CITY OF LANDER

SPECIAL REGULAR CITY COUNCIL MEETING

Tuesday, May 27, 2025 at 6:00 PM

City Council Chambers, 240 Lincoln Street

AGENDA

Join Zoom Meeting
https://us06web.zoom.us/j/81980969706?pwd=AElIkb5XoVS8lbOj7c75AuWZIDGmdG.1

1. CALL TO ORDER

A. Pledge of Allegiance

B. Roll Call

2. APPROVAL OF AGENDA

3. COMMUNICATION FROM THE FLOOR
Please approach the microphone and state your full name for the record. This meeting and comments are electronically recorded. All comments will be limited to three minutes.

A. Public Comment

4. MAYOR AND COUNCIL UPDATES

5. STAFF REPORTS

6. NEW BUSINESS (ACTION ITEMS)

A. Consider and award the Request for Property Insurance Proposals for a five-year term beginning July 1, 2025, and ending June 30, 2030 to the low bidder Tegeler & Associates in the amount of $139,515 for FY 2025 2026 and authorize the Mayor to sign the Insurance Services Agreement.

7. ADJOURNMENT

Upcoming Council Meetings:

Regular Meetings:

6:00 PM Tuesday, June 10, 2025, City Council Chambers

6:00 PM Tuesday, July 8, 2025, City Council Chambers

Work Sessions:

6:00 PM Tuesday, June 24, 2025, City Council Chambers

6:00 PM Tuesday, July 22, 2025, City Council Chambers

All meetings are subject to cancellation or change.

2025-2030 Property Insurance RFP received			
Firm	**Contact**	**email**	**Cost**
Insurance Companies			
Tegeler & Associates	Tim Robeson	trobeson@tegelerinsurance.com	$139,515 annual premium for $75,989,592 in coverage
Wyoming Association of Risk Management	Joe Constantino	joe@warmpool.org	$130,000 annual premium based on $68,827,250 in coverage ($7,162,342 less in coverage)
			WARM's FY 2025 2026 premium for equal coverage would be $145,400

TEGELER and ASSOCIATES

194 N 7th Street • P.O. Box 550 • Lander, Wyoming 82520
(307) 332-7610 • FAX (307) 332-7660

May 5, 2025

City of Lander, WY
Rachelle Fontaine – City Clerk
240 Lincoln St
Lander, WY 82520

Dear Rachelle,

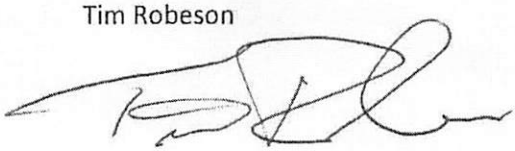
It is my pleasure to offer the enclosed insurance proposal for the City of Lander, WY, covering property, equipment and vehicle physical damage.

Travelers Insurance -- your trusted carrier since 2018 -- continues to offer the most competitive and comprehensive renewal. With its dedicated Public Entity unit, Travelers delivers robust coverage for Property, Equipment, Crime and Vehicle Physical Damage. They also accommodate vehicle liability coverage where we have identified a gap in the LGLP coverage.

- **Compensation Transparency** – Compensation is derived solely from premium commissions. No additional broker fees or consulting charges apply.
- **Public Entity Expertise** – Travelers has a longstanding national presence in municipal insurance, rated A++ by AM Best and AA by S&P. Tegeler & Associates has proudly served the City of Lander since 2015.
- **Loss Control** – Travelers offers both onsite and online risk control services tailored to municipal operations. Additional services are available as part of the agent-insured relationship including building valuation guidance, driver selection standards and liability gap analysis.
- **Claims Process** – Claims or potential claims can be reported directly to me at Tegeler & Associates. I remain available after business hours for emergencies. Alternatively, claims can be filed with Travelers online or by phone. Travelers will directly handle adjustment and payment.

With over a decade of experience insuring the City of Lander, I have an in-depth understanding of your risk profile and operations. In a time when personalized service is often replaced by automation, I remain committed to responsive, in-person support – whether to the Mayor or any staff member. I would be honored to continue serving the City for the next five years.

Sincerely,
Tim Robeson



Tegeler & Associates
PO BOX 550, 194 N 7th St
Lander, WY 82520
Tim Robeson – Agent
307-332-7610
trobeson@tegelerinsurance.com

Summary of Insurance Proposal for City of Lander, WY
July 1, 2025 to July 1, 2026

Travelers Insurance Company

Description	Limit	Premium	Notes
Property			
Buildings & Contents	$65,855,988	$98,990	Blanket Coverage - Coinsurance provision waived
Business Income	$500,000	$400	
Equipment Breakdown	*Included*	$4,283	
Flood & Earthquake		*Included*	
Crime			
Employee Theft	$500,000	$613	
Forgery or Alteration	$100,000	*Included*	
Equipment			
Scheduled	$4,391,926	$16,021	
Hired/Leased/Borrowed	$100,000	*Included*	
Vehicles			
Auto Liability - 2 Units	$1,000,000	$613	
Physical Damage - 43 Units	$3,541,678	$18,595	ACV Basis
Total Annual Premium		**$139,515**	

Statement Regarding Deductibles
Due to ongoing volatility in the insurance industry, deductibles now vary significantly by coverage type and even by cause of loss. For example, a separate wind/hail deductible is now standard for many property policies. Please refer to the attached Travelers proposal document for specific deductible details by line of coverage.

Statement of Qualifications:
Travelers, ranked as the second-largest commercial insurer in the U.S., reported $126 billion in assets and $41 billion in revenue in 2023. All proposed coverage is underwritten by Travelers, rated A++ by Am Best and AA by S&P. Should the City of Lander request additional coverages not referenced herein, coverage may be obtained through Travelers or an alternate carrier, provided the carrier maintains financial ratings of A- or better per AM Best's rating system. An example of additional requested coverage is: "liability coverage not available through the LGLP."

Local Service Team:

Tim Robeson – Agent
Tim has been with Tegeler & Associates since 2005. He is your point person for coverage questions, claims, policy changes and billing. He has been the branch manager for Tegeler & Associates' Lander office since 2015 and primarily handles commercial accounts. Tim is a lifelong Lander resident. He and his family enjoy everything Lander offers. Tim volunteers as a Youth Baseball Coach and as the President of the Friends of South Pass.

Melissa Denton – Account Executive
Melissa has been with Tegeler & Associates since 2015 and is a licensed property & casualty insurance. She is available for coverage questions, claims, policy changes and billing.

About Tegeler & Associates
Tegeler & Associates is a Wyoming owned independent insurance agency based in Pinedale, WY. Tegeler & Associates maintains offices in 14 Wyoming communities handling all lines of coverage including personal insurance, business insurance, bonding and life/health lines.

Gmail Rachelle Fontaine <rfontaine@landerwyoming.org>

2025-26 RFP

5 messages

Joe Constantino <joe@warmpool.org> Thu, May 1, 2025 at 4:32 PM
To: Rachelle Fontaine <rfontaine@landerwyoming.org>

Hi Rachelle,

As a follow-up to our conversation, your contribution for FY 2025-26, based on your stated values of $68,827,250 would be $130,000.

Attached is our policy, by-laws and JPA for your review. One thing I did not mention is that WARM members have access to our online learning system through Neogov at no charge. It is available to all employees. https://www.neogov.com/products/learn

Don't hesitate to reach out if you have any questions.

Thanks.

jc

Joe Constantino, ARM

Executive Director

Wyoming Association of Risk Management

307.275.3036 (o) 913.549.8524 (c)

~WARM is committed to protecting member assets through progressive and proactive risk management strategies.~

3 attachments

Property JPA - Amended 10.29.2020.pdf
245K

INSURANCE SERVICES AGREEMENT

THIS AGREEMENT is made and entered into this _____ day of _____, 2025, by and between the CITY OF LANDER, a municipal corporation, of 240 Lincoln Street, Lander, Wyoming 82520, hereinafter referred to as "City", and _____, a Corporation, whose address is _____, hereinafter referred to as "Contractor".

RECITALS

WHEREAS, the City desires to hire the Contractor, as an independent contractor, to complete and provide services as described herein at such times and in such a manner as is required; and,

WHEREAS, the Contractor agrees to perform the services described herein upon the terms and conditions set forth in this Agreement.

TERMS AND CONDITIONS

IN CONSIDERATION of the mutual covenants and promises set forth herein, it is agreed by and between the City and the Contractor as follows:

1. RECITALS. The preambles and recitals hereinabove set forth are hereby incorporated into this Agreement.

2. SCOPE OF WORK. The Contractor shall provide the services as follows:
See attached Exhibit A ATTACHED INSURANCE PROPOSAL

3. COMPENSATION. In consideration of the Contractor providing the above-described duties, the City agrees to pay to the Contractor the annual sum of _____ payable to Contractor in annual lump sum payment on July 15th.

4. RELATIONSHIP BETWEEN PARTIES. Contractor is performing services and duties under this Agreement as an independent contractor and not as employee, agent, partner, or joint venture with the City and nothing herein shall be construed to be inconsistent with this relationship or status. The Contractor is not entitled to any benefits provided by the City to its employees, including but not limited to, retirement benefits, pension plans, health insurance, vacation time, sick leave time, workers' compensation or unemployment insurance. The Contractor shall pay all of their own taxes on compensation paid to the Contractor pursuant to this Agreement.

5. LIABILITY. The work to be performed under this Agreement will be performed entirely at Contractor's risk. Contractor agrees to indemnify the City for any and all liability or loss arising in any way out of the performance of this Agreement by Contractor.

6. ASSIGNMENT. Any assignment of this Agreement by Contractor without the written consent of the City shall be void.

7. DURATION. This Agreement shall be for a term of five (5) years, 2025-2030 fiscal year ending June 30, 2030, unless sooner terminated for any of the reasons set forth in this Agreement.

8. TERMS TO BE EXCLUSIVE. The entire Agreement between the parties with respect to the subject matter hereunder is contained in this Agreement. Except as herein expressly provided to the contrary, the provisions of this Agreement are for the benefit of the parties solely and not for the benefit of any other person, persons or legal entities.

9. WAIVER OR MODIFICATION INEFFECTIVE UNLESS IN WRITING. No waiver, alteration or modification of any of the provisions of this Agreement shall be binding unless in writing and signed by a duly authorized representative of both parties to this Agreement.

10. GOVERNING LAW. This Agreement shall be governed by the laws of the State of Wyoming.

[SIGNATURES ON FOLLOWING PAGE]

IN WITNESS WHEREOF, the parties hereto have set their hands and seals this____ day of _____, 2025.

THE CITY OF LANDER,
A municipal corporation:

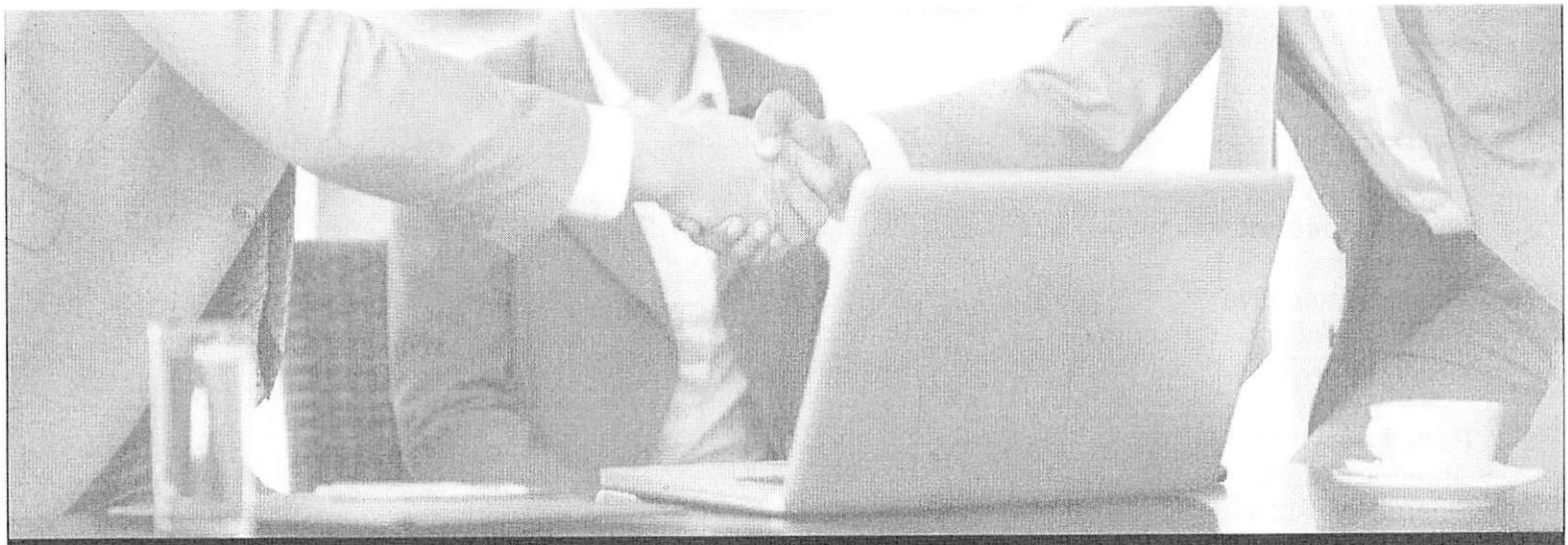
_____
Missy White, Mayor

ATTEST:

_____
Rachelle Fontaine , City Clerk

_____
Insert Insurance Company and signatory name

TRAVELERS



PRESENTED BY

TEGELER & ASSOCIATES
PO BOX 829
PINEDALE, WY 82941

PROPOSED ON 05/01/2025 FOR

CITY OF LANDER
240 LINCOLN ST
LANDER, WY 82520

On behalf of **TEGELER & ASSOCIATES** and **The Travelers Companies, Inc. and its affiliates**, we appreciate the opportunity to provide **CITY OF LANDER** with the following policy proposal.

Travelers Risk Control: Our Expertise is Your Advantage

Travelers Risk Control is an innovative provider of cost-effective risk management services and products. As one of the largest Risk Control departments in the industry, our scale allows the right resource at the right time to meet customer needs. For over 110 years, our loss prevention professionals have assisted agents, brokers and customers across the country and around the world.

https://www.travelers.com/risk-control

Claim Services:

Travelers has over 11,000 highly trained Claim professionals located across the U.S. Our local field representatives are supported by teams of dedicated customer service, catastrophe response, legal, medical, investigative, engineering, and large loss experts. Claims can be complex and expensive. We'll help you manage claims to control your total risk-related costs.

https://www.travelers.com/claims

Exhibit A

Meet your Travelers team

General

Overall Account
Kristen Brown
Account Executive
KNBROWN@travelers.com
210-525-3905

Policy Services
Brandon Karges
Operations Account Specialist
BKARGES@travelers.com
612-968-2572

To report, ask a question or discuss a claim please call 1-800-238-6225. A Claim Customer Service Representative is available 24 hours a day, 7 days a week to take the first notice of loss or provide assistance on any existing claim.

Your policies

Commercial Package Program - Simp. Occ.

Policy Number	H-630-9K508583-TIL-25
Effective	07/01/2025 – 07/01/2026
Insuring Company	TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA

Auto Liability

Policy Number	H-BA-9K508583-IND-25
Effective	07/01/2025 – 07/01/2026
Insuring Company	THE TRAVELERS INDEMNITY COMPANY

Auto Physical Damage

Policy Number	H-BA-9K508583-IND-25
Effective	07/01/2025 – 07/01/2026
Insuring Company	THE TRAVELERS INDEMNITY COMPANY

Locations schedule

630 - 9K508583 – Commercial Package Program - Simp. Occ.

LOC/BLDG	DESCRIPTION	ADDRESS
1/1	CITY HALL	240 LINCOLN, LANDER, WY 82520
2/2	CHAMBER COMMERCE	160 N 1ST ST, LANDER, WY 82520
2/3	NEW CHAMBER BLDG	100 N 1ST ST, LANDER, WY 82520
2/4	LANDER LIVE STAGE	CITY PARK 405 FREMONT ST, LANDER, WY 82520
3/5	COMMUNITY CEN	950 BUENA VISTA, LANDER, WY 82520
4/6	GOLF STORAGE	BUENA VISTA AND WIND RIVER, LANDER, WY 82520
4/7	CART STORAGE	BUENA VISTA AND WIND RIVER, LANDER, WY 82520
5/8	AIRPORT TERMN	1520 RODEO DRIVE, LANDER, WY 82520
5/9	WEATHER OBSER	1520 RODEO DRIVE, LANDER, WY 82520
5/10	HANGAR 1	1520 RODEO DRIVE, LANDER, WY 82520
5/11	HANGAR 2	1520 RODEO DRIVE, LANDER, WY 82520
5/12	HANGAR 3	1520 RODEO DRIVE, LANDER, WY 82520
5/13	CITY HANGAR	1520 RODEO DRIVE, LANDER, WY 82520
5/14	CITYHANGARREN	1520 RODEO DRIVE, LANDER, WY 82520
5/15	AVIAT FUELTNK	1520 RODEO DRIVE, LANDER, WY 82520
6/16	P AND R OFFICE	405 FREMONT ST, LANDER, WY 82520
6/17	GAZEBO	405 FREMONT ST, LANDER, WY 82520
6/18	MAINT BLDG	405 FREMONT ST, LANDER, WY 82520
6/19	RESTROOM 1	405 FREMONT ST, LANDER, WY 82520
6/20	RESTROOM 2	405 FREMONT ST, LANDER, WY 82520
6/21	PICNIC SHELTE	405 FREMONT ST, LANDER, WY 82520
6/22	FIREMANSPICNI	405 FREMONT ST, LANDER, WY 82520
6/23	TENNIS COURT	405 FREMONT ST, LANDER, WY 82520
6/24	SPORTS BOX	405 FREMONT ST, LANDER, WY 82520
7/25	RESTROOMS	300 LEEDY DR, LANDER, WY 82520
7/26	PICNIC SHELTE	300 LEEDY DR, LANDER, WY 82520
8/27	PICNIC SHELTE	738-798 N 8TH STREET, LANDER, WY 82520
8/28	RESTROOMS	738-798 N 8TH STREET, LANDER, WY 82520
8/29	SKATE PARK	738-798 N 8TH STREET, LANDER, WY 82520
9/30	RESTROOMS	320 BALDWIN CREEK RD, LANDER, WY 82520
11/32	RESTROOMS	1663 RODEO DRIVE, LANDER, WY 82520
11/33	ANNOUNCERBOOTH	1663 RODEO DRIVE, LANDER, WY 82520
12/34	MAINTGARAGE	130 GARFIELD ST, LANDER, WY 82520
13/35	OFFICE	805 MOUNT HOPE DRIVE, LANDER, WY 82520
13/36	STORAGE	805 MOUNT HOPE DRIVE, LANDER, WY 82520
14/37	PUBLIC WORKS	125 BUENA VISTA, LANDER, WY 82520
14/38	WATER HOUSE	125 BUENA VISTA, LANDER, WY 82520
14/39	PUBLIC WORKS STORAGE	125 BUENA VISTA, LANDER, WY 82520
15/40	WATER TANK	2843 SINKS CANYON RD, LANDER, WY 82520
15/41	TREATMENT PLA	2843 SINKS CANYON RD, LANDER, WY 82520
16/42	WASTE WATER B	100 INDUSTRIAL PARK RD N 2ND ST, LANDER, WY 82520
16/43	DISINFECT BLD	100 INDUSTRIAL PARK RD N 2ND ST, LANDER, WY 82520
17/44	MAINTBLDG	1390 BUENA VISTA DR, LANDER, WY 82520
18/45	PRO SHOP	1 GOLF COURSE RD, LANDER, WY 82520
18/46	STORAGE	1 GOLF COURSE RD, LANDER, WY 82520
19/47	WATER TANK	2796 SINKS CANYON RD, LANDER, WY 82520

20/48	MAINT SHOP	1390 BUENA VISTA DR, LANDER, WY 82520
20/49	SALT SHED	1390 BUENA VISTA DR, LANDER, WY 82520
21/50	WATER BOOSTER	1050 BUENA VISTA DR, LANDER, WY 82520
22/51	SENIOR CENTER	205 S 10TH ST, LANDER, WY 82520
23/52	FIRE HALL	430 GARFIELD ST, LANDER, WY 82520
24/53	FIRE DEPT AND GOLF COURSE STORAGE	1520 RODEO DRIVE, LANDER, WY 82520
25/54	MAVEN LEASE	1042 PRONGHORN DR, LANDER, WY 82520
26/55	GAZEBO CENTENNIAL PARK	215 MAIN ST, LANDER, WY 82520
27/56	PUMP STATION	1320 BISHOP RANDALL DR, LANDER, WY 82520
28/57	NEW WATER TANK	2751 SINKS CANYON RD, LANDER, WY 82520

Property coverage premium summary

Policy Number 630-9K508583

Coverages and limits of insurance – described premises

Insurance applies on a BLANKET basis only to a coverage or type of property for which a Limit of Insurance is shown below, and then only at the premises locations for which a value for such coverage or property is shown on the Statement of Values dated 4/23/2025 , or subsequently reported to and insured by us. For Insurance that applies to a specific premises location see Deluxe Property Coverage Part Schedule - Specific Limits

BLANKET DESCRIPTION OF COVERAGE OR PROPERTY	LIMITS OF INSURANCE
Building and Your Business Personal Property	$65,855,988

Co-insurance provision

Coinsurance does not apply to Blanket Coverages shown above.

Valuation provision

Replacement cost (subject to limitations) applies to most types of covered property (See Valuation Loss Condition).

Additional covered property

	LIMITS OF INSURANCE
Personal Property at Undescribed Premises	
At any "exhibition" premises	$50,000
At any installation premises or temporary storage premises	$50,000
At any other not owned, leased or regularly operated premises	$50,000
Personal Property in Transit	$50,000

Deluxe property coverage form - additional coverages & coverage extensions

The Limits of Insurance shown in the left column are included in the coverage form and apply unless a Revised Limit of Insurance or Not Covered is shown in the Revised Limits of Insurance column on the right. The Limits of Insurance apply in any one occurrence unless otherwise stated.

	LIMITS OF INSURANCE	REVISED LIMITS OF INSURANCE
Accounts Receivable		
At all described premises	$50,000	$200,000
In transit or at all undescribed premises	$25,000	$100,000
Appurtenant Buildings and Structures	$100,000	
Claim Data Expense	$25,000	
Covered Leasehold Interest – Undamaged Improvements & Betterments		
Lesser of Your Business Personal Property limit or:	$100,000	
Debris Removal (additional amount)	$250,000	
Deferred Payments	$25,000	
Duplicate Electronic Data Processing Data and Media	$50,000	
Electronic Data Processing Data and Media		
At all described premises	Included*	
Employee Tools		
In any one occurrence	$25,000	
Any one item	$2,500	
Expediting Expenses	$25,000	
Extra Expense	$25,000	
Fine Arts		
At all described premises	$50,000	$100,000
In transit	$25,000	
Fire Department Service Charge	Included*	
Fire Protective Equipment Discharge	Included*	
Green Building Alternatives – Increased Cost Percentage 1%		
Maximum amount – each building	$100,000	
Green Building Reengineering and Recertification Expense	$25,000	
Limited Coverage for Fungus, Wet Rot or Dry Rot – Annual Aggregate	$25,000	
Loss of Master Key	$25,000	
Newly Constructed or Acquired Property		
Buildings - each	$2,000,000	
Personal Property at each premises	$1,000,000	

*Included means included in applicable Covered Property Limit of Insurance

Deluxe property coverage form - additional coverages & coverage extensions

	LIMITS OF INSURANCE	REVISED LIMITS OF INSURANCE
Non-Owned Detached Trailers	$25,000	
Ordinance or Law Coverage	$250,000	
Outdoor Property	$25,000	$50,000
Any one tree, shrub or plant	$2,500	$5,000
Outside Signs		
At all described premises	$100,000	
At all undescribed premises	$5,000	
Personal Effects	$25,000	$50,000
Personal Property At Premises Outside of the Coverage Territory	$50,000	
Personal Property In Transit Outside of the Coverage Territory	$25,000	
Pollutant Cleanup and Removal – Annual Aggregate	$100,000	
Preservation of Property		
Expenses to move and temporarily store property	$250,000	
Direct loss or damage to moved property	Included*	
Reward Coverage		
25% of covered loss up to a maximum of:	$25,000	
Stored Water	$25,000	
Theft Damage to Rented Property	Included*	
Undamaged Parts of Stock in Process	$50,000	
Valuable Papers and Records – Cost of Research		
At all described premises	$50,000	$250,000
In transit or at all undescribed premises	$25,000	$150,000
Water or Other Substance Loss – Tear Out and Replacement Expense	Included*	

*Included means included in applicable Covered Property Limit of Insurance

Deluxe business income (and extra expense) coverage form - described premises

PREMISES LOCATION NO.	BUILDING NO.	LIMITS OF INSURANCE
ALL	ALL	$500,000

Rental Value: Included

Ordinary Payroll: Included

Deluxe business income - additional coverages and coverage extensions

The Limits of Insurance, Coverage Period and Coverage Radius shown in the left column are included in the coverage form and apply unless a revised Limit of Insurance, Coverage Period, Coverage Radius or Not Covered is shown under the column on the right. The Limits of Insurance apply in any one occurrence unless otherwise stated.

	LIMITS OF INSURANCE, COVERAGE PERIOD OR COVERAGE RADIUS	REVISED LIMITS OF INSURANCE, COVERAGE PERIOD OR COVERAGE RADIUS
Business Income from Dependent Property		
At Premises Within the Coverage Territory	$100,000	$250,000
At Premises Outside of the Coverage Territory	$100,000	
Civil Authority		
Coverage Period	30 days	
Coverage Radius	100 miles	
Claim Data Expense	$25,000	
Contract Penalties	$25,000	
Extended Business Income		
Coverage Period	180 days	
Fungus, Wet Rot or Dry Rot – Amended Period of Restoration		
Coverage Period	30 days	
Green Building Alternatives – Increased Period of Restoration		
Coverage Period	30 days	
Ingress or Egress	$25,000	
Coverage Radius	1 mile	
Newly Acquired Locations	$500,000	
Ordinance or Law - Increased Period of Restoration	$250,000	
Pollutant Cleanup and Removal – Annual Aggregate	$25,000	
Transit Business Income	$25,000	
Undescribed Premises	$25,000	

Causes of loss – Earthquake – aggregate in any one policy year, for all losses covered under the Causes of loss – Earthquake endorsement, commencing with the inception date of this policy:

		AGGREGATE LIMITS OF INSURANCE
01. Applies at the following Building(s) numbered:	01-30,32-57	$5,000,000

If more than one Annual Aggregate Limit applies in any one occurrence, the most we will pay is the highest involved Annual Aggregate Limit. The most we will pay during each annual period is the highest of the Annual Aggregate Limits shown.

Causes of loss – Broad Form Flood – aggregate in any one policy year, for all losses covered under the Causes of loss – Broad Form Flood endorsement, commencing with the inception date of this policy:

		AGGREGATE LIMITS OF INSURANCE
01. Applies at the following Building(s) numbered:	01,05-15,25-26,35-38,40-41,45-47,51-52	$2,500,000
02. Applies at the following Building(s) numbered:	02-03,34	$1,000,000

If more than one Annual Aggregate Limit applies in any one occurrence, the most we will pay is the highest involved Annual Aggregate Limit. The most we will pay during each annual period is the highest of the Annual Aggregate Limits shown.

EXCESS OF LOSS LIMITATION APPLIES – See Causes of Loss – Broad Form Flood endorsement.

Causes of loss – equipment breakdown DX T3 19

The insurance provided for loss or damage caused by or resulting from Equipment Breakdown is included in, and does not increase the Covered Property, Business Income, Extra Expense, and/or other coverage Limits of Insurance that otherwise apply under this Coverage Part.

COVERAGE EXTENSION:	LIMITS OF INSURANCE	REVISED LIMITS OF INSURANCE
Spoilage	$25,000	$250,000

LIMITATIONS:	LIMITS OF INSURANCE	REVISED LIMITS OF INSURANCE
Ammonia Contamination	$25,000	$250,000
Hazardous Substance	$25,000	$250,000

All Coverage Property Damage Deductible

Direct Damage to Covered Property	$10,000

Business Income & Extra Expense

Business Income and Extra Expense loss or expense caused by physical damage to covered property	72 Hours

Utility services

	LIMITS OF INSURANCE
Direct Damage - in any one occurrence (See Utility Services – Direct Damage endorsement)	$50,000

Coverage is provided for the following:
Water Supply
Communication Supply
Power Supply
Coverage for Overhead Transmission Lines is: excluded.

Electronic Vandalism Limitation Endorsement DX T3 98

ELECTRONIC VANDALISM	LIMIT OF INSURANCE
Aggregate in any 12 month period of this policy:	$10,000

Public Sector Services Additional Coverage Endorsements

	LIMIT OF INSURANCE
Spoilage Coverage Extension DX T3 15	$25,000

	LIMIT OF INSURANCE
Sewer or Drain Backup Amendment DX T4 45	$25,000

Public Entity Property Extensions DX T4 47	LIMIT OF INSURANCE
Confiscated Property	$100,000
Street Lights – each item	$25,000
Street Lights – maximum per occurrence	$250,000
Street Signs – each item	$25,000
Street Signs – maximum per occurrence	$250,000
Traffic Signs and Lights – each item	$25,000
Traffic Signs and Lights – maximum per occurrence	$250,000
Stadium Lights – per occurrence	$25,000
Stadium Lights – maximum per occurrence	$250,000

Deductibles

By Earthquake

	PERCENTAGE	OCCURENCE
01. in any one occurrence, at the following Building(s) numbered: 001-030,032-057		$25,000

As respects Business Income Coverage a 72 hour deductible applies at all premises locations.

By Flood

	OCCURENCE
01. At each of the following Building(s) numbered: 001,005-015,025-026,035-038,040-041,045-047,051-052 in any one occurrence	$25,000

As respects Business Income Coverage a 72 hour deductible applies at all premises locations.

02. At each of the following Building(s) numbered: 002-003,034 in any one occurrence	$100,000

As respects Business Income Coverage a 72 hour deductible applies at all premises locations.

By Windstorm or Hail

At the following described premises:

PREMISES LOCATION NO	BUILDINGS NO
ALL	ALL

in any one occurrence:	$25,000

As respects Business Income Coverage a 72 hour deductible applies at all premises locations above.

To Utility Services

Direct Damage, in any one occurrence:	$10,000

Business Income

As respects Business Income Coverage, for which no other deductible is stated above or in the coverage description, a 72 hour deductible applies.

Any Other Covered Loss

in any one occurrence:	$10,000

Rating Basis

Total Rating Basis	$66,355,988
Building Rate	0.149
Business Personal Property Rate	0.176
Time Element Rate	0.08
Premium for Policy Period	$103,673

Note: The Premium shown above includes the premium charged for Equipment Breakdown coverage. The premium for Equipment Breakdown coverage is $4,283.
If you elect not to purchase Equipment Breakdown coverage, please contact your Account Executive and a revised quote without Equipment Breakdown coverage will be sent to you.

Inland Marine coverage premium summary

Policy Number 630-9K508583

Miscellaneous Property Coverage Form CM T2 39

COVERAGE AND LIMITS OF INSURANCE

Covered property consists of the following when indicated by an 'X' below:

[X] **Scheduled items:**

[X] As shown on the most current schedule on file with us. The amount shown on such schedule for each item is the limit of insurance applying to that item.

Total limit of insurance for all scheduled items: $2,103,251

COVERAGE EXTENSIONS	LIMITS OF INSURANCE
Fire Protective Systems:	$75,000
Newly Acquired Property:	$25,000
Preservation Of Property Expense:	$5,000
Valuable Papers and Records:	$50,000

ADDITIONAL COVERAGES:	LIMITS OF INSURANCE
Claim Data Expense:	$5,000
Debris Removal Increased Limit:	$75,000
Fire Or Police Department Service Charge:	$25,000
Pollutant Cleanup And Removal:	$25,000
Reward Coverage:	$2,500

Deductible

Deductible applying to all covered loss or damage unless a more specific deductible for the covered loss is shown below or elsewhere in this proposal: $1,000

Deductible applying to covered loss or damage caused by or resulting from Flood or Earthquake when indicated by an 'X' below:

[X] Flood Deductible $50,000 or % subject to $ minimum and $ maximum

Valuation
Actual Cash Value

Coinsurance
The following Coinsurance applies when indicated by an 'X':

[ ] 100% [ ] 90% [ ] 80% [X] No Coinsurance Applies

Premium

Premium:	$8,119 Annual Premium	$8,119 Term Premium
Minimum earned premium:		None

Other Terms and Conditions

CM T7 53 – Earth Movement Deductible

[X] Dollar Deductible: $25,000

CM T7 56 – Earth Movement Limitation – Described Property Or Locations

SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS	EARTH MOVEMENT OCCURRENCE LIMIT OF INSURANCE	EARTH MOVEMENT ANNUAL AGGREGATE LIMIT OF INSURANCE
ALL COVERED PROPERTY	$1,000,000	$1,000,000

[X] Dollar Deductible: $25,000

CM T7 66 – Flood Limitation – Described Property Or Locations

SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS	FLOOD OCCURRENCE LIMIT OF INSURANCE	FLOOD ANNUAL AGGREGATE LIMIT OF INSURANCE
ALL COVERED PROPERTY	$1,000,000	$1,000,000

[X] Dollar Deductible: $50,000

Contractors Equipment Coverage Form CM T2 42

COVERAGE AND LIMITS OF INSURANCE

Covered Property
Coverage consists of the following when indicated by an 'X':

X	**Scheduled Equipment**	
X	As shown on the most current schedule on file with us. The amount shown on such schedulefor each item of equipment is the limit of insurance applying to that item.	
	Total limit of insurance for all Scheduled Equipment:	$2,114,499
X	**Unscheduled Owned Equipment**	
	Total limit of insurance for all unscheduled owned equipment:	$175,000
	Limit of insurance for any one unscheduled owned item of equipment:	$5,000
X	**Unscheduled Equipment Owned By Others**	
	Limit of insurance for any one unscheduled item of equipment leased, rented, or borrowed from others:	$100,000
	Total limit of insurance for all items of Equipment in any one Occurrence:	$2,389,499

Deductible

Deductible applying to all covered loss or damage indicated by an 'X' below unless a more specific Deductible for the covered loss or damage is shown elsewhere in this proposal:

X Dollar Deductible: $1,000

Valuation and Coinsurance

Valuation
The following Valuation applies to the applicable Covered Property:

Scheduled Equipment:
Actual Cash Value Valuation applies unless replaced by the Optional Valuation indicated by an X'.

Unscheduled Owned Equipment:
Actual Cash Value Valuation applies unless replaced by the Optional Valuation indicated by an X'.

Equipment Owned By Others:
The amount for which you are legally liable, not to exceed Replacement Cost.

Coinsurance
The following coinsurance applies to Scheduled Items when indicated by an 'X':

[ ]	100%	[ ]	90%	[ ]	80%	[X]	No Coinsurance Applies

Premium

The following Premium options apply when indicated by an 'X':

[X] **Scheduled and Unscheduled Owned Equipment**

[X] Non Reporting

Premium	$7,532

[ ] Premium Adjustment

Premium Base	Values
Estimated Premium Base Amount	
Annual Rate Per $100	
Inception Premium	
Adjustment Rate Per $100	

[X] **Leased Or Rented From Others**

[X] Non Reporting

Premium	$370

[ ] Premium Adjustment

Premium Base	Values
Estimated Premium Base Amount	
Inception Premium	
Adjustment Rate Per $100	

Total Premium Due At Inception:	$7,902

Other Terms and Conditions

CM B0 97 - Contractors Equipment Supplemental Declarations

COVERAGE EXTENSIONS	LIMIT OF INSURANCE
Business Personal Property In Job Trailers:	$10,000
Document And Data Restoration Costs:	$50,000
Fire Protective Systems:	$75,000
Hauling Property Of Others:	$100,000
Newly Acquired Equipment - Per Item:	$250,000
Rental Costs:	
Any One Item:	$5,000
Any One Occurrence:	$25,000
Upgrades To Covered Property:	$25,000

ADDITIONAL COVERAGES	LIMIT OF INSURANCE
Claim Data Expenses:	$5,000
Continuing Rental Payments:	
Any One Item:	$5,000
Any One Occurrence:	$25,000
Contract Penalty:	$25,000
Debris Removal Increased Limit:	$75,000
Employee Tools, Equipment And Clothing:	
Any One Item:	$1,000
Any One Employee:	$2,500
Any One Occurrence:	$5,000
Errors Or Unintentional Omissions:	$100,000
Expediting Expenses:	$25,000
Expendable Supplies:	$10,000
Fire Or Police Department Service Charge:	$25,000
Lost Warranty Or Service Contract:	$10,000
Pollutant Clean Up And Removal:	$25,000
Preservation Of Property Expense:	$50,000
Reward Coverage:	$2,500
Tracking System Deductible Waiver Amount:	$10,000

CM B0 99 - Contractors Equipment Deductible Schedule
The following specific Deductible(s) apply to loss or damage to the type of property, or to loss or damage by the cause of loss, as indicated by an 'X' below:

X	**Earth Movement Deductible:**	
X	Dollar Deductible:	$25,000
X	**Flood Deductible:**	
X	Dollar Deductible:	$50,000

CM U3 52 – Flood Limitation – Described Property or Locations

SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS	FLOOD OCCURRENCE LIMIT OF INSURANCE	FLOOD ANNUAL AGGREGATE LIMIT OF INSURANCE
ALL COVERED PROPERTY	1,000,000	1,000,000

CM U3 67 – Earth Movement Limitation – Described Property or Locations

SCHEDULE OF DESCRIBED PROPERTY OR LOCATIONS	OCCURRENCE LIMIT OF INSURANCE	ANNUAL AGGREGATE LIMIT OF INSURANCE
ALL COVERED PROPERTY	1,000,000	1,000,000

Gross Premium: $16,021

Electronic Vandalism Limitation And Other Changes CM U6 17

ELECTRONIC VANDALISM	LIMIT OF INSURANCE
Aggregate in any 12 month period of this policy:	$10,000

Crime coverage premium summary

Policy Number 630-9K508583

Government Crime - Discovery Coverage

The Government Crime - Discovery Coverage Part consists of this Declarations Form and the Government Crime - Discovery Coverage Form.

Employee benefit plan(s) included as insureds:

INSURING AGREEMENTS	LIMIT OF INSURANCE PER OCCURRENCE	DEDUCTIBLE AMOUNT PER OCCURRENCE
Employee Theft – Per Loss Coverage	$500,000	$1,000
Forgery Or Alteration	$100,000	$1,000
Inside The Premises – Theft of Money And Securities	$100,000	$1,000
Inside The Premises – Robbery Or Safe Burglary Of Other Property	Not Covered	Not Covered
Outside The Premises	$100,000	$1,000
Computer Fraud	$100,000	$1,000
Funds Transfer Fraud	Not Covered	Not Covered
Money Orders And Counterfeit Paper Currency	$100,000	$1,000

Cancellation of prior insurance issued by us:

By acceptance of this Coverage Part you give us notice cancelling prior policy Nos._____; the cancellation to be effective at the time this Coverage Part becomes effective.

Gross Premium: $613

Commercial Auto coverage premium summary

Option 1

Gross Premium $613

COVERAGE	AUTO SYMBOLS	LIMITS
Liability	7 only	$1,000,000
Uninsured/Underinsured Motorist	2 only	Rejected
Number of autos, excluding trailers	2	
Number of trailers	0	

Statutory Cap Limits Of Insurance Endorsement

	LIMIT
Wyoming Each Claimant Limit - Statutory Cap	$250,000
Wyoming Each Accident Limit - Statutory Cap	$500,000

Amendments

DESCRIPTION
Amendment Of Bodily Injury Definition
Public Entity Auto Extension
Professional Services Not Covered
Emergency Services - Volunteer Firefighters' & Workers' Injuries Excluded
Amendment Of Employee Definition
Preservation Of Governmental Immunity - Wyoming
Amendment Of Common Policy Conditions - Prohibited Coverage - Unlicensed Insurance And Trade Or Economic Sanctions

Commercial Auto Physical Damage

Option 1

Gross Premium $18,595

COVERAGE	VALUATION	UNITS	DEDUCTIBLE
Symbol 2,8			
Comprehensive	Actual Cash Value	5	$2,500
Comprehensive	Actual Cash Value	34	$1,000
Comprehensive	Actual Cash Value	2	$25,000
Comprehensive	Stated Amount	2	$1,000
Collision	Actual Cash Value	5	$2,500
Collision	Actual Cash Value	34	$1,000
Collision	Actual Cash Value	2	$25,000
Collision	Stated Amount	2	$1,000

Miscellaneous Items

DESCRIPTION
Hired Auto Physical Damage-Loss Of Use-Comprehensive/Collision-Deductible: $1,000/$1,000

Amendments

DESCRIPTION
Public Entity Auto Extension
Preservation Of Governmental Immunity - Wyoming

Federal Terrorism Risk Insurance Act Disclosure

The Federal Terrorism Risk Insurance Act of 2002 as amended ("TRIA") establishes a program under which the Federal Government may partially reimburse "Insured Losses" (as defined in TRIA) caused by "Acts Of Terrorism" (as defined in TRIA). "Act Of Terrorism" is defined in Section 102(1) of TRIA to mean any 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 – to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States Mission; and 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.

The Federal Government's share of compensation for such Insured Losses is 80% of the amount of such Insured Losses in excess of each Insurer's "Insurer Deductible" (as defined in TRIA), subject to the "Program Trigger" (as defined in TRIA).

In no event, however, will the Federal Government be required to pay any portion of the amount of such Insured Losses occurring in a calendar year that in the aggregate exceeds $100 billion, nor will any Insurer be required to pay any portion of such amount provided that such Insurer has met its Insurer Deductible. Therefore, if such Insured Losses occurring in a calendar year exceed $100 billion in the aggregate, the amount of any payments by the Federal Government and any coverage provided by this policy for losses caused by Acts Of Terrorism may be reduced.

For each coverage provided by this policy that applies to such Insured Losses, the charge for such Insured Losses is included in the premium for such coverage. The charge for such Insured Losses that has been included for each such coverage is the percentage of the premium for such coverage indicated below, and does not include any charge for the portion of such Insured Losses covered by the Federal Government under TRIA.

Account summary

Premium summary

COVERAGE	POLICY NUMBER	PREMIUM
DELUXE	630-9K508583	$103,673
INLAND MARINE	630-9K508583	$16,021
CRIME	630-9K508583	$613
AUTO LIABILITY	BA-9K508583	$613
AUTO PHYSICAL DAMAGE	BA-9K508583	$18,595
	Total	**$139,515**

Note: *The estimated premium shown in the Premium Schedule and Quote Options, if any, may differ from actual premiums shown on the policies and installment bills due to installment charges, estimated taxes and surcharges, as well as rounding. Estimated taxes and surcharges may differ depending on selection of Quote Options, if any.*

IMPORTANT NOTE REGARDING ACCOUNT MINIMUM PREMIUM

The lines of business shown in the *Premium Schedule and Quote Options, if any*, are subject to a $5,000 account minimum premium. If the line(s) of business selected for binding do not total at least $5,000, then the premiums shown for those lines of business will be adjusted to total $5,000.

Payment plan

Agency Bill - Yearly
Bill Payment Options can be found at: Travelers.com/AutoPay

Note: The amount of each installment will be reflected on your policy invoicing.

Account summary

Disclosure

Unless accepted, the offer(s) of insurance contained in this proposal expire(s) automatically thirty (30) days after the proposal date referenced on the cover page, or the proposed effective date if earlier. This proposal is not a binding contract of insurance. If you have questions regarding this proposal, please contact your Travelers Representative.

The following outlines the coverage forms, limits of insurance, policy endorsements and other terms and conditions provided in this proposal/quote. Any policy coverages, limits of insurance, policy endorsements, coverage specifications, or other terms and conditions that you have requested that are not included in this proposal/quote have not been agreed to by Travelers. Please review this proposal/quote carefully and if you have any questions, please contact your Travelers representative.

This proposal/quote does not amend, or otherwise affect, the provisions of coverage of any resulting insurance policy issued by Travelers. It is not a representation that coverage does or does not exist for any particular claim or loss under any such policy. Coverage depends on the applicable provisions of the actual policy issued, the facts and circumstances involved in the claim or loss and any applicable law.

Please note that changes in the exposures, limits, or coverages may result in changes in rates and/or account pricing. Additionally, due to the expense of processing and servicing this account, in the event this quote is not accepted in its entirety, we reserve the right to reprice and reunderwrite this quote.

The policies will also be subject to all state-mandated endorsements.

At our discretion, we may decide to perform an interim test audit during the upcoming policy period to verify the adequacy of the exposure estimates that have been provided to us. If we decide to perform an interim test audit, a Travelers Auditor will contact the insured at the appropriate time to set up an appointment. The results of any interim test audit that we perform will be shared with you as soon as possible after the audit report has been completed.

As Broker/Agent you will be responsible for being aware of and complying with the various legal requirements associated with countersignature in various jurisdictions covered in the policies.

Property coverage form index

Policy Number 630-9K508583

Coverage and amendments

DESCRIPTION	FORM NUMBER
TABLE OF CONTENTS - DELUXE PROP COV PART	DX 00 04
CANCELLATION CHANGES - DELUXE	DX 00 05
WY CHANGES	DX 01 11
DELUXE PROP COV PART DECLARATIONS	DX T0 00
DELUXE PROPERTY COVERAGE FORM	DX T1 00
DELUXE BI (AND EE) COVERAGE FORM	DX T1 01
CAUSES OF LOSS-EARTHQUAKE	DX T3 01
CAUSES OF LOSS - BROAD FORM FLOOD	DX T3 02
SPOILAGE COVERAGE EXTENSION	DX T3 15
CAUSES OF LOSS-EQUIPMENT BREAKDOWN	DX T3 19
WINDSTORM OR HAIL DEDUCTIBLE	DX T3 37
UTILITY SERVICES-DIRECT DAMAGE	DX T3 85
ELECTRONIC VANDALISM LIMIT & OTHER CHANG	DX T3 98
FEDERAL TERRORISM RISK INSURANCE ACT DIS	DX T4 02
LIMITED SEWER DRAIN BACK-UP COVERAGE	DX T4 45
PUBLIC ENTITY PROPERTY EXTENSIONS	DX T4 47
DIGITAL ASSETS EXCLUSIONS	DX T5 21

Package common coverage form index

Policy Number 630-9K508583

630 Common coverage and amendments

DESCRIPTION	FORM NUMBER
COMMON DEC	IL T0 02
LOCATION SCHEDULE	IL T0 03
COMMON POLICY CONDITIONS-DELUXE	IL T3 18
EXCLUSION OF CERTAIN COMPUTER LOSSES	IL T3 55
EXCL OF LOSS DUE TO VIRUS OR BACTERIA	IL T3 82
AMNDT COMMON POLICY COND-PROHIBITED COVG	IL T4 12
CAP ON LOSSES FROM CERT ACTS OF TERRORIS	IL T4 14
ADDITIONAL BENEFITS	IL T4 27
PROTECTION OF PROPERTY	IL T4 40
DEFENSE FEES,COSTS,EXP-RIGHT TO REIMBURS	IL T4 49
WY CHANGES-CANCELLATION & NONRENEWAL	IL T9 48

Inland Marine coverage form index

Policy Number 630-9K508583

Coverage and amendments

Inland Marine

DESCRIPTION	FORM NUMBER
COMMERCIAL INLAND MARINE CONDITIONS	CM 00 01
WYOMING CHANGES-LEGAL ACTION AGAINST US	CM 01 09
MISC PROPERTY COVERAGE FORM DEC	CM B0 72
CONTRACTORS EQUIPMENT COVERAGE FORM DEC	CM B0 96
CONTRACTORS EQUIPMENT SUPPLEMENTAL DEC	CM B0 97
CONTRACTORS EQUIPMENT DEDUCTIBLE SCHED	CM B0 99
TABLE OF CONTENTS	CM T0 11
MISCELLANEOUS PROPERTY COVERAGE FORM	CM T2 39
CONTRACTORS EQUIPMENT COVERAGE FORM	CM T2 42
FEDERAL TERRORISM RISK INSURANCE ACT DIS	CM T3 98
EARTH MOVEMENT DEDUCTIBLE	CM T7 53
EARTH MVMNT LIMIT-DESCRIBED PROP OR LOCS	CM T7 56
FLOOD DEDUCTIBLE	CM T7 62
FLOOD LIMIT-DESCRIBED PROP OR LOCS	CM T7 66
FLOOD DEDUCTIBLE	CM U3 49
FLOOD LIMITATION-DESC PROP OR LOCS	CM U3 52
EARTH MOVEMENT DEDUCTIBLE	CM U3 65
EM LIMITATION-DESC PROP OR LOCS	CM U3 67
ELECTRONIC VAND LIMITATION & OTHER CHGS	CM U6 17
DIGITAL ASSETS EXCL - DIGITAL CURRENCY	CM U6 41

Crime coverage form index

Policy Number 630-9K508583

Coverage and amendments

DESCRIPTION	FORM NUMBER
GOV'T CRIME COV FORM (DISCOVERY FORM)	CR 00 24
WYOMING CHANGES -LEGAL ACTION AGAINST US	CR 01 08
CONVERT TO AGGREGATE LIMIT OF INSURANCE	CR 20 08
ADD FAITHFUL PERF OF DUTY COV GOVT EMPL	CR 25 19
ADD FAITHFULL PERF OF DUTY COV FOR SPEC	CR 25 43
GOVERNMENT CRIME COV PART DECLARATIONS	CR T0 22
TABLE OF CONTENTS - GOV'T DISCOVERY FORM	CR T0 29

Commission summary

COVERAGE	POLICY NUMBER	COMMISSION
DELUXE	630-9K508583	12.00 %
INLAND MARINE	630-9K508583	12.00 %
CRIME	630-9K508583	12.00 %
AUTO LIABILITY	BA-9K508583	12.00 %
AUTO PHYSICAL DAMAGE	BA-9K508583	12.00 %

Note: *It is the agent's or broker's responsibility to comply with any applicable laws regarding disclosure to the policyholder of commission or other compensation we pay, if any, in connection with this policy or program.*

* Commission percentage displayed does not apply to any North Carolina Reinsurance Facility loss recoupment surcharge amounts included in the liability premium of the Commercial Auto Policy, if applicable.

Important Notice Regarding Compensation Disclosure

For information about how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website:

http://www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Travelers, Enterprise Development, One Tower Square, Hartford, CT 06183.