



## Common Member Coverage Declarations

<b>Policy Number:</b>	<b>#PRM017-004-051</b>
<b>Membership Type:</b>	<i>Preferred Member</i>

<b>Named Member and Mailing Address:</b>	<b>Managing Agent Name and Address:</b>
<i>Sun N Lakes of Sebring Improvement District As a member of Public Risk Management of Florida 5306 Sun N Lake Blvd Sebring, Florida 33872</i>	<i>World Risk Management, LLC a Ballator Company 20 North Orange Avenue, Suite 500 Orlando, FL 32801</i>

<b>Coverage Period:</b>	From: <b>10/01/2017</b> At 12:01 a.m. EST	To: <b>10/01/2018</b> At 12:01 a.m. EST	
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### Schedule of Coverages

Section I: Property (Including Boiler Machinery-separate policy)

Section II: Crime

Section III: Comprehensive General Liability (Including Umbrella)

Section IV: Automobile Liability (Including Umbrella)

Section V: Public Officials Errors & Omissions (Including Umbrella)

Section VI: Employee Benefits Liability (Including Umbrella)

Section VII: Excess Workers' Compensation & Employers' Liability for a  
Group Self-Insurer Fund Member

**Total Member Contribution**

**\$158,423**

In return for the payment of the member contribution, and subject to all of the terms in this coverage document and Association By-Laws, Public Risk Management agrees to provide the coverage(s) as indicated in the schedule above. Specific coverage terms and conditions are afforded in the individual coverage forms by line of coverage.

Claim Reporting: Gallagher Bassett Services, Inc.  
1-877-507-7304



## Property Member Coverage Declarations

<b>Policy Number:</b>	<b>#PRM017-004-051</b>
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**Coverage Schedule**  
This coverage document provides the coverage's as shown below in the Coverage schedule with the corresponding limits and deductibles.

**Covered Property**

**Perils Covered:**  
All risks of direct physical loss or damage, including flood, earthquake, terrorism & sabotage, including equipment breakdown subject to the policy exclusions. Auto Physical Damage included at Actual Cash Value.

**Valuation:**  

<b>\$24,023,693</b>	All Other Perils Loss Limit (Total Insured Values per schedule on file with PRM)
Replacement Cost	Real and Personal Property
Actual Loss Sustained	Time Element (Total Insured Values per schedule on file with PRM)

**Maintenance Deductible**  
\$1,000 Per Occurrence

**Shared Named Wind Deductible**  
2% Of Total Values at Each Building involved in the loss, per any one occurrence.

**Wind Policy Shared Limits**  
Any one occurrence as outlined in the Schedule of Limits and Sub-Limits. Sub-Limits do not increase the policy limit of \$85,000,000. Membership schedule on file with Public Risk Management of Florida.

**All Terms and Conditions per Coverage Document PRM017-004**



## Crime Member Coverage Declaration

<b>Policy Number:</b>	<b>#PRM017-004-051</b>
<b>Membership Type:</b>	<i>Preferred Member</i>

<b>Named Member and Mailing Address:</b>	<b>Managing Agent Name and Address:</b>
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<b>Limits of Liability</b>	<b>Deductibles</b>
Crime	
\$500,000 Monies & Securities	\$1,000 Per Occurrence
\$500,000 Forgery or Alteration	\$1,000 Per Occurrence
\$500,000 Employee Dishonesty	\$1,000 Per Occurrence

<b>Forms &amp; Endorsements</b>
<b>All Terms and Conditions per Coverage Document PRM017-004</b>



**Comprehensive General / Law Enforcement Liability  
Member Coverage Declaration**

<b>Policy Number:</b>	<b>#PRM017-004-051</b>
<b>Membership Type:</b>	<b><i>Preferred Member</i></b>

<b>Named Member and Mailing Address:</b> <i>Sun N Lakes of Sebring Improvement District As a member of Public Risk Management of Florida 5306 Sun N Lake Blvd Sebring, Florida 33872</i>	<b>Managing Agent Name and Address:</b> <i>World Risk Management, LLC a Ballator Company 20 North Orange Avenue, Suite 500 Orlando, FL 32801</i>
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<b>Coverage Period:</b>	From: <b>10/01/2017</b> At 12:01 a.m. EST	To: <b>10/01/2018</b> At 12:01 a.m. EST
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<b>Limits of Liability</b>	<b>Deductibles</b>
Commercial General Liability	
<u>\$2,000,000</u> Each Occurrence	
<u>\$2,000,000</u> Personal/Advertising Injury	
<u>EXCLUDED</u> Medical Expense	NIL Per Occurrence
Law Enforcement	
<u>\$2,000,000</u> Each Occurrence	<u>NIL</u> Per Occurrence

<b>Forms &amp; Endorsements</b>
<b>All Terms and Conditions per Coverage Document PRM017-004</b>



## Automobile Member Coverage Declarations

<b>Policy Number:</b>	<b>#PRM017-004-051</b>
<b>Membership Type:</b>	<i>Preferred Member</i>

<b>Named Member and Mailing Address:</b>	<b>Managing Agent Name &amp; Mailing Address:</b>
<i>Sun N Lakes of Sebring Improvement District As a member of Public Risk Management of Florida 5306 Sun N Lake Blvd Sebring, Florida 33872</i>	<i>World Risk Management, LLC a Ballator Company 20 North Orange Avenue, Suite 500 Orlando, FL 32801</i>

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<b>Schedule of Automobile Coverages and Limits</b>			
<p>This coverage document provides the coverages as shown below in the coverage schedule with the corresponding limits and deductibles. Each of the coverages apply only to those autos shown as covered auto symbols. The covered auto symbol reference is available below. Auto Physical Damage is provided under Property Section I of the Coverage Document.</p>			
Coverages	Covered Autos Symbol	Limit	Deductible
Liability	1,8, 9	\$2,000,000	\$0
Personal Injury Protection	5	Statutory	\$0
Medical Payments		Excluded	\$0
Uninsured Motorist		Excluded	\$0
Underinsured Motorist		Excluded	\$0

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>(1) Any "Auto"</li> <li>(2) Owned "Autos" only</li> <li>(3) Owned Private Passenger "Autos"</li> <li>(4) Owned "Autos" Other Than Private Passenger</li> <li>(5) All Owned "Autos" Which Require No-Fault Coverage</li> </ul> | <ul style="list-style-type: none"> <li>(6) Owned "Autos" Subject to Compulsory U.M. Law</li> <li>(7) "Autos" Specified On Schedule</li> <li>(8) Hired "Autos"</li> <li>(9) Non-Owned "Autos"</li> </ul> |
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<b>Forms &amp; Endorsements</b>
<b>All Terms and Conditions per Coverage Document PRM017-004</b>



## Public Officials Errors & Omissions Member Coverage Declaration

<b>Policy Number:</b>	<b>#PRM017-004-051</b>
<b>Membership Type:</b>	<i>Preferred Member</i>

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<b>Limits of Liability</b>	<b>Deductibles</b>
Public Officials Errors & Omissions – Per Occurrence <u>\$2,000,000</u> Each Occurrence <u>\$6,000,000</u> Aggregate <u>\$1,750</u> EEOC Administrative Hearings Association Annual Aggregate EEOC <u>\$175,000</u> Administrative Hearings	NIL Per Occurrence
Sexual Harassment - Per Occurrence <u>\$2,000,000</u> Each Occurrence <u>\$6,000,000</u> Aggregate (Part of E&O Aggregate)	NIL Per Occurrence
Sexual Misconduct -Per Claim <u>\$2,000,000</u> Each Claim <u>\$3,000,000</u> Aggregate (Part of E&O Aggregate)	Retro Date: 10/01/2002 NIL Per Claim
Inverse Condemnation – Per Occurrence <u>\$100,000</u> Each Occurrence <u>\$100,000</u> Aggregate	Retro Date: N/A
Bert Harris Act – Per Occurrence <u>\$300,000</u> Each Occurrence <u>\$300,000</u> Aggregate	Retro Date: N/A
Non-Monetary Damages – Per Occurrence <u>\$100,000</u> Each Occurrence <u>\$100,000</u> Aggregate	Retro Date: N/A

<b>Forms &amp; Endorsements</b>
<b>All Terms and Conditions per Coverage Document PRM017-004</b>



## Employee Benefits Liability Member Coverage Declaration

<b>Policy Number:</b>	<b>#PRM017-004-051</b>
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<b>Coverage Period:</b>	From: <b>10/01/2017</b> At 12:01 a.m. EST	To: <b>10/01/2018</b> At 12:01 a.m. EST	
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<b>Limits of Liability</b>	<b>Deductibles</b>
Employee Benefits – Per Occurrence <u>\$2,000,000</u> Each Occurrence	<u>NIL</u> Per Occurrence

<b>Forms &amp; Endorsements</b>
<b>All Terms and Conditions per Coverage Document PRM017-004</b>



## Workers' Compensation and Employers' Liability for a Group Self-Insurer Fund Member Declarations

<b>Policy Number:</b>	<b>#PRM017-004-051</b>
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<b>Named Member &amp; Mailing Address:</b>	<b>Managing Agent Name &amp; Mailing Address:</b>
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<b>Limits of Liability:</b>	
Part 1 – Workers' Compensation (States):	<b>FL Statutory Limits</b>
Part 2 – Employer's Liability	
<u>\$3,000,000</u>	Each Accident
<u>\$3,000,000</u>	Disease-Policy Limit
<u>\$3,000,000</u>	Disease-Each Employee
Part 3 – Other States Insurance:	<b>Included</b>
Deductible:	<b>NIL</b>

<b>Forms &amp; Endorsements</b>
<b>All Terms and Conditions per Coverage Document PRM017-004</b>

Note: Member responsible for Florida State Workers Compensation Assessment Fees

\*Payroll is subject to audit

DESCRIPTION	CLASS CODE	PAYROLL 2017-2018
Street or Road Paving	5509	\$215,550
Waterworks OP & Drivers	7520	\$75,000
Sewage Disp Plant Op & Drivers	7580	\$204,750
Police Officer & Driver	7720	\$193,800
Clerical	8810	\$456,000
Buildings-Operation by Owner or Lessee	9015	\$69,900
Parks NOC All & Driver	9102	\$119,500
Municipal/Town/County State NOC	9410	\$58,500
<b>Total Payroll</b>		<b>\$1,393,000</b>





**UMBRELLA LIABILITY**  
**Comprehensive General / Law Enforcement Liability/Automobile Liability/Public**  
**Officials Errors & Omissions/Employee Benefits Liability**  
**Member Coverage Declaration**

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	At 12:01 a.m. EST	At 12:01 a.m. EST

<b>Limits of Liability</b>	
Commercial General Liability/Law Enforcement/Automobile/Errors & Omissions/Employee Benefits Liability - Occurrence	
\$3,000,000	Each Occurrence excess \$2,000,000 underlying
\$3,000,000	Per Member Aggregate for E&O & EBL
Employee Benefits – Per Occurrence	Retro     N/A
Public Officials – Per Occurrence	Date:

<b>Forms &amp; Endorsements</b>
<b>All Terms and Conditions per Coverage Document PRM017-004</b>



## Cyber Liability Member Coverage Declaration

<b>Policy Number:</b>	<b>NET 1523540</b>
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<b>Carrier:</b>	<i>Great American Insurance Company</i>
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<b>Limits of Liability</b>	<b>Deductibles</b>
Cyber Liability – Per Claim	Retro Date: 10/01/2016
\$1,000,000 Each Claim	\$10,000 Per Claim
\$5,000,000 Per Pool Aggregate	

<b>Forms &amp; Endorsements</b>
All Terms and Conditions per policy.