Insurance Proposal

City of Laredo, The Detoxification Department dba ROOTS Recovery Center

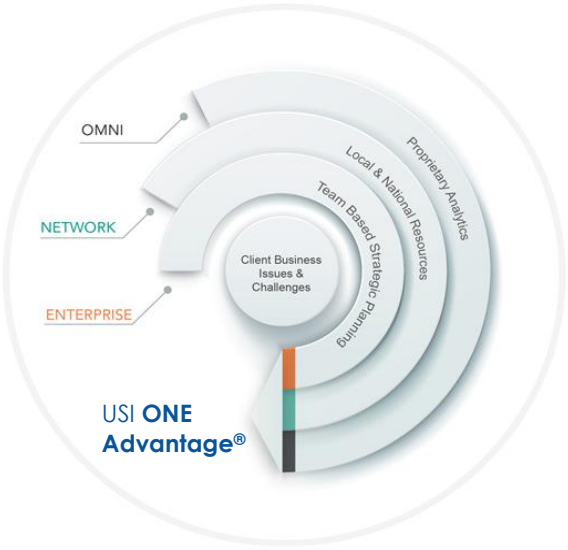
Producer: Bob Bookhammer | Kyle Schaller
Account Executive: Candice Hawley
Date Prepared: June 29, 2026

About USI Insurance Services

USI is one of the largest insurance brokerage and consulting firms in the world, delivering property and casualty, employee benefits, personal risk, program and retirement solutions to large risk management clients, middle market companies, smaller firms and individuals. Headquarters in Valhalla, New York, USI connects over 10,500 industry leading professionals across ~200 offices to serve clients' local, national and international needs. USI has become a premier insurance brokerage and consulting firm by leveraging the USI ONE Advantage®, an interactive platform that integrates proprietary and innovative client solutions, networked local resources and expertise, and enterprise-wide collaboration to deliver customized results with positive, bottom-line impact. USI attracts best-in-class industry talent with a long history of deep and continuing investment in our local communities. For more information, visit usi.com.

The USI ONE Advantage

What truly distinguishes USI as a leading insurance brokerage and consulting firm is the USI ONE Advantage, a game-changing value proposition that delivers clients a robust set of risk management and benefit solutions and exclusive resources with financial impact. USI ONE® represents **Omni, Network, Enterprise**—the three key elements that create the USI ONE Advantage and set us apart from the competition.



Omni – USI's Proprietary Analytics

Omni, which means "all," is USI's one-of-a-kind solutions platform—real time, interactive, dynamic and evolving, and customized for each client. Built in-house by USI subject matter experts, Omni captures the experience of more than 500,000 clients, thousands of professionals and over 150 years of business activity through our acquired agencies into targeted, actionable solutions across property & casualty, employee benefits, personal risk and retirement. Omni features over a thousand solutions, case studies, work products and detailed analysis across industry verticals in a single dashboard. USI consultants input the client's personalized data into Omni – highlighting their business, employees, and risks. The results feature client specific recommendations with quantified financial impact and the ability to analyze alternative scenarios with the touch of a button.

Network – USI's Local and National Resources

USI has made a very large investment in local resources and technical expertise, with more than 10,000 professionals networked nationally to build strong vertical capabilities and integrated account teams. Our local and regional experts ensure accountancy availability, hands-on service, and ongoing diligent follow-through so we can deliver on the solutions we customize for our clients.

Enterprise – USI's Team Based Strategic Planning

USI's enterprise planning is a disciplined, focused, analysis centered on our client's issues and challenges. Highly consultative meetings integrate USI's Omni analytics with our broad resource network to build a risk management strategy aligned with client business needs. Our enterprise process is a proven method for identifying, quantifying and minimizing client risk exposures.

The USI ONE Advantage—our Omni knowledge engine, with our Network of local and national resources, delivered to our clients through our Enterprise planning process gives USI fundamentally different solutions, the resources to deliver, and a process to bring superior results to our clients.

Client Summary

Client Name:	City of Laredo, The Detoxification Department dba ROOTS Recovery Center
Mailing Address:	1102 Bob Bullock Loop Laredo, TX 78043
Physical Address:	1300 Chicago Street, Ste. 101 Laredo, TX 78041

Proposed Coverage Summary

Coverage	Description
GL and Prof Liability - Medical	Medical Professional/General Liability $1M/$3M
GL and Professional	$2M xs $1M
GL and Professional	$2M xs $3M
GL and Professional	$5M xs $5M
Business Auto Liability	Hired/Non-Owned Auto $1M CSL BI & PD
Excess Auto Liability	$1M xs $1M
Excess Auto Liability	$1M xs $2M

Service Team Contact

Producer:	Bob Bookhammer | (972) 737.6210 | bob.bookhammer@usi.com Kyle Schaller I (503) 710.5689 I kyle.schaller@usi.com
Account Executive:	Candice Hawley | (214) 443-3515 | candice.hawley@usi.com

Premium Summary

Coverage	Term	Carrier	Expiring Term Premium	Proposed Term Premium
*GL and Prof Liability - Medical	8/5/2026 8/5/2027	Ironshore Specialty Ins. Co	$79,191.95	$86,272.03
GL and Professional – $2M xs $1M	8/5/2026 8/5/2027	Bridgeway Insurance Co	$54,805.03	$57,951.73
GL and Professional - $2M xs $3M	8/5/2026 8/5/2027	Lloyds of London	$29,643.00	$31,467.00
GL and Professional - $5M xs $5M	8/5/2026 8/5/2027	Landmark American Ins. Co	$38,862.00	$39,910.65
Business Hired/Non-Owned Auto Liability	8/5/2026 8/5/2027	Underwriters at Lloyd's of London	$6,136.07	$6,398.29
Excess Auto Liability – $1M xs $1M	8/5/2026 8/5/2027	Underwriters at Lloyd's of London	$6,136.07	$6,398.29
Excess Auto Liability – $1M xs $2M	8/5/2026 8/5/2027	General Star Indemnity	$8,391.20	$8,391.20

*Ironshore is offering an option for a $50,000 deductible inclusive of both indemnity & expenses for $75,783.03 proposed premium

Binding Subjectivities:

Auto and Excess- Updated Drivers List, Updated HNOA Supplemental application, signed and dated accord application, confirmation of background and MVR checks, confirmation of no owned autos, subject to a signed warranty endorsement.

General Liability and Professional: Completed application, confirmation of revenue via financial statement/business plan, signed/dated insurance letter of acceptance

GL/Prof Excess: Signed terrorism form, signed/dated application, facility license, audited financials

Agency Bill: A payment procedure in which USI Insurance Services LLC sends an invoice and payment is remitted directly to USI Insurance Services LLC. ***If your policy is indicated to be agency bill you will receive an invoice or Notification of Premium Due document from USI, and payment can be remitted electronically.***

- Visit the ePayPolicy portal located at https://usi.epaypolicy.com/. Payment can be remitted using ACH Debit or credit card.
- Enter your Client Code – CITYLAR and Zip Code – 78043
- ACH drafts are free! A Credit Card Processing fee applies to all Credit Card Transactions.
- You will receive an e-receipt when payment has been made. Please email a copy of the receipt to candice.hawley@usi.com , bob.bookhammer@usi.com , kyle.schaller@usi.com

Terrorism Option: Due to the Terrorism Risk Insurance Act of 2002, you now have the right to purchase coverage for losses arising out of the Acts of Terrorism, as defined in Section 102 (1) of the act. Under Federal Law you may purchase this terrorism coverage for an additional premium as indicated in the attached carrier quote(s). We will require written confirmation at the time of binding if you elect or reject this coverage.

Carrier Quotes

The following pages contain the quotes that were received from General Star Indemnity Company, Underwriters at Lloyd's London, Bridgeway Insurance Company, Ironshore Specialty Insurance Co and Landmark American Insurance Company. These quotes are based on the information you provided and are an estimate only. Actual coverage and premium may vary based on the insurance company's underwriting guidelines and policy terms.

We have reviewed these quotes and recommend that you review them as well and advise of any changes. This is a coverage summary, not a legal contract. **If coverage is bound the actual policies specific terms, conditions, limitations and exclusions will govern in the event of a loss.** Specimen copies of all policies are available for review prior to the binding of coverage. Higher limits and additional coverage may be available. Let us know if you are interested in additional quotes.

General Liability and Professional Liability

Policy Information	
Insured Name	City of Laredo, the Detoxification Department dba ROOTS Recovery Center
Insured Address	1300 Chicago Street Suite 101 Laredo, TX 78041
Proposal for	Miscellaneous Facility Healthcare Professional Liability - Primary
Insurer	**Ironshore Specialty Insurance Company** A non-admitted carrier with an A.M. Best rating of A (Excellent) Class XV
Policy Term	August 01, 2026, 12:01 AM - August 01, 2027, 12:01 AM
Policy Form	MMF.001 (5.13 ed) Miscellaneous Medical Facilities And Providers Professional And Other Liability Policy

Defense Treatment	
Defense Expenses are	☐ Within the Limit of Liability ☒ In Addition to the Limit of Liability
A) Professional Liability Coverage	
Per Claim Limit	$1,000,000
Aggregate Limit	$3,000,000
Per Claim Deductible	$25,000
Aggregate Deductible	$0
Retroactive Date	August 01, 2023
B) General Liability Coverage	
Per Claim Limit	$1,000,000
Aggregate Limit	$3,000,000
Products/Completed Ops Limit	☒
Personal Injury and Advertising Injury Limit	☒
Fire Damage Each Claim	$50,000
Fire Damage Aggregate	$50,000
HIPAA Violation Each Claim	$50,000
HIPAA Violation Aggregate	$50,000
Per Claim Deductible	$25,000

Aggregate Deductible	$0
E) Evacuation Expense Reimbursement	
Per Claim Limit	$25,000
Aggregate Limit	$25,000
Per Claim Deductible	$5,000
Aggregate Deductible	$0
Retroactive Date	August 03, 2024
F) Public Relations Expense Reimbursement	
Per Claim Limit	$25,000
Aggregate Limit	$25,000
Per Claim Deductible	$5,000
Aggregate Deductible	$0
Retroactive Date	August 03, 2024

Premium	
Premium	Professional Liability Premium: $75,630.00 General Liability Premium: $6,370.00 Terrorism Coverage (TRIA): $0.00 Total Amount Due: $82,000.00 • Does not include surplus lines taxes and fees which are the responsibility of the surplus lines broker. • Premium is due and payable upon receipt of invoice. Failure to pay the premium in full may result in voidance of coverage. *(This proposal may vary from your original request for coverage. Please review the proposal carefully for any variances. The terms, conditions and premiums included in this proposal contemplate the sale or renewal of all the quoted insurance lines. Electing to buy or renew only some of the lines of coverage may result in changes to the terms, conditions, and premiums of the remaining insurance lines.)*

Minimum Earned (35%)	$28,700.00

Name of Insurance Co:	Ironshore Specialty Insurance Company
Coverage:	Healthcare Facilities
Limits of Liability:	
Retention:	
Effective Date:	8/1/2026
Retroactive Date:	8/1/2023
Prior & Pending:	

Premium:	$82,000.00
Filing Fee	$250.00
Surplus Lines Tax	$3,989.13
Stamping Office Fee	$32.90
Total Premium	$86,272.03

Endorsements

Endorsements
1. ADM-OFAC-0419 - Sanction Limitation and Exclusion Clause
2. MMF.P.006 (06.12 ed) Medical Payments Coverage - $5K/$25K
3. MMF.P.016 (10.10 Ed.) Delete Specified Insuring Agreement(s) - C, D, G
4. MMF.END.054 (7.23 ed.) Sublimit for Sexual Misconduct Claims - • $500,000 / $500,000
5. MMF.END.093 (5.15 ed.) Minimum Earned Premium - 35%
6. MMF.END.163 (12.18 ed.) Deductible Applies to Loss and Defense Expenses
7. MMF.END.221 (6.21 ed.) Pandemic Epidemic Scheduled Infectious Disease Exclusion
8. MMF.END.308 (7.24 ed.) Amend ERP Terms Endorsement (Provided at Time of Request)

9. MMF.END.277 (3.26 ed.) Patient-Resident Bodily Injury Covered Under the Professional Liability Insuring Agreement
10. MMF.END.295 (4.24 ed.) Data and Privacy (Cyber) Exclusion (CM and OCC)
11. Service of Suit Clause - Texas - SC-9 (11_18)
12. TRIA-E002-0315 Cap on Losses From Certified Acts of Terrorism
13. TRIA-N004-0420 Disclosure - Terrorism Risk Insurance Act

General & Professional Liability – Lead $2M XS $1M

First Named Insured	Insurer
City of Laredo Roots Recovery Center 1300 Chicago St Ste 101 Laredo, TX 78041 Hereinafter referred to as the "Insured"	Bridgeway Insurance Company 555 College Road East Princeton, NJ 08543-5241 Hereinafter referred to as the "Insurer"

Policy Term	
Effective Date: 08/01/2026 Expiration Date: 08/01/2027	Both dates 12:01 A.M. at the address of the Insured

Policy Number(s)	
Umbrella Policy Number:	To be determined at time of binding

Umbrella Policy Coverage(s)
USD 2,000,000 **Combined Aggregate Limit** USD 2,000,000 **Healthcare Professional Liability Aggregate Limit** USD 2,000,000 **Umbrella Liability Aggregate Limit** USD 2,000,000 **Specific Loss Limit** USD 50,000 **Retained Amount** **Healthcare Professional Liability Coverage Type** is Claims Made **Retroactive Date** 08/01/2023 **Umbrella Liability Coverage Type** is Occurrence **Retroactive Date** NA **Defense Costs** Reduce the Limit of Liability Excess the **Underlying Schedule**

Underlying Schedule		
Line of Business	**Coverage Limits**	**Insurer**
Professional Liability	USD 1,000,000 Each Claim USD 3,000,000 Aggregate Defense Costs In addition to the Limit of Liability Coverage Type is Claims Made Retroactive Date 08/01/2023	Ironshore
General Liability	USD 1,000,000 Each Occurrence USD 3,000,000 Products Aggregate USD 3,000,000 General Aggregate	Ironshore
	Defense Costs In addition to the Limit of Liability Coverage Type is Occurrence Retroactive Date NA	

Name of Insurance Co:	Bridgeway Insurance Company
Coverage:	Umbrella Liability - Commercial
Limits of Liability:	$2,000,000 Aggregate
Retention:	
Effective Date:	8/1/2026
Retroactive Date:	
Prior & Pending:	

Premium:	$55,000.00
Filing Fee	$250.00
Surplus Lines Tax	$2,679.63
Stamping Office Fee	$22.10
Total Premium	$57,951.73

Endorsements

Umbrella Policy Forms	
HCU ES DS 00 01 12 24	Declarations
HCU ES 00 01 04 22	Healthcare Umbrella Liability Insurance Policy
HCU ES 21 02 02 21	Cap on Losses Terrorism
HCU ES 21 03 02 21	Exclusion of Certified Acts of Terrorism
HCU ES 04 12 02 21	Communicable Disease Exclusion
SLSOP 01 21	Service of Process BIC
VL ES 21 01	Violation of Economic Or Trade Sanctions
VL CW 01 01 21	Signature Endorsement
HCU ES 04 19 09 24	Punitive Damages Exclusion

General & Professional Liability – $2M xs $3M Buffer

Named Insured:	City of Laredo Detox	
Address:	5512 Thomas Ave. Laredo, TX 78041	
Policy Period:	8/1/2026 to 8/1/2027	
Retroactive Date:	8/1/2023	
Issuing Company:	Underwritten by Certain Underwriters at Lloyd's (non-admitted)	
Coverage:	Healthcare Excess Follow Form Liability Insurance	
Limits of Insurance:	$3,000,000	Per Claim
	$3,000,000	Annual Aggregate
Retained Limit:	$10,000	
Policy Premium:	$29,750	excluding any applicable taxes
		25.00% Minimum Earned
Policy Issuance Fee:	Not Applicable	

Followed Policy:

INSURER	POLICY NUMBER	LIMITS	POLICY PERIOD
MunichRe Specialty Insurance	TBD	$2,000,000 Per Claim $2,000,000 Aggregate	8/1/2025 to 8/1/2026

Total Underlying Limits:	$3,000,000	Per Claim
	$3,000,000	Annual Aggregate

Schedule of Underlying

INSURER	POLICY NUMBER	LIMITS	POLICY PERIOD
MunichRe Specialty Insurance	TBD	$2,000,000 Per Claim $2,000,000 Aggregate	8/1/2025 to 8/1/2026
Ironshore Specialty Insurance	TBD	$1,000,000 Per Claim $3,000,000 Aggregate	8/1/2025 to 8/1/2026

Name of Insurance Co:	Underwriters at Lloyds
Coverage:	Healthcare Facilities
Limits of Liability:	$3,000,000 Per Claim
$3,000,000	Aggregate
Retention:	
Effective Date:	8/1/2026
Retroactive Date:	8/1/2023
Prior & Pending:	

Premium:	$29,750.00
Filing Fee	$250.00
Surplus Lines Tax	$1,455.00
Stamping Office Fee	$12.00
Total Premium	$31,467.00

Endorsements

RMCOV (1.2025) - Propraxis Cover Page and Claim Advisory Notice
EFF 1111 030 (8.2022) - Texas Complaints Notice
EFF 1111 001 (9.2023) - Declarations Page - CW
EFF 1111 029 (8.2022) - Texas Surplus Lines Notice
EFF 1111 002 (5.2014) - Policy
EFF 1111 003 (8.2022) - Absolute Exclusion of Terrorism
EFF 1111 006 (5.2014) - Defense Inside Limit
EFF 1111 014 (5.2014) - Punitive Damages Exclusion
EFF 1111 015 (5.2014) - Retained Limit Endorsement
EFF 1111 016 (5.2014) - Schedule of Underlying
EFF 1111 021 (8.2022) - NMA Mandatory Endorsements
EFF 1111 025 (5.2020) - Communicable Disease Exclusion
EFF 1111 026 (7.2020) - Minimum Earned Premium Endorsement
EFF 1111 027 (1.2021) - Marijuana and Cannabis Exclusion
EFF 1111 028 (7.2021) - Correctional Services Exclusion
EFF 1111 032 (1.2025) - Absolute Abuse Exclusion
LMA5595a (10.2023) - PFAS Exclusion
EFF 1111 024 (11.2025) - Statement of Security

General & Professional Liability – $5M xs $5M Excess

RE: Professional Liability Quote (Excess - Medical Professional and General Liability)

Submission Number:	759575
Renewal of:	LHZ868955
Company:	Landmark American Insurance Company (A.M. Best rating: A++ XV and S&P rating: AA+)
Insured:	**CITY OF LAREDO, THE DETOXIFICATION DEPARTMENT DBA ROOTS RECOVERY CENTER LAREDO, TX**
Coverage:	Professional and General Liability
Policy Dates:	August 01, 2026 - August 01, 2027
Form:	RSG 51036 0725 Excess Professional Liability Coverage Form Claims Made and Reported Basis - Follow Form
Retroactive Date:	August 01, 2023
Each Claim Limit:	$5,000,000
Aggregate Limit:	$5,000,000
In Excess of Each Claim:	$6,000,000
In Excess of Aggregate:	$8,000,000

Name of Insurance Co:	Landmark American Ins. Co.
Coverage:	Healthcare Facilities
Limits of Liability:	$5,000,000 Each Claim
$5,000,000	Aggregate
Retention:	
Effective Date:	8/1/2026
Retroactive Date:	8/1/2023
Prior & Pending:	

Premium:	$37,800.00
Filing Fee	$250.00
Surplus Lines Tax	$1,845.43
Stamping Office Fee	$15.22
Total Premium	$39,910.65

Endorsements

- RSG 56214 0224 Biometric or Genetic Information Exclusion
- RSG 56216 0822 Cryptocurrency Exclusion
- RSG 56027 0725 Employment Practices Liability Exclusion
- RSG 56203 0321 Exclusion - Correctional Medicine
- RSG 54176 1125 Insuring Agreement Amendatory-Underlying Claims-Made & Occurrence Coverage
- RSG 54025 0405 Minimum Retained Premium
- RSG 56058 0903 Nuclear Energy Liability Exclusion
- RSG 56282 0326 Opioid and Controlled Substance Exclusion (Substance Abuse Rehabilitation) - **updated to provide clearer intent**
- RSG 56278 0725 Prior and Pending Litigation Exclusion (Excess)
- RSG 92008 0322 Texas - Service Of Suit (Landmark)

- RSG 99014 0823 Texas Important Notice
- RSG 99031 0409 Texas Surplus Lines Disclosure Notice
- RSG 56121 1222 Violation of Consumer Protection Laws Exclusion

Hired and Non-Owned Liability

INSURED:	City of Laredo, the Detoxification Department dba ROOTS Recovery Center 1300 Chicago Street Laredo, TX **78041**
INSURER:	Underwriters at Lloyd's of London (Non-Admitted)
COVERAGE:	Hired & Non-Owned Auto Liability
POLICY FORM:	Business Auto Coverage Form Liab Only Symbol 8 & 9
POLICY PERIOD:	8/1/2026 to 8/1/2027
LIMITS OF LIABILITY:	$1,000,000 CSL Per Accident Defense Costs and Expenses are in addition to the limits shown above.
DEDUCTIBLE:	$5,000 Per accident Defense Costs and Expenses erode the Deductible shown above.
PREMIUM:	$5,250.00
FEES: RT Dallas HNOA Program	 $350.00
TAXES:	
	TOTAL TAXES: SURPLUS LINES TAXES, STAMPING FEES, SURCHARGES AND ASSESSMENTS WILL BE CALCULATED, COLLECTED, REPORTED, AND PAID BY THE PRODUCING AGENT/BROKER IN THE INSURED'S HOME STATE. FEES CHARGED BY THE PRODUCING AGENT/BROKER SHALL BE SEPARATELY ITEMIZED AND DISCLOSED IN CONFORMANCE WITH APPLICABLE LAW.
TOTAL:	$5,600.00
TRIA/TERRORISM: TERMS	NOT APPLICABLE

Endorsements

NMA 2868 SLC-3 (USA) Lloyd's Certificate (Jacket) - Amended
JCRS DEC 08 18 Business Auto Declarations
SCHED A 08 18 Schedule A
JCRS 000 08 25 Security Details
LSW 1001 12 23 Several Liability Notice Insurance
IL 00 17 11 98 Common Policy Conditions
LMA 9080 11 20 Texas Complaints Notice
LMA 3200 10 25 Sanctions Suspension Clause
LMA5476A (Amended) Absolute Cyber and Data Exclusion
NMA 2918 10 01 War and Terrorism Exclusion Endorsement
NMA 1256 03 60 Nuclear Incident Exclusion Clause - Liability - Direct (Broad)
NMA 1998 04 86 Service of Suit Clause (U.S.A.)
CA 00 01 10 13Business Auto Coverage Form
CA 03 01 10 13Deductible Liability Coverage
CA 20 18 10 13Professional Services Not Covered
CA 23 44 11 16Public or Livery Passenger Conveyance Exclusion
CA 23 84 10 13Exclusion of Terrorism
CA 23 94 10 13Silica or Silica-Related Dust Excl for Covered Auto Exposure
JCRS 0012 0818 Auto Physical Damage Exclusion Amendment
JCRS 0017 0120 Sexual Abuse or Molestation Exclusion
JCRS 0018 0120 Assault and Battery Exclusion
JCRS 0022 0120 Hazardous Materials Exclusion
JCRS 0030 0120 Exclusion - Loading and Unloading of Passengers
JCRS 0038 0921 Warranty of Records, Record Keeping and Drivers Requirements
JCRS 0044 0921 Controlled Substances Exclusion
JCRS 0047 0424 Volunteer Worker Exclusion
JCRS 0051 0625 Passenger Transportation Exclusion
LMA 5396 0420 Communicable Disease Exclusion
LSW 549 Cancellation Cancellation - Minimum Earned Premium Endorsement
CL 370 10 03 Inst Radioactive et. al. Exclusion
CA 02 43 11 13Texas Changes - Cancellation and Nonrenewal

Hired and Non-Owned Auto – Lead Excess

INSURED:	City of Laredo, the Detoxification Department dba ROOTS Recovery Center 1300 Chicago Street Laredo, TX **78041**
INSURER:	Underwriters at Lloyd's of London (Non-Admitted)
COVERAGE:	Excess Liability
POLICY FORM:	Follow Form
POLICY PERIOD:	8/1/2026 to 8/1/2027
LIMITS OF LIABILITY:	$1,000,000 Each Occurrence
	Defense Costs and Expenses are in addition to the limits shown above.
	EXCESS OF:
	Hired & Non-Owned Auto
	$1,000,000 Each Accident
	Carrier: Lloyd's of London

PREMIUM:	$5,250.00
FEES:	
RT Dallas HNOA Program	$350.00
TAXES:	
	TOTAL TAXES: SURPLUS LINES TAXES, STAMPING FEES, SURCHARGES AND ASSESSMENTS WILL BE CALCULATED, COLLECTED, REPORTED, AND PAID BY THE PRODUCING AGENT/BROKER IN THE INSURED'S HOME STATE. FEES CHARGED BY THE PRODUCING AGENT/BROKER SHALL BE SEPARATELY ITEMIZED AND DISCLOSED IN CONFORMANCE WITH APPLICABLE LAW.
TOTAL:	$5,600.00

Endorsements

NMA 2868 SLC-3 (USA) Lloyd's Certificate (Jacket) - Amended
JCRSDECEX 0319 Declarations
SCHED A 02 19 Schedule A
LSW 1001 12 23 Several Liability Notice Insurance
XLI CL 01 08 London Short Excess Form 01-08 OCC
JCRSXS005 0319 Schedule of Underlying Insurance
JCRSXS000 0122 Security Details
CL 370 10 03 Inst Radioactive et. al. Exclusion
JCRSXS010 1019 Cyber Loss Absolute Exclusion Clause
JCRSXS020 0120 Professional Liability Exclusion
LMA 3200 10 25 Sanctions Suspension Clause
LMA 5396 0420 Communicable Disease Exclusion
LMA5476A (Amended) Absolute Cyber and Data Exclusion
NMA 1256 03 60 Nuclear Incident Exclusion Clause - Liability
NMA 1477 02 64 Radioactive Contamination Exclusion Clause
NMA 1998 04 86 Service of Suit Clause - USA
NMA 2918 08 01 War and Terrorism Exclusion Clause
LSW 549 Cancellation Cancellation - Minimum Earned Premium Endorsement

Hired and Non-Owned Auto – Second Layer Excess

Named Insured	Submission ID	Quote Date
CITY OF LAREDO TEXAS DBA: ROOTS RECOVERY CENTER	3267213	30-Jun-2026

General Star Indemnity Company

Form	Coverage Trigger	Policy Term
Excess Auto Liability Policy	Occurrence	Annual 08/01/2026 - 08/01/2027

Quote Options Offered

Limits Offered	Risk Premium	UM/UIM Premium	TRIA Premium	Total Premium
$1,000,000 in excess of underlying	$7,500	Not Applicable	Not Applicable	$7,500

25% Minimum Premium Earned at Inception

Subjectivities

- SUBJECT TO (PRIOR TO BINDING): 21-24 HNOA LOSS RUNS
- SUBJECT TO (PRIOR TO BINDING): UPDATED DRIVERS LIST
- SUBJECT TO (PRIOR TO BINDING): UPDATED HNOA SUPPLEMENTAL

Forms and Endorsements

PLEASE NOTE: The following are additional Endorsements attached to this policy. We will also attach any required STATE MANDATORY Endorsements.

Schedule of Underlying Coverage

Hired & Non-owned Liability Carrier: Lloyds CSL: $1,000,000	Controlling Underlying Policy Lead Excess Carrier: Lloyds Limit: $1,000,000

UM / UIM Coverage

The insured warrants that it has no vehicles garaged or registered in FL, LA, NH, VT, or WV

Endorsements

Policy Specimen	Excess Auto Liability Policy
EX013A 10 05	CARE, CUSTODY OR CONTROL EXCLUSION
EX018 06 99	CROSS SUITS EXCLUSION
EX1152 06 21	LIMITATION OF COVERAGE TO DESIGNATED OPERATOR(S) Desc and/or Name(s) of individual(s): • Viviana Martinez • Lindsay Vazquez-Torres • Jessica Contreras.
EX1157 12 21	TOTAL PFAS EXCLUSION
EX1159 06 22	EXCLUSION - CYBER PRIVACY EVENT, CYBER SECURITY EVENT, DATA-RELATED LIABILITY, AND INTERRUPTION OR FAILURE
EX1169 04 23	EXCLUSION - RECORDING AND DISTRIBUTION OF MATERIAL OR INFORMATION IN VIOLATION OF LAW
EX137 01 06	EXCLUSION - TERRORISM (COMMERCIAL AUTO ONLY)
EX621 02 20	COMMUNICABLE DISEASE EXCLUSION
EX651 06 99	OWNED AUTO EXCLUSION
EX683 02 20	SEXUAL MISCONDUCT EXCLUSION
EX857 06 99	POLLUTION EXCLUSION TOTAL
EX887 06 99	ASBESTOS EXCLUSION TOTAL
EX907 08 03	SILICA EXCLUSION
IC 24 0002 01 25	SERVICE OF SUIT (NON-ADMITTED POLICIES ONLY)
IL 11 0001 07 22	ADDITIONAL POLICY CONDITIONS OFAC
IL 24 0005 01 25	EXCLUSION - HUMAN TRAFFICKING
ILP001 01 04	U.S. TREASURY DEPARTMENTS OFFICE OF FOREIGN ASSETS CONTROL (OFAC)

Agency Bill Payment Options and Procedures

We appreciate the opportunity to service your insurance needs. We believe good credit relationships are established by making our clients aware in advance of the terms of our payment procedures.

Our basic payment plan is that all payments are due on or before the effective date of coverage. The following Agency Bill payment methods are available.

- Check prior to effective date
- Online payment through ePayPolicy prior to effective date
- Insurance Company payment plan, if available

Additional premium invoices during the policy term are payable upon receipt. (Additional premiums may be premium financed under certain circumstances, please contact your insurance representative to determine eligibility).

You will receive a monthly statement of your account. Client statements are processed and mailed on the 15th of each month. Policies with payments past due are subject to cancellation for non-payment of premium. This is a serious situation as your insurer may refuse to reinstate coverage even if payment is made after cancellation.

Accounts are subject, but not limited to, reasonable attorney fees, interest, collection fees and/or court costs incurred in connection with collection of past due balances.

Payments: To ensure accurate application of all premiums, return the remittance copy of the invoice with your payment or use ePayPolicy to electronically send your payment. If we cannot identify the applicable invoice being paid, payments will be left unapplied or applied to your oldest balance.

Credits: After USI receives the return premium from the carrier(s), the funds can be applied to your account or returned to you. If your account is premium financed and the contract has not been paid in full, the funds will be returned to the Premium Finance Company. Receipt of funds from the carrier(s) can take up to 90 days.

These payment procedures will apply for all policy renewals or future business written.

If you have any questions concerning our payment procedures or any other matters pertaining to account payments, please feel free to contact our Regional Accounts Receivable Staff Accountant at 855-874-0004.

USI Disclosures

Surplus Lines DISCLOSURE: Insurance is issued pursuant to the Surplus Lines Laws. Persons insured by Surplus Lines Carriers do not have the protection of the Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent unlicensed insurer. Surplus Lines policies that are subject to audit provide for additional premium charges, but may not allow for return premium.

Information Concerning Our Fees: As a licensed insurance producer, USI is authorized to confer with or advise our clients and prospective clients concerning substantive benefits, terms or conditions of insurance contracts, to sell insurance and to obtain insurance coverages for our clients. Our compensation for placement of insurance coverage, unless otherwise specifically negotiated and agreed to with our client, is customarily based on commission calculated as a percentage of the premium collected by the insurer and is paid to us by the insurer. We may also receive from insurers and insurance intermediaries (which may include USI affiliated companies) additional compensation (monetary and non-monetary) based in whole or in part on the insurance contract we sell, which is contingent on volume of business and/or profitability of insurance contracts we supply to them and/or other factors pursuant to agreements we may have with them relating to all or part of the business we place with those insurers or through those intermediaries. Some of these agreements with insurers and/or intermediaries include financial incentives for USI to grow its business or otherwise strengthen the distribution relationship with the insurer or intermediary. Such agreements may be in effect with one or more of the insurers with whom your insurance is placed, or with the insurance intermediary we use to place your insurance. You may obtain information about the nature and source of such compensation expected to be received by us, and, if applicable, compensation expected to be received on any alternative quotes pertinent to your placement upon your request.

Document Delivery DISCLOSURE: USI strives to make your interactions with us easy and efficient. Therefore, we intend to deliver your policy and all policy-related documents electronically through our InsurLink client portal or through email. If you do not wish to receive these documents electronically or if you would like a paper copy of any or all documents at no cost to you, please notify your client service representative in writing. If your email or electronic contact information changes, please notify your client service representative in writing.

Reviewing Client Contracts DISCLOSURE: As a service to our clients, upon their request, USI will review those portions of your contract regarding the insurance and indemnity requirements as they relate to your insurance program and provide comments and/or recommendations based upon such review. This service should not be taken as legal advice and it does not replace the need for review by the insured's own legal counsel.

USI Privacy Notice

Our Privacy Promise to You

USI provides this notice to our customers, so you will know what we do with personal financial and health information (collectively referred to as "protected information") that we may receive from you directly, from your health care provider, or from another source that you have authorized to send us your protected information. We at USI are concerned about your privacy, and we assure you that we will do what is required to safeguard your protected information.

What types of information will we be collecting?

USI collects information required for our business and pursuant to regulatory requirements. Without it, we cannot provide our products and services to you. We will collect protected information about you from:

- Applications or other forms that require name, address, Social Security number, assets and income, employment status, and dependent information.
- Your transactions with us or your transactions with others that include account activity, payment history, and products and services purchased.
- Consumer reporting agencies for credit relationships and credit history. These agencies may retain their reports and share them with others who use their services.
- Other individuals, businesses, and agencies for medical and demographic information.
- Visits to our websites to provide information via on-line forms, site data, and online information collection devices, commonly called "cookies."

What will we do with your protected information?

The information USI gathers is shared within our company to help us maximize the services we provide to our customers. We will only disclose your protected information when it is necessary for us to provide the insurance products and services you expect from us. USI does not sell your protected information to third parties, nor does it sell or share customer lists.

We may also disclose the information described above to third parties that we contract for services. In addition, we may disclose your protected information to medical care institutions or medical professionals, insurance regulatory authorities, law enforcement or other government authorities, or to affiliated or non-affiliated third parties as is reasonably necessary to conduct our business or as otherwise permitted by law.

Our Security Procedures

At USI, we have enacted the highest measures to ensure the security and confidentiality of customer information. We will handle the protected information we receive by restricting access to the protected information to the employees and agents who need to know that information to provide you with our products or services or to otherwise conduct our business, including actuarial or research studies. Our computer database has multiple levels of security to protect against threats or hazards to the integrity of customer records and to protect against unauthorized access to records that may harm or inconvenience our customers. We maintain physical, electronic, and procedural safeguards that comply with federal and state regulations to safeguard your protected information.

Our Legal Use of Information

We retain the right to use ideas, concepts, know-how, or techniques contained in any nonpublic personal information you provide to us for our own purposes, including developing and marketing products and services.

Your Right to Review Your Records

You have the right to review the protected information about you relating to any insurance or annuity product issued by us that we could reasonably locate and retrieve. You may also request that we correct, amend, or delete any inaccurate information by writing to us at 100 Summit Lake Drive, Suite 400, Valhalla, NY 10595.

Important Provisions

PREMIUM IS MINIMUM AND DEPOSIT

The premium quoted is the minimum and deposit premium and is a fully earned premium. The policy is auditable at expiration and there may be charges for additional exposures however, the premium will never fall below the minimum and deposit premium shown above.

POLICY IS SUBJECT TO AUDIT

Premiums are calculated based on the insurance company's rules and rates. Premiums shown as advance or deposit premiums are subject to audit and adjustment at the close of each audit period. If the advance premium is less than the earned premium as determined by the audit, the insured pays the difference. If the advance premium is more than the earned premium as determined by the audit, the insurance company returns the difference to the insured. The insured must keep records of the information needed for the audit and the premium calculations and send copies to the insurance company when it requests them.

Audit based on: Minimum & Deposit Premium:

NOTE:

In evaluating your exposure to loss, we have been dependent upon information provided by you. If there are other areas that need to be evaluated prior to binding of coverage, please bring these areas to our attention. Should any of your exposures change after coverage is bound, such as your beginning new operations, hiring employees in new states, buying additional property, etc., please let us know so proper coverage(s) can be discussed.

Higher limits may be available. Please contact us if you would like a quote for higher limits.

Insurance Carrier Ratings

As a service to our clients, USI is furnishing an assessment by a financial rating service of the insurance companies included in our proposal. We are including the legends used by this service.

All ratings are subject to periodic review, therefore, it is important to obtain updated ratings from each service. Should you desire further information concerning the financial statements of any of the insurance companies being proposed, so that you can make your own assessment of the financial strength of the companies being offered, it is available from USI at your request.

USI has made no attempt to determine independently the financial capacity of the insurance companies that we are including in our proposal as we believe the nationally recognized services are better equipped to comment.

A. M. BEST RATINGS			
A++ and A+	Superior	**B and B-**	Fair
A and A-	Excellent	**C++, C+**	Marginal
B++, B+	Very Good	**C and C-**	Weak
D	Poor	**F**	In Liquidation
E	Under Regulatory Supervision	**S**	Rating Suspended

FINANCIAL SIZE CATEGORY *(In $ Thousands)*				
Category	I	Less than		1,000
Category	II	1,000	to	2,000
Category	III	2,000	to	5,000
Category	IV	5,000	to	10,000
Category	V	10,000	to	25,000
Category	VI	25,000	to	50,000
Category	VII	50,000	to	100,000
Category	VIII	100,000	to	250,000
Category	IX	250,000	to	500,000
Category	X	500,000	to	750,000
Category	XI	750,000	to	1,000,000
Category	XII	1,000,000	to	1,250,000
Category	XIII	1,250,000	to	1,500,000
Category	XIV	1,500,000	to	2,000,000
Category	XV	2,000,000	to	or greater

RATING "NOT ASSIGNED" CLASSIFICATIONS			
NR-1	Insufficient Data	**NR-2**	Insufficient Size and/or Operating Experience
NR-3	Rating Procedure Inapplicable	**NR-4**	Company Request
NR-5	Not Formally Followed		