

May 15, 2018

**PROPOSAL OF INSURANCE**

**NAMED INSURED:** The Yonkers Board of Education &/or The City of Yonkers &/or Yonkers Public Schools

**ADDRESS:** One Larkin Center  
Yonkers, New York 10701

**COVERAGE:** Automobile Liability and Physical Damage

**POLICY TERM:** July 1, 2018 – July 1, 2019

**COVERAGE:**

Liability Coverage	Symbol 10
Auto Medical Payments	Symbol 2
Uninsured/Underinsured Motorists	Symbol 6
Comprehensive/Collision	Symbol 2,19
Personal Injury Protection / Additional PIP	Symbol 5

**LIMITS:**

- \$1,000,000 Combined Single Limit
- \$1,000,000 Uninsured/Underinsured Motorist / Hired Non-Owned Liability
- \$ 50,000 Personal Injury Protection
- \$ 100,000 Additional Personal Injury Protection
- \$ 10,000 Auto Medical Payments
- \$ 25,000 Optional Basic Economic Loss
- \$ 100 Towing & Labor Each Disablement

**DEDUCTIBLES:**

- Comprehensive - \$500 each occurrence
- Collision - \$1,000 each occurrence

**EXPOSURE:** 64 vehicles as per schedule on file

**CONDITIONS:**

Commercial Automobile Elite Endorsement  
Glass breakage (Windshields and Windows) No deductible applies for autos which carry Comprehensive coverage  
Hired Auto Physical Damage- Actual Cash Value or the cost for repair or replacement of the vehicle, whichever is less subject to deductible.  
Symbol "2" means only those "autos" you own (and for Liability Coverage any "trailers" you don't own while attached to power units you own). This includes those "autos" you acquire ownership of after the policy begins.  
Symbol "5" means owned "autos" subject to no-fault. Any "auto" owned by an insured that is garaged or licensed in a state where no-fault benefit laws exists. This symbol also applies to any "auto" acquired after the policy begins.  
Symbol "6" means only those "autos" you own that because of the law in the state where they are licensed or principally garaged are required to have and cannot reject Uninsured Motorists Coverage. This includes those "autos" you acquire ownership of after the policy begins provided they are subject to the same state uninsured motorists requirement.  
Symbol "10" means any auto, except vehicles owned, hired or borrowed used to transport students/children.  
Symbol "19" means only those "autos" that are land vehicles and that would qualify under the definition of "mobile equipment" under this policy if they were not subject to a compulsory or financial responsibility law or other motor vehicle insurance law where they are licensed or principally garaged.

**SUBJECT TO:**

- Signed UM/UIM Selection Form is required at binding.
- Any taxes, fees or surcharges included in the total premium shown on the proposal are not subject to installment billing.
- Signed/completed selection/rejection forms are required at binding.

**SECURITY:** Philadelphia Indemnity Insurance Company (A++, XV by A.M. Best)

**PREMIUM:** \$114,031 (includes New York Motor Vehicle Fee of \$630)

**NAUSCH, HOGAN & MURRAY, INC.**

*Insurance Brokers • Average Adjusters  
Reinsurance Intermediaries*

77 WATER STREET  
NEW YORK, N.Y. 10005

(212) 480-4200 • FAX: (212) 480-2920

NEW YORK / ROTTERDAM / LONDON / ST. THOMAS / RIO DE JANEIRO

May 15, 2018

**EXCESS AUTOMOBILE LIABILITY**

**LIMITS:** \$4,000,000 Combined Single Limit excess of \$1,000,000 underlying  
(Defense in Addition to Limits)  
In Excess of Primary  
Occurrence Form

**SECURITY:** Philadelphia Indemnity Insurance Company- ADMITTED (A++, XV by AM Best)

**CONDITIONS:** 63 Power Units  
Exclusion- Asbestos  
Anti-Stacking Endorsement  
Exclusion-Access or Disclosure of Confidential or Personal Information  
Exclusion- Punitive Damages  
Cap on Losses from Certified Acts of Terrorism or Exclusion of Certified Acts of Terrorism (depending on option chosen)  
Commercial Excess Liability Policy  
Minimum Earned Premium Endorsement  
Uninsured/Underinsured Motorist Exclusion

**SUBJECT TO:** Prior to binding Philadelphia must have description of Fleet and Driver Safety Program (details on driver hiring/training and vehicle maintenance program)  
Accept or reject TRIA at binding. Signed TRIA rejection form due at binding.  
Signed Applications and Acord 131 within 30 days of binding  
Copies of underlying policies within 30 days of the effective date  
Review of excess quote on layers above us and Philadelphia Insurance Company reserving the right to adjust pricing accordingly.  
This is issued upon the reliance of information submitted to Philadelphia Indemnity Insurance Company by the applicant. By accepting this, the applicant accepts the terms and conditions contained and verifies that all information is accurate, true and complete and that no pertinent or material information has been withheld or omitted.  
If TRIA is accepted, it must be included on all underlying policies  
Underlying Binders  
All Underlying carriers have minimum AM Best rating of A- VII or better  
Receipt and favorable review/approval of any/all manuscript forms and/or restrictions of coverage prior to binding.  
Underlying information including carrier name, effective date and policy numbers  
Accept or Reject TRIA at binding. Signed TRIA form due at binding

**PREMIUM:** \$30,317 Minimum & Deposit Premium  
Flat Rate  
35% Minimum Earned at Inception  
Premium due 30 days from effective date

**FINAL PREMIUM:** \$114,031 Primary Auto  
\$ 30,317 Excess Auto Liability  
\$144,348

**NAUSCH, HOGAN & MURRAY, INC.**

*Insurance Brokers • Average Adjusters*

*Reinsurance Intermediaries*

77 WATER STREET

NEW YORK, N.Y. 10005

(212) 480-4200 • FAX: (212) 480-2920

NEW YORK / ROTTERDAM / LONDON / ST. THOMAS / RIO DE JANEIRO