

#### **REMIT PAYMENT TO:**

Regions Insurance, Inc. Dept 268 P.O. Box 11407 Birmingham, AL 35246-0268

## ----- I N V O I C E -----

Madison County Sheriff's Department

2941 Hwy 51

Canton, MS 39046

 Invoice Date
 02/16/16

 Invoice No.
 397555

 Bill-To Code
 MADIS10

 Client Code
 MADIS10

**Amount Remitted: \$** 

Inv Order No. 3001\*501099

Named Insured: Madison County Sheriff's Department

Please return this portion with your payment.

Make checks payable to: Regions Insurance Inc -Jackson

Effective Date	Policy Period	Coverage Description	Transaction Amount
03/01/16		National Fire Insurance of Hartford Policy No. LEC223321881	
	03/01/17	*Renewal - Professional Liability	116,364.00
		Policy Fee - Professional Liability	4,574.00
		NSA Fees	
		Invoice Number: 397555 Amount Due:	120,938.00
		*Premiums Due and Pavable on Effective Date	

\*Premiums Due and Payable on Effective Date

PJENN Page: 1 ORIGINAL INVOICE



## **INSURANCE PROPOSAL FOR:**

## MADISON COUNTY SHERIFF'S DEPARTMENT

2941 HIGHWAY 51 CANTON, MS 39110



Presented by: Regions Insurance, Inc.

Woods Cavett, Jr.
1020 Highland Colony Pkwy., Suite 302
Ridgeland, MS 39157

Coverage Effective March 1, 2016 - 2017

THIS PROPOSAL IS DESIGNED TO GIVE YOU AN OVERVIEW OF YOUR CURRENT INSURANCE PROGRAM INCLUDING THOSE RECOMMENDATIONS WE FEEL YOU SHOULD CONSIDER. IT IS MEANT AS A GENERAL UNDERSTANDING OF YOUR INSURANCE NEEDS AND SHOULD NOT BE CONSTRUED AS A LEGAL REPRESENTATION OF YOUR INSURANCE PROGRAM. YOUR SPECIFIC INSURANCE CONTRACTS SHOULD BE CONSULTED FOR DETAILS ON COVERAGE, CONDITIONS, AND EXCLUSIONS. SPECIMEN POLICY FORMS ARE AVAILABLE UPON REQUEST.

THIS IS AN INSURANCE PROPOSAL AND IS IN NO WAY TO BE CONSIDERED A BINDER OF ANY OF THE COVERAGES PRESENTED.

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# Madison County Sheriff's Department CONSUMER PRIVACY NOTICE

Regions Insurance, Inc. realizes that our business requires a relationship of trust with our customers. With that in mind, our agency is committed to protecting the privacy of our customers. Our Privacy Policy was developed to protect information we collect in order to provide our product and services and also assure our customers that this information will not be misused.

### Information We Collect

We collect nonpublic personal financial information about you as required by the insurance companies including:

- Information we receive from you on applications or other required questionnaires, such as occupation, current employer and social security and driver's license numbers:
- Information about your transactions with us, our affiliates, or previous insurers; such as your policy coverage, claim information, premiums and payment history;
- Information we receive from a consumer reporting agency such as Equifax or ChoicePoint which is obtained for the purpose of ascertaining credit histories. These reports are obtained as underwriting tools to determine bill payment habits and credit worthiness. These reports are not subject to race, gender or income. Similar reporting agencies may also be used to obtain motor vehicle reports from the State to disclose driving history.

### Information We Disclose

We do not disclose any nonpublic personal financial information about our customers or former customers to anyone, except as permitted by law. If you prefer that we not provide this information, please contact us.

## Information Security

We restrict access to nonpublic personal financial information about you to those employees who need to know that information to provide products or services to you. Employees have also been informed of the importance of maintaining customer privacy and confidentiality. We maintain physical, electronic, and procedural safeguards that comply with federal and state regulations to guard your nonpublic financial information.

Regions Insurance, Inc. reserves the right to amend our Customer Privacy Policy as required or permitted by law.

## LAW ENFORCEMENT LIABILITY

Type: Claims Made

Carrier/Best Rating: National Fire Insurance Co. of Hartford (CNA) / A, X

**Endorsed by the National Sheriff's Association** 

**Policy Forms:** C-129532-A (Ed. 01/02)

C-15516-A (Ed. 03/03) C-15518-A (Ed. 03/03) G-129287-A (Ed. 11/97) G-129291-A (Ed. 11/97) G-129292-A (Ed. 11/97) G-129296-A (Ed. 11/97) G-129300-A (Ed. 11/97) G-144291-A (Ed. 03/03) GSL-16966XX (Ed. 02/10) IL 00 17 (Ed. 11/85)

IL 0282 (Ed. 01/90)

Limits of Liability: \$1,000,000 Each Wrongful Act

\$ 2,000,000 Aggregate

**Retroactive Date:** 11/10/1986 Coverage does not apply to claims that occurred

prior to 11/10/1986 date

**Deductible:** \$ 25,000 Each wrongful act, including Loss Adjustment Expense

Total Premium: \$ 116,364 Including Terrorism

**NSA Fees**: \$ 4,574

**Total Cost**: \$ 120,938

### **Special Conditions:**

- 1. A policy writing minimum premium of \$ 1,000 applies. This minimum premium is fully earned at policy inception.
- 2. The terms of this quote may differ from the expiring policy or those requested on the application or specifications. In addition, coverage provided under the CNA policy may differ from the coverage provided by the current carrier.
- 3. The policy does not provide coverage for liability which the insured has assumed under contract or agreement, other than mutual aid or reciprocal law enforcement contracts. This coverage may be available to the insured upon request.
- 4. In order to bind coverage, we will need the following items:
  - 1. Refer to item #4 on page 2 of the app. Items A, C and G were not marked. Please provide the answers to these.
  - 2. Original, completed, signed and dated C15513A form for Terrorism. Endt C15516A Acts of Terrorism is included in the premium as a result of the 11/26/02 Terrorism Act. The insured has the right to accept or reject this endorsement. If elected to reject this coverage, a premium reduction will be processed.
  - 3. Payment of Net Annual Premium and NSA fees (Checks payable to JWF Specialty Co.)

## **PREMIUM COMPARISON**

<u>2015/2016</u>	<u>2016/2017</u>
\$ 121,843	\$ 120,938

# Madison County Sheriff's Department ZYWAVE TECHNOLOGY

**ZyWave** is an internet provided service offered only through Regions Insurance, Inc. to our customers.

### **How it Can Help your Business**

This service is designed with you in mind, offering the property and casualty content and functionality you need. With this tool you can:

- Access a library of downloadable, industry-related articles. Brochures, employee related newsletters, forms, and reports covering a variety of insurance-related topics – all designed to support your key safety messages and programs;
- > Share resources and information with thousands of industry peers;
- Access a complete OSHA Log reporting and analysis system;
- > Automatically process online service requests to our agency;
- Receive, download, and collaborate on documents with our agency; and
- > Access hundreds of insurance, safety, and wellness Web sites, all from the convenience of your MyWaveRM home page.

### MyWave OSHA

MyWave OSHA is available through your personalized ZyWave site, giving you the ability to perform the following:

- ✓ Electronically enter and record OSHA recordable incidents, regardless of whether you file a workers compensation claim
- ✓ OSHA forms 300, 301, 300A and 200 forms are all available
- ✓ Data is entered and saved, and you have an electronic, editable storage of OSHA compliance information

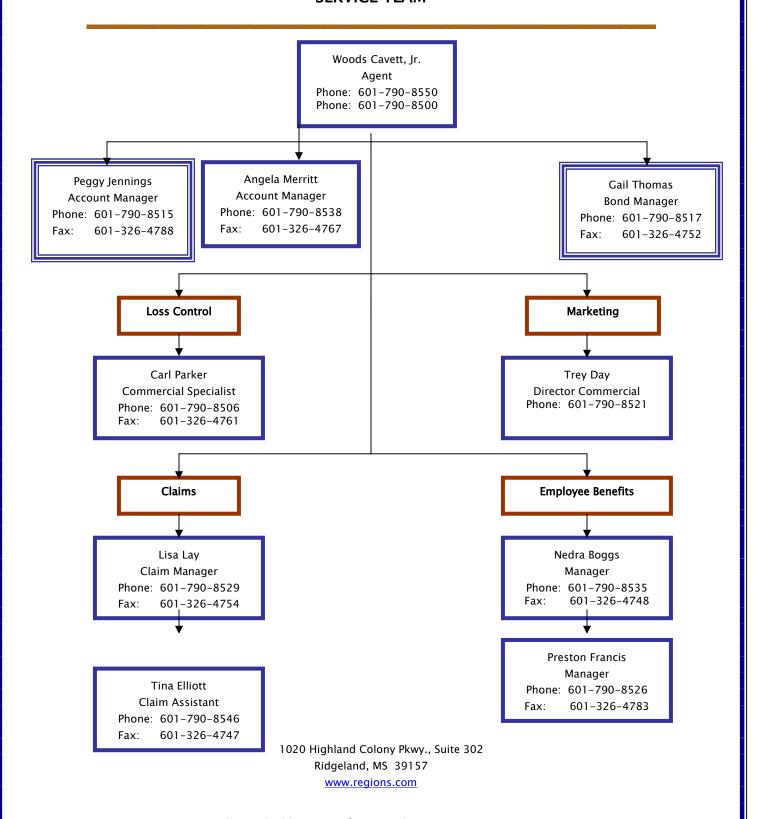
### SERVICE COMMITMENT

- ✓ Regions Insurance, Inc. takes pride in our relationship and commitment to our insurance carriers and to you. We have developed, through many years of experience, a relationship with our carriers to provide you with the best and most cost effective insurance programs.
- ✓ We guarantee the best service available and will provide you with the following:
  - o Provide premium breakdown by entity or location
  - o Return phone calls within the same business day
  - Issue certificates of insurance within one business day
  - Review Hold Harmless Agreements and certificate requirements from Sub-Contractors
  - o Issue all change requests within one business day
  - Provide Automobile Identification Cards for all vehicles at inception and as acquired during the year
- ✓ Claim help, if needed
- ✓ Claim reports will be provided when requested.
- Carl Parker, Regions Loss Control Representative, will visit sites to help identify exposures and present recommendations for your review.
- ✓ In addition, we will tailor a specific service program to meet your needs, which will include:
  - Three month checkup to
    - Deliver policies (if received)
    - Review policy detail
    - Provide Summary of Insurance
    - Review declined coverages
  - ♣ Six month service review to go over
    - Changes in operations
    - Changes in policy detail
    - Loss history/reserve review
    - Loss control recommendations
    - Our performance with you

- ♣ Eight Month marketing review to discuss
  - Current state of the marketplace
  - Markets to be approached for your renewal
  - Changes in operations
  - Classification changes
  - Payrolls
  - Revenues
  - Locations
  - Vehicles/Drivers
  - Limits of Liability
  - Outstanding claims activity
  - Property values
  - Certificate holders
  - Optional coverages available
  - Our performance with you

Note: Safety meetings will be held upon your request by Insurance Company Personnel and/or Carl Parker.

# Madison County Sheriff's Department SERVICE TEAM



\*\* All E-Mail addresses are first name.last <u>name@regions.com</u>\*\*
<u>Woods.cavett@regions.com</u>

### Your loss report form should be sent to:

Call 601-790-8529 for Lisa Lay or 601-790-8546 for Tina Elliott

Fax to 1-601-326-4754 (Lisa) or 601-326-4747 (Tina)

#### When you file a claim, include this information:

- » Policy number or insured name
- » Location of loss (city, state, county)
- » Name of others involved, if applicable
- » Description of injuries
- » If you're reporting an auto accident claim, include vehicle make, model, year, and VIN

### A claim representative will contact you after you report your claim.

Regions also has its own Claims Department to ensure that your claims are handled properly. Our Claims Department maintains close follow-up in order to reduce undue delay of settlement and to be of assistance should any concerns arise.

Should you have any concerns regarding your claim please contact Lisa Lay or Tina Elliott, in our claims department, immediately at 800-844-6700.



ALL LAWSUITS SHOULD BE SENT OR FAXED TO REGIONS IMMEDIATELY!

## **BEST RATINGS EXPLANATION**

Best's Insurance Reports is published annually by A.M. Best Company, Inc. This report presents the financial position, history and transactions of insurance companies operating in the United States and Canada.

## **Rating Levels and Categories**

Secure	Vulnerable	
A++, A+ (Superior)	<b>B, B</b> – (Fair)	
<b>A, A-</b> (Excellent)	C++, C+ (Marginal)	
B++, B+(Very Good)	C, C- (Weak)	
	D (Poor)	
	<b>E</b> (Under Regulatory Supervision)	
	F (In Liquidation)	
	<b>S</b> (Rating Suspended)	

## **Financial Size Categories**

FSC	Adjusted Policyholders Surplus	FSC	Adjusted Policyholders Surplus
I	Less than 1	IX	250 to 500
II	1 to 2	X	500 to 750
	2 to 5	XI	750 to 1,000
IV	5 to 10	XII	1,000 to 1,250
V	10 to 25	XIII	1,250 to 1,500
VI	25 to 50	XIV	1,500 to 2,000
VII	50 to 100	XV	Greater than 2,000
VIII	100 to 250		

Note: Ranges are in millions of U.S. dollars

# IMPORTANT NOTICE REGARDING INDEPENDENT AGENT AND BROKER COMPENSATION

Regions Insurance, Inc. normally receives a commission from the carrier(s) with whom we are placing your insurance coverage. This commission is set by the carrier. Regions may also receive additional "contingent" compensation from certain carriers. This additional compensation is based on all the business we place with that carrier and depends on various factors including the amount and profitability of that business.

Choosing a carrier for a particular customer is based on a number of considerations. Regions is committed to placing your business with the carrier that is best for you regardless of the amount paid to Regions by that carrier.

### **COVERAGES FOR CONSIDERATION**

The coverage presented in this proposal is as per your request. We recommend that you review all premium basis which includes vehicles, payrolls, sales, values, limits, and etcetera to be sure they are adequate and up-to-date.

It is extremely important that your "named insured" is listed exactly as your legal name and includes any names you operate under.

Please note that in most instances coverage can be increased and higher limits are available.

The following are some examples of additional coverage that can be quoted and/or provided:

- Fiduciary Liability This insurance is written for individuals appointed to handle the affairs of others. It guarantees that individuals will faithfully perform their duties while acting within their appointed capacities
- ♣ Directors and Officers Liability This insurance is used to insure against claims arising from the negligent acts, errors, or omissions alleged to have been committed by present or former directors or officers of your corporation.
- **↓** *Employment Practices Liability* This insurance is used to protect against lawsuits by employees alleging wrongful termination, discrimination, harassment or other specified employment related exposures
- **Foreign Liability and/or Products** Standard insurance contracts are not designed to protect against all the insurance exposures that can be associated with operations conducted in foreign countries.
- **♣ Pollution Liability** This coverage is used to insure against claims arising from pollution related occurrences as defined in the form.
- ♣ Aviation This policy is used to provide direct and/or incidental protection to aircraft, either owned or used on a non-owned basis. The form contains several insuring agreements. Hull insurance will include "In Flight" (also called "In Motion" or "Not in Motion") agreements detailing coverage descriptions. Liability coverage is similar to that offered for automobiles, except that passengers can be included or excluded. If coverage is written for passengers, it can be handled as a legal liability coverage or on an admitted or "guest" liability basis in which the amount chosen is paid regardless of fault.
- Kidnap and Ransom This insurance is used to protect against loss of money, securities, or other property that results from actual, alleged, or threatened kidnapping or extortion as defined in the policy.

- ♣ Product Recall This insurance is used to provide coverage for reimbursement for specified expenses you incur that result from a covered product withdrawal loss as outlined in the form. Standard policies normally exclude coverage for claims of this nature.
- **Employee Benefits Liability** This coverage is used to insure against negligent acts, errors or omissions, committed by you or any person whose acts you are legally responsible for while engaging in the administration of your company's employee benefit plans.
- Ocean marine This policy is used to provide coverage for property you ship overseas while within the described territory and for the limits and perils declared on the form.
- ♣ Professional Liability This coverage is used to insure against claims arising out of negligent acts, errors or omissions in the rendering or failing to render professional services as defined in the policy

Many of these coverages may not apply to your type business, but you should review them to be sure they are not necessary to your operations. If you wish to have any of these coverages quoted we will be happy to do so.



Please note that any changes to your exposures and operations should be reported to Regions, as soon as possible. Due to policy wording, it is extremely important to keep us up to date on all changes, as it could affect your insurance coverage. Such changes may include, but are not limited to the following:

- Newly acquired operations or mergers with other companies
- New products
- **Expansion of operations to other states**
- \* Requirement by another party for higher limits
- Changes in protection of premises (eg: sprinkler systems, fire and burglar alarms, fences, etc. - the addition or removal of these)
- ❖ Additional equipment such as contractors equipment and vehicles
- Changes in occupancy of buildings
- Changes in operations

Communication is the key to providing an excellent insurance program that is tailored to meet your needs!!!



## IMPORTANT INFORMATION

#### POLICYHOLDER DISCLOSURE

# NOTICE OF INSURANCE COVERAGE FOR ACTS OF TERRORISM

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, effective November 26, 2002, you have a right to purchase insurance coverage for losses arising out of acts of terrorism, as defined in Section 102(1) of the Act, subject to all applicable policy provisions. The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State, 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 an air carrier or vessel or the premises of a United States mission; and to have been committed by an individual or individuals acting on behalf of any foreign person or foreign interest, 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.

You should know that coverage provided by this policy for losses caused by certified acts of terrorism is partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays 90% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss covered by the federal government under the Act.

#### SELECTION OR REJECTION OF TERRORISM INSURANCE COVERAGE

	losses arising out of certified acts of terrorism, as plicable policy provisions, for a premium of od of 3/1/2015 to 3/1/2016.
	ing out of certified acts of terrorism, as defined in g from acts of terrorism will be excluded.
Madison County Sheriff's Department	
Applicant/Named Insured	National Fire Insurance Company of Hartfo Insurance Company
By:	
Authorized Representative's Signature	Authorized Representative's Title
	QM60001338
Date	Policy Number
Please indicate your choice above, sign where i address below no later than _3/24/2015	ndicated, and return the original form to us at the
We recommend that you keep a copy of this no	tice for your records.
JWF Specialty Company 600 E 96th Street, Suite 425 Indianapolis, IN, 46240-0096	Quote Option: Basic
C-15513-A (Ed 12/02)	