CRC|Crump - Chicago
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INSURANCE QUOTATION

June 26, 2014

Jennifer Tutor
Horton Group, Inc. - Orland Park
10320 Orland Parkway
Orland Park, IL 60467

RE: Village of Orland Park

INSURER: Scottsdale Insurance Company

COVERAGE TYPE	**PREMIUM**
Commercial General Liability	$4,860.00

FEES & TAXES
(Fees fully earned)

Policy Fee Crump	$50.00
IL Stamping Fee @ 0.1000%	$5.00
IL Surplus Lines Tax @ 3.5000%	$170.00
Total Due:	$5,085.00

Due to Non-Admitted & Reinsurance Reform Act (NRRA) please be advised that we may have to revise taxes resulting in additional or return tax dollars

CONDITIONS AND/OR EXCLUSIONS:

Term: August 1, 2014 - August 4, 2014
Location: Village Complex, 14700 S. Ravinia Ave, Orland Park, IL 60462

Commercial General Liability (CG0001)

General Aggregate:	$2,000,000
Products/Completed Ops Aggregate:	Excluded (Incl in General Aggregate)
Personal/Advertising Injury:	$1,000,000
Each Occurrence:	$1,000,000
Fire Damage Liability (any one fire):	$ 100,000
Medical Payments **(UTS-246s)**:	$ 5,000
BI, PD Per Claim Deductible:	$ 500

Classification	**Code**	**Rate Basis**
Festival	10378	45,000 attendees

*Assault & Battery Limited Liability Coverage Form: Per Event: $25,000 each event/$50,000 Aggregate

Liquor Liability

Aggregate Limit:	$1,000,000
Common Cause Limit:	$1,000,000

Subject to the following terms/conditions:
1. This is a non-admitted carrier.
2. Terrorism Form signed by insured to bind coverage. **Terrorism is available for the following charge $180 .00 + applicable state taxes/fees.**
3. Signed Application.
4. All Vendors must provide COI`s naming our applicant as an additional insured
5. Liquor servers must have clearly established procedures regulating the sale of alcohol to minors or those under the influence
6. Server training certificates provided
7. Policy is Non-Auditable
8. First Aid facilities must be provided
9. Premium is Fully Earned

"NOTE: If insured is located outside your resident state, we must receive a copy of your non-resident license prior to binding."

Mandatory Forms and Endorsements:

UTS-COVPG (SIC)

OPS-D-1	Common Policy Declarations
CLS-SD-1L	Commercial General Liability Coverage Part Supplemental Declarations
CLS-SP-1L	Commercial General Liability Coverage Part Supplemental Declarations
UTS-SP-2	Forms & Endorsement Schedule
CG0001	Commercial General Liability Coverage Form
CG0068	Recording and Distribution of Material or Information in Violation of Law Exclusion
GLS-289s	Known Injury or Damage Exclusion - Personal and Advertising Injury
UTS-365s	Amendment of Nonpayment Cancellation Condition
CG2426	Amendment of Insured Contract Definition (Do not attach if using CG2139)
*CG2170	Cap On Losses From Certified Acts Of Terrorism (Added if Terrorism Coverage is Accepted)
*IL0985	Disclosure Pursuant To Terrorism Risk Insurance Act (Added if Terrorism Coverage is Accepted)
*CG2173	Exclusion of Certified Acts Of Terrorism (Added if Terrorism Coverage is Rejected)
UTS-246s	Amendatory Endorsements (without Medical Payments Exclusion)
*CG2149	Total Pollution Exclusion
CG2147	**Employee Related Practices Exclusion**
CG2167	**Fungi or Bacteria Exclusion**
CG2106	**Exclusion - Access or Disclosure of Confidential or Personal Information and Data-Related Liability - with Limited Bodily Injury Exception**
GLS-152s	**Amendment to Other Insurance Conditions**
IL-0017	**Common Policy Conditions**
IL-0021	**Nuclear Energy Liability Exclusion**
UTS-74g	**Punitive or Exemplary Damage Exclusion**
GLS-74s	**Cancellation Amendment**
GLS-30s	**Contractors Special Conditions**
GLS-341s	**Hydraulic Fracturing Exclusion**
UTS-266g	**Asbestos Exclusion**
UTS-267g	**Lead Contamination Exclusion**
UTS-128s	Optional Provisions Endorsement
GLS-47s	Minimum and Advance Premium Endorsement
GLS-94s	Deductible Endorsement
UTS-9g	Service of Suit
UTS-119g	Minimum Earned Cancellation Premium (100%)

CG2116	Exclusion: Designated Professional Services - "Any & All Professional Exposures"
CG2144	Limitation of Coverage to Designated Premises or Projects
GLS-285s	Assault &/or Battery Limited Liability Coverage Form
GLS-5s	Special Event Participant Exclusion
CLS-SD-5	Supplemental Declarations: Liquor Liability Coverage Part
CG0033	Liquor Liability Coverage Form: Occurrence Form
CG2806	Limitation of Coverage to Insured Premises Liability Only
UTS-74g	Punitive Damages Exclusion
UTS-365s	Amendment of Nonpayment Cancellation Condition
IL0162	IL Changes: Defense Costs
IL0147	IL Changes: Civil Union

*Plus all state applicable forms

Note: The coverage being offered may be more limited than what was requested.
A signed, completed application and due diligence (if applicable) is required upon binding.
If policy is rated on an adjustable basis, the Premium will be considered MINIMUM and DEPOSIT.
Subject to acceptable inspection and compliance with any recommendations made.
All fees are nonrefundable except where prohibited by law.
If we have previously indicated our intention to quote other lines, you will receive a quote under separate cover.

TAX FILING RESPONSIBILITY: Crump

MINIMUM EARNED PREMIUM PERCENT: 25.00%
MINIMUM EARNED PREMIUM AMOUNT: $1,215.00

QUOTE EXPIRATION DATE: 8/1/2014

We are pleased to offer the preceding quotation which should be reviewed carefully as the terms and conditions of coverage may differ from those requested on your application/submission. **THIS IS NOT A BINDER OF INSURANCE**. The preceding information is only a quotation subject to the specified conditions, and may be withdrawn at any time prior to acceptance and in no event will it remain open beyond the QUOTE EXPIRATION DATE.

By: ______________________
Authorized Representative