retention	100,000
Claims Made Form	
Retroactive Date: 7/1/98	

LAW ENFORCEMENT LIABILITY

Aggregate Limit	\$3,000,000
Limit Each Wrongful Act	1,000,000
Self-Insured Retention	100,000
Occurrence Form	

AUTOMOBILE COVERAGE FOR FIRE UNITS ONLY

Insuring Company: American Alternative

Limit of Insurance for Each Occurrence	\$ 1,000,000
Includes Hired & Non-Owned Liability	
Uninsured Motorist	Not Covered
Medical Payments	Not Covered

Auto Physical Damage Deductible - \$1,000

Includes Blanket Portable Equipment Coverage with \$5,000 Deductible

WORKERS' COMPENSATION

Insuring Company: Safety National Casualty Corporation (A Rated)

Statutory Limit	
Employers Liability Limit per Occurrence	\$1,000,000
Aggregate Excess Limit	1,000,000
Self-Insured Retention Police/Fire	600,000
Self-Insured Retention All Others	500,000

AIRPORT LIABILITY

Insuring Company – Berkley Aviation (A Rated)

Bodily Injury and Property Damage Liability	
Each Occurrence Limit	\$10,000,000
Products-Completed Operations Aggregate	10,000,000
Malpractice Aggregate Limit	10,000,000
Personal/Advertising Injury Aggregate	10,000,000
Fire Damage Limit Any One Fire	100,000
Medical Expense Limit Any One Person	5,000
Hangar keepers Limit Any One Aircraft	5,000,000
Hangar keepers Limit Any One Occurrence	5,000,000
Independent Contractors Liability	10,000,000
Contractual Liability	10,000,000
Host Liquor Liability	10,000,000
Non-owned Aircraft Liability	Not Covered
Terrorism Coverage	Excluded

BLANKET BOND

Insuring Company: Western Surety Company (A Rated)

Public Employee Faithful Performance	
Blanket Position	\$ 100,000
Mayor, Director of Administration, Financial Information, Accounting Supervisor, President of Council	
All Others	25,000

REVENUE SUPERVISOR BOND

Insuring Company: Western Surety Company (A Rated)

Revenue Supervisor & Collector \$ 100,000

Jinnie Wilson

COMMERCIAL PROPERTY

Insuring Company: American Casualty Company (A Rated)

Total Property Value \$26,765,878

Deductible Per Location 50,000

Schedule Attached

Replacement Cost

90% Coinsurance

Special Form

Terrorism Coverage Included

COMMERCIAL EQUIPMENT

Insuring Company: American Casualty Company (A Rated)

Total Equipment Limit \$ 484,762

Deductible 2,500

Schedule Attached

Terrorism Coverage Included

BOILER & MACHINERY COVERAGE

Insuring Company: Continental Casualty Insurance Company (A Rated)

Limit per Breakdown \$26,765,878

Property Damage Deductible 25,000

2018 INSURANCE RENEWAL FOR CITY OF HAMMOND

ANNUAL PREMIUMS

Commercial Package	\$369,925.00	
York Claims Administration Fee *	4,000.00	
Automobile Coverage for Fire Units	42,182.40	
Workers' Compensation	97,500.00	
Airport Liability	7,875.00	
Blanket Bond	1,347.64	(Direct Bill)
Revenue Supervisor Bond	350.00	
Property and Equipment	127,368.39	
Boiler & Machinery	14,874.00	
Workers' Compensation Bond	7,500.00	

 TOTAL ANNUAL PREMIUM	 \$672,922.43	
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*Third Party Claims Administration to be handled by York

**PREMIUM COMPARISON
FOR 2016, 2017 AND 2018 POLICY TERMS**

	2016	2017	2018
Commercial Package	\$372,796.00	\$384,426.00	\$369,925.00
York Administration Fee	3,713.15	3,824.54	4,000.00
Automobile Coverage for Fire Units	35,808.68	35,846.77	42,182.40
Workers' Compensation	91,473.00	91,468.00	97,500.00
Airport Liability	7,500.00	7,500.00	7,875.00
Blanket Bond	1,347.64	1,347.64	1,347.64
Revenue Supervisor Bond	350.00	350.00	350.00
Commercial Property	123,725.46	122,920.47	127,368.39
Boiler & Machinery	14,103.00	14,244.00	14,874.00
Workers' Compensation Bond	7,500.00	7,500.00	7,500.00
Total Premium	\$658,316.93	\$669,427.42	\$672,922.43

OPTIONAL PACKAGE QUOTES

OneBeacon – Annual Premium \$435,549

Safety National Casualty Corporation – Annual Premium \$376,464.15

CLIENT AUTHORIZATION TO BIND COVERAGE

City of Hammond

After careful consideration of your proposal presented by Stiel Insurance Services, subject to the following exceptions/changes, we accept your insurance program for the named coverages:

Proposed Coverages / Coverage Term:

Commercial Package	05/01/2018 to 05/01/2019
Automobile (Fire Units)	05/01/2018 to 05/01/2019
Workers' Compensation	05/01/2018 to 05/01/2019
Airport Liability	05/01/2018 to 05/01/2019
Blanket Bond	05/01/2018 to 05/01/2019
Revenue Supervisor Bond	05/01/2018 to 05/01/2019
Property and Equipment	05/01/2018 to 05/01/2019
Boiler & Machinery	05/01/2018 to 05/01/2019
Workers' Compensation Bond	05/01/2018 to 05/01/2019

_____ **Bind All Coverages as quoted,**

Except as listed below:

IMPORTANT: The proposal is an outline of the coverages proposed by the insurers, based on the information provided by your company. It does not include all terms, coverages, exclusions, limitations, conditions of the actual contract language. The insurance policies themselves must be read for those details. Policy forms for your reference will be made available upon request.

We confirm the values, schedules, and other data contained in the proposal are from our records and acknowledge it is our responsibility to see that they are maintained accurately.

**Please note that signing this document does not immediately bind coverage. You will receive notification from us in the form of a binder or confirmation of insurance that will show when coverage is effective.

Client Signature

Date
