

Phone: 818-593-2008



# CONFIRMATION OF COVERAGE BOUND (BINDER CONFIRMATION)

Jun 29, 2023

Lyddy Martin Company 5021 Verdugo Way Ste. 105 #414 Camarillo. CA 93012

Re: California State University, Channel Island Site Authority

Policy #:8400010770-231

Effective: 7/1/2023 to 7/1/2024

We are pleased to confirm the attached binder for (Earthquake Only) being offered with multiple papers through Arrowhead.

This carrier is **Non-Admitted** in the state of **CA**. Please note that this binder is based on the coverage, terms and conditions as stated in the attached binder, which may be different from those requested in your original submission. As you are the representative of the Insured, it is incumbent upon you to review the terms of this binder carefully with your Insured, and reconcile any differences from the terms requested in the original submission. CRC Insurance Services, Inc. disclaims any responsibility for your failure to reconcile with the Insured any differences between the terms bound as per the attached and those terms originally requested. This coverage may not be bound without a fully executed CRC brokerage agreement.

NOTE: If insured is located outside your resident state, you must hold appropriate non-resident license prior to binding.

Mailing Address: 1 University Drive

Camarillo, CA 93012

Coverage as bound per the attached. Premium and Commission are as follows:

TIV / Limit: \$40,727,969 Deductible: 15%

Premium:\$77,000.00TRIA Premium:- REJECTEDCatastrophe Analysis Fee\$1,800.00Inspection Fee\$300.00Broker Fee\$500.00Surplus Lines Tax\$2,373.00Stamping Office Fee\$142.38

Total: \$82,115.38

**Broker Fees & Policy Fees are Fully Earned at Binding** 

#### If Non Admitted the following applies:

California Tax Filings are the responsibility of: ( ) Your Agency ( ) CRC

SURPLUS LINES LICENSEE: CRC Corporate License 0778135

Tax Affidavit Number (If applicable):

#### **Home State:**

The Home State was determined based on the information provided in your submission and the completed Declaration of Home State form. Please ensure the correct Home State is listed. Incorrect information could result in additional or return taxes, fees, surcharges, penalties, interest, and assessments at a later date, and in addition to what is shown. Additionally, please note that this is the current tax calculation based on the Home State but there could be changes that result in additional or return tax - due at a later date - based on future enactments of surplus lines laws by any of the various states.

Upon requesting quotes and/or placement for the coverage listed herein, the producing retail broker hereby confirms that he/she has performed any and all diligent searches, as may be required by statute, for coverage through licensed carriers or other means of placement, <u>and as necessary maintain proof of declination</u>. Where allowed by governing statutes, "diligent effort" may not require an actual physical search and declination on each risk, but may be based on the retail producing broker's own experience, opinion and overall knowledge of acceptability in the admitted marketplace.

CRC does not issue any certificates of insurance. It is the responsibility of the issuing party Lyddy Martin Company, to issue COIs according to the insurance policy in reference. CRC does not check or review any COI they receive. All copies of COIs received will be destroyed at time of receipt.

#### Financing Insurance Premiums

Premium financing budgets insurance payments and improves liquidity for other business objectives: working capital, business growth, business expansion.

If your clients choose to pay their insurance in monthly installments, it's fast and easy with AFCO Credit Corporation, which is an affiliate of CRC, providing premium financing solutions for companies across the United States.

You can learn more about how premium financing works and how it can expand your relationship with your clients by emailing <a href="mailto:afco.com">afco.com</a>; or call toll-free 877-317-6437, option 1. Additional information is available at <a href="https://www.afco.com/partners/crc.html">https://www.afco.com/partners/crc.html</a>.

Should you have any questions, please feel free to contact our office.

Sincerely,

Raya Walker 818-593-2008 rawalker@crcgroup.com 11398307

**CONFIDENTIAL** 



## Special Risk Division

701 B Street, Suite 2100, San Diego CA 92101

#### **BINDING CONFIRMATION**

Date:6/29/2023

Named Insured: CALIFORNIA STATE UNIVERSITY, CHANNEL ISLAND AUTHORITY

Mailing Address: 1 UNIVERSITY DRIVE, CAMARILLO, CA 93012

For the purposes of filing surplus lines taxes and fees for exposures covered under the terms of this policy, the "Home

State" as determined under the "Nonadmitted and Reinsurance Reform Act of 2010"is identified as: CA

Term: 7/1/2023 to 7/1/2024 Binder expires on 07/31/2023 12:01 AM; Local time at the location of the

property involved or upon issuance of policies

#### Layer 1 Carrier Listing:

Ascot Specialty Insurance Company	18.41%	\$7,500,000	Pol # UB211270B00417
Everest Indemnity Insurance Company	24.55%	\$10,000,000	Pol # 8400010770-231
General Security Indemnity Company of Arizona	5.00%	\$2,036,398	Pol # TR0001486-15730-23
Palomar Excess and Surplus Insurance Company	24.55%	\$10,000,000	Pol # PG700516
Mercer Insurance Company	12.28%	\$5,000,000	Pol # ARH00002143
Steadfast Insurance Company	15.21%	\$6,191,571	Pol # BPP4512529

NON ADMITTED CARRIERS - Current rating may be found at ambest.com

Account #: 119050

Perils: Earthquake only

Building Ordinance Coverage A: Included. ICC/Demo: Sublimit \$4,072,796\*

\*(collectively for Demo and ICC, not individually)

If excess - BO coverage applies only if all underlying carriers are including with no sublimits

Need verification prior to issuing policy - If not received, it will be excluded

Layer 1: \$40,727,969 (100.00%) part of \$40,727,969 Primary

Limits apply per occurrence and in the aggregate for the following: Earthquake

Deductibles:	EQ 15 %	per Uni	it	
Including Time Elem	nent -			
B	usiness Income		Extra Expense	Rental Value
Excluding Time Eler	ment		BI dedu	ctible if different from PD:
Minimu	m EQ Deductible:		\$ 50,000	
EQSL:			Excluded	
Flood:			Excluded	
AOP:			Excluded	
Terroris	sm:		Excluded	

Unit is defined as: a) Each Separate Building or Structure

- b) Contents in each Separate Building or Structure
- c) Property in the Yard
- d) Business Income/Extra Expense

Property Covered:		Real Property Hard Costs Business Income Extra Expense Rental Value Leasehold Interests Contingent Business Income Per Submission Fine Arts			Business Personal Soft Costs EDP Tenant Improveme Stock Machinery and Equ Accounts Receival Valuable Papers	ents/Bet uipmen	terments	
Valuation:		operty Damage ne Element including Extra Expens	se			RC RC		ACV ALS
Territory/Loca	ations:	201-227 Landing Drive, C dated 3/29/2023.	amarillo, CA 93012 a	and	d locations as per s	chedule	on file wi	th company only
TIV:		\$ 40,727,696						
Forms:	Company Form Company Excess Follow Form (subject to review and approval of form we are to follow) Copy of policy we are to follow must be received within 75 days of effective date or we will issue our form Manuscript Form (subject to approval of final executed policy form and approval of form we are following if following form) Manuscript form and copy of policy we are to follow must be received within 75 days of effective date or we will issue our form  Excess Follow Form or Manuscript Form, we require a complete copy of the policy we are following which is subject to approval prior to issuing our policy. Our policy will not be issued without it.							
Exclusions:		Pollution (Company Form) Asbestos / Contamination (Comp Mold (Company Form) Flood Flood - locations located in 100 y Flood - locations located in 100 y Building Ordinance, Increased Co Boiler and Machinery Communicable Disease, Virus or Cyber Exclusion Endorsement Underlying Sublimited Coverages All Risk Perils (Including Windsto Terrorism (as provided under TR Ensuing Loss War Exclusion Nuclear/Radioactive/Biological ar	EQSL ear flood plain ear flood plain, X500 ost of Construction ar Bacteria s Exclusion rm) IPRA of 2015)	nd	,	⊠ ood zon	Theft es	

Conditions:	Warrant All Risk Underlyer Debris Removal clause (Company Form) Excess Limit of Liability and Participation Clause (Company F Drop Down Statement of Values form  loes not guarantee the agreement to add additional location	ns/coverages at the account rate or any rate.		
	The agreement to add additional locations/coverages is su	bject to carrier approval.		
	PREMIUM: \$ 77,000	25% Minimum Earned		
	TRIPRA of 2015 Premium: \$ Rejected	Not included in premium above		
	Total Premium \$ 77,000			
	Catastrophe Analysis Fee: \$ 1,800	Fully Earned		
	Inspection Fee: \$ 300	Fully Earned		
Plus applicable SLA Taxes and Fees - broker is responsible for the calculation of these taxes and fees, payment to the appropriate SLA office and filing of the SLA form. Broker is responsible for maintaining signed insurance applications and acknowledgement of state fraud warnings.				
Subject to:				

#### Comments:

This insurance does not apply to "bodily injury", "property damage", "time element" or "personal and advertising injury" arising out of the actual or alleged transmission of a communicable disease caused by either virus or bacteria whether engineered or naturally occurring.

The building definition is extended to include foundations.

This binder is a summary of coverage and may not be all encompassing. In the event of difference, policy language will prevail. Locations covered under this policy may be subject to inspection and underwriting action may be taken if the exposure is found to be different than the submitted application.

Arrowhead General Insurance Agency

https://www.bbinsurance.com/ccpa-privacy-notice/

https://www.munichre.com/us-non-life/en/general/privacy-statement.html

# Notice Regarding Surplus Lines Filing Confirmation and TRIPRA Rejection Forms

On all accounts effective 2/1/2019 and later, we will be using DocuSign to collect Surplus Lines Filing Confirmations and TRIPRA rejection notices. These notices and forms will no longer be appended to your Quotes or Binders.

PLEASE NOTE THAT AT THE TIME OF BINDING YOU MUST ADVISE US IF THE INSURED HAS ELECTED OR REJECTED THE PURCHASE OF TRIPRA COVERAGE. BINDERS CANNOT BE SENT UNTIL THIS INFORMATION IS PROVIDED.

After your account is bound, you will receive separate emails with instructions to complete the Surplus Lines Filing confirmation and TRIPRA Rejection forms in DocuSign. You will also be able to reassign or forward the request to another party for completion.

After all documents are signed they will automatically be returned to your underwriter and no further action will be required on your part.

## **Schedule of Applicable Fees**

#### Catastrophe Analysis Fee \$ 1,800

Ascot Specialty Insurance Company - \$ 300.00 Everest Indemnity Insurance Company - \$ 300.00 General Security Indemnity Company of Arizona - \$ 300.00 Mercer Insurance Company - \$ 300.00 Palomar Excess and Surplus Insurance Company - \$ 300.00 Steadfast Insurance Company - \$ 300.00

### Inspection Fee \$ 300

Ascot Specialty Insurance Company - \$ 50.00 Everest Indemnity Insurance Company - \$ 50.00 General Security Indemnity Company of Arizona - \$ 50.00 Mercer Insurance Company - \$ 50.00 Palomar Excess and Surplus Insurance Company - \$ 50.00 Steadfast Insurance Company - \$ 50.00