



WESTFIELD
INSURANCE

Sharing Knowledge. Building Trust.®

IMPORTANT NOTICE TO OUR POLICYHOLDERS

Westfield Insurance Fraud Hot-Line

PLEASE READ THIS IMPORTANT INFORMATION

- Fraudulent insurance claims cost us all money.
- Call us if you have information concerning a fraudulent insurance claim.
- All information will be kept confidential.
- Call and discuss your information with a trained investigator, or leave the information anonymously on a telephone answering machine.
- We can all help fight insurance fraud.

AD 8522 (08-10)

**Be a Fraud Buster
1-800-654-6482**

Detach and retain information below for future use.



**Fraud Hot-Line
1-800-654-6482**



**Westfield Center, Ohio 44251
www.westfieldinsurance.com**



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1-800-654-6482**



**Westfield Center, Ohio 44251
www.westfieldinsurance.com**

THIS NOTICE DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER THE POLICY. IF THERE IS ANY CONFLICT BETWEEN YOUR POLICY AND THIS NOTICE, THE PROVISIONS OF YOUR POLICY SHALL PREVAIL.

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE and PREMIUM

Coverage for acts of terrorism is included in your policy. You are hereby notified that under the Terrorism Risk Insurance Act, as amended in 2015, the definition of act of terrorism has changed. As defined in Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are 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. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

PREMIUM CHARGED

During your current policy period, the portion, if any, of your premium that is attributable to coverage for acts of terrorism as defined in the Act is \$_____ (refer to Common Policy Declarations if blank).

If you do not desire the coverage for acts of terrorism as defined in the Act, as amended, you may reject the coverage and instruct the insurance company to remove it and refund the premium described above. **To reject the coverage, you must:**

- 1) advise the insurance company by letter (on your company letterhead),
- 2) signed by the owner, representative, or properly designated official of the named insured.

The insurance company must receive your letter within 60 days from the date shown at the bottom right side of the forms titled "Common Policy Declarations". Please refer to "Common Policy Declarations" for the mailing address of the insurance company.

If your policy premium is \$500, that may represent a minimum premium. In that case, the portion that is attributable to acts of terrorism as defined in the Act, as amended, may be included within that minimum and your total premium will not be reduced if you reject coverage for acts of terrorism. The minimum premium will still apply.

Should you have any question regarding this notice, please contact your insurance agent.

IMPORTANT -- PREMIUM AUDIT NOTICE

Westfield Insurance welcomes the opportunity to service your insurance needs. The following information outlines the company's requirements for auditing your accounting records.

Your particular type of business has a policy premium that is based on estimated exposures at the time this policy was issued. Since the exposures that are used to rate your policy fluctuate during the policy year, your final premium cannot be determined until after the expiration date of the policy term.

An accurate premium audit is a benefit to you and your business. We recommend the person(s) in charge of keeping your financial records (e.g., Payroll; Gross Sales; Total Cost) be aware of insurance auditor needs. Records that are accurate and properly maintained allow you to gain the most benefit from your premium audit. Please ask questions and allow your auditor to assist you.

WHO WILL MAKE THE AUDIT?

You will be asked to complete a premium audit in one of three ways:

Mail/Voluntary - a form will be provided to you. The form will ask a series of questions relative to your type of risk and your type of policy. You will be asked to fill out the form in its entirety and return to Westfield for summary.

Telephone - a telephone auditor will call you on the phone to discuss your risk and gather your financials. This could be a staff auditor or vendor auditor depending on your policy.

Physical - a field auditor will contact you to visit your premises. They will ask about your operations and physically review your financial records. This could be a staff auditor or vendor auditor depending on your policy.

WHAT RECORDS WILL BE NEEDED?

The Premium Auditor will examine and audit all of your records that relate to your policy. The records needed will vary depending upon the type of coverage you have. In most cases, the auditor will be able to obtain the necessary audit data from two or more of the following records:

Payroll Journals with monthly/quarterly totals	Individual Earning Cards with monthly/quarterly totals
Quarterly Tax Reports for Federal/State	Certificates of Insurance for sub-contractors
General Ledgers/Income/Sales Journals	

In the course of the audit, the auditor will ask some questions about your records and your business operations. This will assist the Auditor in properly classifying your operations and employees.

HOW SHOULD YOUR RECORDS BE KEPT:

Payroll: Many of the premiums for your General Liability insurance are based on payroll which is defined as remuneration. Remuneration means money or substitutes for money. Payroll includes:

Wages	Bonuses	Holiday Pay	Sick Pay
Commissions	Overtime Pay	Vacation Pay	Payment for piece work

Overtime: The amount paid in excess of straight time pay can be deducted if the excess can be verified by your records. Your records must show overtime separately by employee.

Division of Payroll: Division of an individual employee's payroll to more than one classification is not allowed. Exception: For construction or erection operations, the payroll of an employee may be allocated to each type of work performed **if proper records are kept**. Payroll **cannot** be divided between construction and office or sales classifications.

Gross Sales: Another premium base for General Liability insurance is gross sales. This means the gross amount charged by you to others for all goods or products, sold or distributed and operations performed by you for others.

This information is provided to you as assistance for proper record-keeping requirements. Other insurance companies may differ in their requirements.

COMMERCIAL GENERAL LIABILITY ADVISORY NOTICE TO POLICYHOLDERS

This notice describes changes to your insurance policy. No coverage is provided by this notification nor can it be construed to replace any provisions of your policy or endorsements. You should read your policy and review your declaration page for complete information on the coverages you are provided.

If your expiring policy provided coverage for either the Contractors General Liability Expanded (CG 70 37) or Contractors General Liability Expanded Plus (CG 70 94) coverage your renewal policy is being issued with the replacement coverage offered through the new Signature Series Commercial General Liability Contractors Endorsement (CG 71 37). Please note with this change the following coverages are no longer included: Who Is An Insured - Vendors; Additional Insured - Controlling Interest; Care, Custody or Control; Voluntary Property Damage and Damage To Your Work.

If you desire to purchase these coverages separately, or would like more information about our new Signature Series Contractors program, please contact your Independent Insurance Agent.

NOTICE OF NEW COVERAGE AVAILABLE

This Notice does not form part of your policy. No coverage is provided by the Notice nor can it be construed to replace any provision of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided. If there is any conflict between the Policy and this Notice, THE PROVISIONS OF THE POLICY SHALL PREVAIL.

WESTFIELD IS PLEASED TO INTRODUCE CYBER SUITE!!

Westfield is now offering cyber insurance to provide additional protection for your business. Strengthening our promise to keep an ever vigilant protective watch over what you have entrusted us to insure.

To add Cyber Suite coverage to your policy, or for more information, please contact your Westfield Independent Agent.

Cyber Suite consists of the following coverages:

Data Compromise Response Expenses

Provides resources to respond to a breach of personal information. Consists of the following seven Elements:

- **Forensic Information Technology** - Determine the nature and extent of the breach.
- **Legal Review** - Access to legal counsel in reference to the breach.
- **Notification to Affected Individuals** - Reimbursement of expenses associated with notification of breach of personal information.
- **Services to Affected Individuals** - One year of credit monitoring, Identity Recovery Case Management services, toll-free help line for affected individuals and packet of information materials.
- **Public Relations Services** - Professional PR firm responding to potential impact of the breach on business relationships.
- **Regulatory Fines and Penalties** - as allowed by law of the applicable jurisdiction.
- **PCI Fines and Penalties** - Payment Card Industry fine or penalty imposed under a contract. PCI Fines do not include fraudulent charges, assessments or increased transaction costs.

Computer Attack

Attack on a computer system owned or leased by the Insured and under the Insureds control. Consists of the following five Elements:

- **Data Restoration Costs** - Replace lost or corrupted data from electronic sources.
- **Data Recreation Costs** - Research, recreate and replace lost or corrupted data from non-electronic sources.
- **System Restoration Costs** - Restore computer systems to pre-attack level of functionality.
- **Loss of Business** - Business Income lost and Extra Expenses incurred during system and data recovery.
- **Public Relations Services** - Professional PR firm communicating with outside parties concerning the Computer Attack.

Cyber Extortion

Response to cyber extortion threat, including cost of negotiator or investigator as well as amounts paid in response to a credible cyber extortion threat. This is a sublimit of the Computer Attack coverage.

Identity Recovery

Provides owners of the Insured business with Case Management services and financial resources to recover control of their identities after an identity theft.

Data Compromise Liability

Provides defense and settlement costs in the event of a suit related to a breach of personal information.

Network Security Liability

Provides defense and settlement costs in the event of a suit alleging a system security failure caused damage to a third party.

Electronic Media Liability

Provides defense and settlement costs in the event of a suit alleging information displayed on a website caused damage to a third party.

Coverage Options

There are two coverage options available:

- All seven coverages may be selected OR
- First Party coverages only may be selected (Data Compromise Response Expense, Computer Attack, Cyber Extortion and Identity Recovery)

Eligibility:

Most classes of business are eligible for Cyber Suite coverage; however, there are a small number of risks that are not eligible for this coverage. Please consult with your Westfield Independent Agent to see if your business is eligible.

Limits:

Limits available from \$25,000 - \$1,000,000.

For More Information:

Please contact your Westfield Independent Agent for additional information.



COMPANY PROVIDING COVERAGE

WESTFIELD INSURANCE COMPANY

NAMED INSURED AND MAILING ADDRESS

AGENCY

02-02021

PROD.

000

RAY KNIGHT INDUSTRIES, LLC
DBA HANDYMAN LARRY
11462 E RUTLEDGE AVE
MESA AZ 85212

LEBARON & CARROLL LLC
1350 E SOUTHERN AVE
MESA AZ 85204-5100
TELEPHONE 480-834-9315

Policy Number: CWP 5 533 542

.20. WIC Account Number: 0270001337 . M

Policy Period From 07/13/18 To 07/13/19

at 12:01 A.M. Standard Time at your mailing address shown above.

Business: HANDYMAN

Named Insured is: Limited Liab. Co.

In return for the payment of the premium, and subject to all terms of this policy, we agree with you to provide the insurance as stated in this policy.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS

COMMERCIAL GENERAL LIABILITY COVERAGE PART	\$	456.00
COMMERCIAL INLAND MARINE COVERAGE PART	\$	371.00
TERRORISM INSURANCE COVERAGE	\$	2.00

Policy Annual Premium \$ 829.00

Total Advance Annual Policy Premium \$ 829.00

The above is a summary of your coverages. For more detail, please refer to the individual coverage parts inside your policy.

Forms and Endorsements applicable to all coverage parts:

IL0019 0488 , IL0017 1198 , ID7004 0411 , IL0003 0908 , IL0258 1214 .

COUNTERSIGNED: _____ BY _____
Date Authorized Representative



COMPANY PROVIDING COVERAGE

WESTFIELD INSURANCE COMPANY

NAMED INSURED AND MAILING ADDRESS	AGENCY	02-02021	PROD.	000
RAY KNIGHT INDUSTRIES, LLC DBA HANDYMAN LARRY 11462 E RUTLEDGE AVE MESA AZ 85212	LEBARON & CARROLL LLC 1350 E SOUTHERN AVE MESA AZ 85204-5100 TELEPHONE 480-834-9315			

Policy Number: CWP 5 533 542 .20. WIC Account Number: 0270001337 . M

Policy Period	From To	07/13/18 07/13/19	at 12:01 A.M. Standard Time at your mailing address shown above.
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LIMITS OF INSURANCE -

General Aggregate Limit (Other Than Products/Completed Operations)	\$2,000,000
Products/Completed Operations Aggregate Limit	\$2,000,000
Personal & Advertising Injury Limit (Per Person Or Organization)	\$1,000,000
Each Occurrence Limit	\$1,000,000
Fire Damage Limit	(Any One Fire) \$500,000
Medical Expense Limit	(Any One Person) \$5,000.....

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. **TOTAL ADVANCE ANNUAL GENERAL LIABILITY PREMIUM** \$456.00
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Deductible Liability Insurance Applies

Forms And Endorsements Applicable To This Coverage Part:
CG0300A 0196 , CG2167 1204 , CG0001 0413 , IL0021 0908 , CG7000 1298 ,
CG2503 0509 , CG2504A 0509 , CG2147 1207 , CG7017 1298 , CG2106 0514 ,
IL7013 1206 , CG2170 0115 , CG2426 0413 , CG7065 0703 , CG2186 1204 ,
CG2196 0305 , CG7137 1112 , CG2010 0413 , CG2037 0413 .



RENEWAL
GENERAL LIABILITY DECLARATIONS
(Continued)

COMPANY PROVIDING COVERAGE

WESTFIELD INSURANCE COMPANY

NAMED INSURED AND MAILING ADDRESS	AGENCY	02-02021	PROD.	000
RAY KNIGHT INDUSTRIES, LLC DBA HANDYMAN LARRY 11462 E RUTLEDGE AVE MESA AZ 85212	LEBARON & CARROLL LLC 1350 E SOUTHERN AVE MESA AZ 85204-5100 TELEPHONE 480-834-9315			

Policy Number: CWP 5 533 542 .20. WIC Account Number: 0270001337 . M

Policy Period From 07/13/18 To 07/13/19 at 12:01 A.M. Standard Time at your mailing address shown above.

Location Of All Premises Owned By, Rented To Or Controlled By The Named Insured Are The Same As The Mailing Address Of The Policy Declarations Unless Otherwise Indicated.

GENERAL LIABILITY SCHEDULE

PREMIUM BASIS LEGEND -

S = GROSS SALES PER \$1,000
P = PAYROLL PER \$1,000
O = OTHERS PER \$1,000
A = AREA PER 1,000 SQ. FT.
C = TOTAL COST PER \$1,000
M = ADMISSIONS PER 1,000
U = UNITS PER UNIT
T = SEE CLASSIFICATION NOTES

RATE LEGEND -

PREM/OP = PREMISES AND OPERATIONS
PROD = PRODUCTS AND COMPLETED OPERATIONS
CMPCBN = COMPOSITE PREMISES/PRODUCTS COMPLETED OPERATIONS
MP = MINIMUM PREMIUM

CLASSIFICATION	CODE	PREMIUM BASIS	RATE	PREMIUM
ARIZONA				
11462 E RUTLEDGE AVE MESA .AZ..85212				
CONTRACTORS - SUBCONTRACTED WORK - IN CONNECTION WITH CONSTRUCTION, RECONSTRUCTION, ERECTION OR REPAIR - NOT BUILDINGS	91581	C IF ANY	PREM/OP 4.951 PROD. 3.686	
HANDYPERSON	95625	P 20,000	PREM/OP 10.748 PROD. 7.042	\$215 \$141
PREM/OP MP \$165 PROD MP \$101				

ADDITIONAL COVERAGES AND ENDORSEMENTS -

SIGNATURE SERIES COMML GL CONTRACTORS ENDT \$100

TOTAL

TOTAL PREMIUM - PREMISES AND OPERATIONS \$215
TOTAL PREMIUM - PRODUCTS AND COMPLETED OPERATIONS \$141
TOTAL PREMIUM - ADDITIONAL COVERAGES AND ENDORSEMENTS \$100

TOTAL ADVANCE ANNUAL GENERAL LIABILITY PREMIUM \$456



COMPANY PROVIDING COVERAGE

WESTFIELD INSURANCE COMPANY

NAMED INSURED AND MAILING ADDRESS	AGENCY	02-02021	PROD.	000
RAY KNIGHT INDUSTRIES, LLC DBA HANDYMAN LARRY 11462 E RUTLEDGE AVE MESA AZ 85212	LEBARON & CARROLL LLC 1350 E SOUTHERN AVE MESA AZ 85204-5100 TELEPHONE 480-834-9315			

Policy Number: CWP 5 533 542 .20. WIC Account Number: 0270001337 . M

Policy Period	From To	07/13/18 07/13/19	at 12:01 A.M. Standard Time at your mailing address shown above.
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This policy contains the following Inland Marine Coverage Forms:

Coverage Forms	Premi um
Contractors' Equipment Coverage - Small Tools Floater	\$ 271.00
Scheduled Property Floater	\$ 100.00

Total Advance Annual Inland Marine Premium \$ 371.00

All Forms and Endorsements applicable to Inland Marine Coverages:

CM7090 0300 , IL0952 0115 , CM7161 0611 , IM7008 0112 , IM7003 0404 ,
IM2005 0404 , CL0700 1006 , IM7039 0711 , IM7500 1009 , IM7506 0112 .

POLICY NUMBER: CWP 5533542

POLICY PERIOD: FROM 07/13/2018 TO 07/13/2019

SCHEDULE OF COVERAGES CONTRACTORS' EQUIPMENT SMALL TOOLS FLOATER

(The entries required to complete this schedule will be shown below or on the "schedule of coverages".)

	"Limit"
Your Tools Limit -- The most "we" pay for loss to any one "tool" "you" own is:	\$ 2,500
Check if applicable:	
{X} Employee Tool Limit -- The most "we" pay for loss to any one employee "tool" is:	\$ 2,500
{X} Leased/Rented Tool Limit -- The most "we" pay for loss to any one "tool" "you" lease or rent is:	\$ 2,500
Catastrophe Limit -- The most "we" pay for loss to all tools in any one occurrence is:	\$ 7,500
VALUATION -- Actual Cash Value	
DEDUCTIBLE	
DEDUCTIBLE AMOUNT	\$ 500

ADDITIONAL INFORMATION

CM7161 0611 , IM7008 0112 , IM7003 0404 , IM2005 0404 , CL0700 1006 ,
IM7039 0711 .

POLICY NUMBER: CWP 5533542

POLICY PERIOD: FROM 07/13/2018 TO 07/13/2019

SCHEDULE OF COVERAGES SCHEDULED PROPERTY FLOATER

(The entries required to complete this schedule will be shown below or on the "schedule of coverages".)

COVERED PROPERTY

Item No.	DESCRIBED PROPERTY	"Li mi t"
01	2013 BOX TRAILER	\$ 4,000

COVERAGE EXTENSIONS

Additional Debris Removal Expenses	\$ 5,000
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SUPPLEMENTAL COVERAGES

Newly Acquired Property	\$ 25,000
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Pollutant Cleanup And Removal	\$ 10,000
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DEDUCTIBLE AND COINSURANCE

DEDUCTIBLE

Deductible Amount	\$ 500
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COINSURANCE

{ } Not Applicable

{ } 80% { } 90% {X} 100% { } Other %

ADDITIONAL INFORMATION

IM7500 1009 , IM7506 0112 , IM2005 0404 , CL0700 1006 .