

Request for Proposal: Insurance for the
Johnson County Fire Protection District

Proposal Submission Deadline: 12:00 PM, April 6, 2021

Proposal Review Date: April 13, 2021

Time: 6:00 PM

Place: Johnson County Fire Protection District
122 W. Young Ave.
Warrensburg, MO 64093

Mark Proposal Envelope: INSURANCE PROPOSAL

INSURANCE PROPOSAL SPECIFICATIONS

The Johnson County Fire Protection District of Johnson County Missouri is accepting proposals for insurance coverage for the emergency service organization and operations. It is essential that submitted proposals contain premium quotations for the coverage which conform to those specified herein. Vendors are expected to consult the District's present policies, inspect property and premises and to make relevant inquiries concerning specified coverage in order to obtain full information for purposes of submitting a firm and correct proposal. Where specifications and current District insurance policies differ, specification contents are to be followed in preparing a proposal.

Proposals must be in a sealed envelope marked, "INSURANCE PROPOSAL" to Board of Directors, Johnson County Fire Protection District, 122 W. Young Ave., Warrensburg, MO 64093. Proposals shall be received by 12:00 PM on April 6, 2021. Proposals will be reviewed publicly at the Board of Directors meeting at 6:00 PM on April 13, 2021 then studied and evaluated prior to a decision by the Board of Directors. No proposal will be given consideration if received after the above closing time and date. All proposals will be deemed final and binding upon the vendor and not subject to alteration or correction.

The Board of Directors reserves the right to waive any informalities, to reject any or all proposals or any part thereof and to accept that proposal(s) or part thereof which in the judgment of the Board of Directors is of the greatest advantage to the District. The successful vendor(s) will be notified of the Board's decision and informed to bind the accepted coverage to become effective as of 12:01 AM, June 1, 2021.

The District requires that its property and casualty insurance program be underwritten by carriers and serviced by agents or brokers licensed by the State of Missouri, with adequate knowledge, experience, personnel, and facilities. The successful vendor(s) will be expected to assist the District in the administration of its property and casualty program. It is essential that the attached "Vendor Identification Form" be completed by the vendor and submitted with the vendor's proposal to assist the District in evaluation of the qualifications of vendors and proposals.

Upon notice of an award of business the successful vendor must provide the District with a certificate of insurance for any agent or broker errors and omissions policy with a per claim limit of not less than \$2,000,000.

Although the District intends to have one firm provide all of the coverage specified herein, the District retains the right to select any premium quotation for a particular policy in any submitted proposal. Vendors must specify which quoted policies are part of a "package" from which no individual policy may be purchased separately.

The District intends to retain the coverage from the successful vendor(s) for a minimum of three years, providing that satisfactory service is received. The District reserves the right to solicit proposals prior to three years if deemed in the best interest of the District. The District reserves the right to accept or reject any or all proposals.

All policies must be of the non-assessable type. Where applicable policies should be written for a three-year term. Specified coverage should be written on a package or multi-peril policy to whatever extent possible and supplemented by individual peril contracts when necessary to obtain the best rates available while providing quality coverage or to obtain a coverage not available under a multi-peril form.

Vendors providing proposals must be identified and the vendor's/carrier's most recent rating as established by the Alfred M. Best Company must be cited on the Rate-premium Proposal Quotation Form. Vendor/carrier ratings will be given consideration in deciding the award of business.

Specified coverage is to be considered as minimum coverage. Alternate proposals that represent other reasonable options will be evaluated. They may reflect different coverage and amounts. However, it is essential that any premium quotation for a coverage which differs from that specified herein be accompanied by a detailed explanation of the difference between the quoted and the specified coverage. Where specifications call out OPTIONS, the vendor(s) shall include pricing for the District to consider in evaluation of their total insurance coverage.

Questions concerning the content of these specifications, authority to inspect District property or permission to review the District's present policies as available and during normal office hours or as otherwise arranged should be directed to Office Manager Mackenzie Schuette or Chief Larry Jennings at 660-747-5220.

GENERAL INFORMATION

Name of Insured: Johnson County Fire Protection District

Date Policies are to be effective: June 1, 2021 – June 1, 2022
June 1, 2022 – June 1, 2023
June 1, 2023 – June 1, 2024

All coverage must be placed in a company with Best's rating of A- or better.

On any proposal submitted, it must state that these proposal specifications are satisfied in all respects. Any exception must be specifically stated.

Every proposal that is submitted must be accompanied by a complete set of current specimen policies and endorsements for every coverage form that is being proposed.

Proposals will be considered on the basis of all coverage combined. The insured wishes to deal with only one agent and ideally one company.

Schedule of Locations/Occupancy/Building/Contents:

1. Fire Station 1
Warrensburg 122 W. Young St., Warrensburg
Metal, Built prior to 1974 (unknown year), 9456 sq ft
\$2,220,367.00 Building
\$ 110,394.00 Contents
2. Fire Station 2
Leeton 525 O'Neal Drive, Leeton (Sec. 21, Twp. 44N Rge. 25W)
Metal, Built in 2008, 3200 sq ft, 40 X 80
\$366,524.00 Building
\$ 6,326.00 Contents
3. Fire Station 3
Chilhowee 405 W. Hwy 2, Chilhowee (Sec. 13 Twp. 44N Rge 27W)
Metal and Frame, Built in 1973, 2240 sq ft
\$181,535.00 Building
\$ 6,326.00 Contents
4. Fire Station 4
Knob Noster 1081 NE 75, Knob Noster (Sec. 24 Twp. 24 Rge 46)
Metal, Built in 1991, 1600 sq ft, 40 X 40
\$129,669.00 Building
\$ 6,326.00 Contents
5. Fire Station 5
Centerview 498 SW 100, Centerview (Sec. 31 Twp. 46N Rge. 26W)
Metal, Built in 2004, 3000 sq ft, 40 X 75
\$259,043.00 Building
\$ 6,326.00 Contents

6. Fire Station 6
Valley City 328 NE Hwy E, Warrensburg (Sec. 16 Twp. 47N Rge. 25W)
Metal, Built in 1989, 1200 sq ft, 30 X 40, Addition Built in 2008,
1200 sq ft, 30 X 40. Total 2400 sq ft, 60 x 80
\$266,445.00 Building
\$ 6,326.00 Contents
7. Fire Station 7
Columbus 584 NW Hwy M, Centerview (Sec. 28 Twp. 47N Rge. 27W)
Metal, Built in 1990, 1200 sq ft, 30 X 40, Addition Built in 2008,
1200 sq ft, 30 X 40. Total 2400 sq ft, 60 x 80
\$259,043.00 Building
\$ 6,326.00 Contents
8. Fire Station 8
Fayetteville 950 NW 171 Warrensburg (Sec. 3 Twp. 47 Rge. 26)
Metal, Built in 1993, 1600 sq ft, 40 X 40
\$129,669.00 Building
\$ 6,326.00 Contents
9. Fire Station 9
Cornelia 16 SW Hwy JJ, Leeton (Sec. 2 Twp. 44N Rge. 26W)
Metal, Built in 1995, 1600 sq ft, 40 X 40
\$129,669.00 Building
\$ 6,326.00 Contents
10. Fire Station 10
Warrensburg 1200 Countryview Lane, Warrensburg
Metal, Built in 2008, 3200 sq ft, 40 X 80
\$444,073.00 Building
\$ 6,326.00 Contents
11. Fire Station 11
Warrensburg 410 N. Holden, Warrensburg
Metal, Built in 1982, 2000 sq ft, 50 X 60
\$248,842.00 Building
\$ 6,326.00 Contents
12. Fire Station 12
Knob Noster 830 SE Y Hwy, Knob Noster
Metal, Built in 2019, 3200 sq ft, 40 X 80
\$420,038.00 Building
\$ 6,579.00 Contents
13. Storage Building 122 W. Young St., Warrensburg
Metal, Built in 1983, 3360 sq ft, 40 X 82
\$222,037.00 Building
\$ 6,326.00 Contents
14. Storage Building 498 SW 100, Centerview (Sec. 31 Twp. 46N Rge. 26W)
Metal, Built in 2014, 300 sq ft, 10 X 30
\$ 5,849.00 Building
\$ 5,849.00 Contents

The insured reserves the right to accept or reject any proposal and to accept the proposal most advantageous as to coverage and premium.

The Premium Summary page must be completed and submitted. Other information in support of the proposal may be attached.

Building: No coinsurance
 Guaranteed replacement cost coverage
 Automatic increase/inflation guard
 Coverage on a blanket basis

Contents: No coinsurance
 Replacement cost coverage
 Automatic increase/inflation guard
 Coverage on a blanket basis

Minimum Coverage Requirements:

1. Coverage should include fire and lightning, theft, extended coverage, vandalism, "All Risk", earthquake, volcanic eruption, mudslide, landslide and sinkhole collapse
2. Building ordinance coverage on an unlimited basis
3. Flood, including backup of sewers and drains and runoff from surface water
4. Damage by artificially generated electrical currents
5. Interruption of power off premises
6. \$20,000.00 Valuable papers and records
7. Coverage for sidewalks, parking lots and other paved surfaces
8. Personal effects - \$1500.00 per person/\$15,000.00 per occurrence
9. Exterior signs - \$10,000.00
10. Blanket loss of income/Extra Expense - \$25,000.00
11. Building Glass for the same perils/limits as real property
12. Computer Virus coverage or comparable EDP coverage up to a limit of \$20,000.00 for all software
13. Commandeered Property (other than auto) - \$250,000.00 on a replacement cost basis, in any emergency situation and include loss of use coverage
14. Deductible Waiver – should a property claim occur in conjunction with an Auto Physical Damage or Portable Equipment claim, only the largest deductible should apply; the others should be waived
15. Deductible: \$500.00

Portable Equipment:

Limits:	Blanket Limit	\$Guaranteed Replacement Cost
	Deductible	\$250.00

Minimum Coverage Requirement:

1. Coverage must be provided on a guaranteed replacement cost basis.
2. Comprehensive coverage including the perils of flood, earthquake and contamination.
3. Coverage must be provided for equipment furnished for the insured's regular use
4. Coverage must be provided up to \$1500.00 on a replacement cost basis for personal effects of each member while engaged in official duties, not subject to any deductible
5. \$10,000.00 of coverage should be provided for non-owned equipment temporarily in the insured's possession
6. Coverage should be provided up to \$5000.00 for expenses incurred in the reproduction of valuable papers and records if they are destroyed or damaged by a covered loss off premises
7. Deductible Waiver – should a Portable Equipment claim occur in conjunction with a Property or Auto Physical Damage claim, only the largest deductible should apply; the others should be waived.

Portable Equipment Schedule:

2008 Lowe 2070 Roughneck Boat	Deductible \$250	Limit \$5,000
2008 115 HP Suzuki Motor	Deductible \$250	Limit \$5,000

Automobile Coverage:

Liability Coverage

\$1,000,000.00 Combined Single Limit

\$100,000.00 Uninsured/Underinsured Motorist

Deductible: \$500.00 Comp / \$1,000.00 Collision

Minimum Coverage Requirements

1. Coverage must be provided for Fellow Member Liability
2. Coverage must be provided (in the same amount as the CSL) for Hired and Non-Owned Liability. This is to include all members of the Organization's insured's to provide coverage on an excess basis for these members using their personal vehicle on any official department business without any requirement on underlying insurance.
3. Hire/Borrowed Auto Liability is to be provided on an excess basis
4. Volunteers or Employees as Insured to provide coverage excess of their personal auto liability when using their personal vehicle on behalf of the Organization
5. Auto pollution liability
6. Mutual Aid expense reimbursement
7. Bodily injury and property damage shall include intentional acts.

Physical Damage Coverage

1. Physical Damage coverage shall be provided on all emergency use vehicles, except private passenger types and service vehicle on an Agreed Value basis without any deduction for depreciation
2. Customized Vehicle Extension to cover the cost of replacing custom feature such as gold leaf, sirens, radios, and light bars on the private passenger and service vehicle that are written on an Actual Cash basis
3. Freezing Coverage to special equipment common to emergency service vehicles
4. Deductible Reimbursement of up to \$500.00 or the amount of a member's deductible, whichever is less, if a member damaged his personal vehicle while participating in an official duty of the Organization
5. Hire/Borrowed/Commandeered Auto Physical Damage coverage is to be provided on an unlimited Actual Cash Value primary basis with a \$50.00 comprehensive deductible and a \$100.00 collision deductible
6. If the estimated repair costs exceed 75% of the Agreed Value on the covered vehicle, the Organization shall be paid the lesser of the cost to replace the vehicle with a new vehicle or the Agreed Value, without depreciation.

Automobile Schedule:

Value is the approximate value or purchase price.

Year	Make	Type	VIN	Insurance Value	GPM	Gallons	Veh ID
1995	Ford	F250 Pickup Brush Veh	1FTHF26H5SNB20764	15,000.00	30	300	U319
2002	International	International	1HTMKADR43H510600	300,000	1,250	1,000	E302
2002	International	International	1HTMKADR72H529236	300,000	1,250	1,000	E361
2002	International	International	1HTMKADR52H529235	300,000	1,250	1,000	E331
2002	International	International	1HTMKADR43H510774	300,000	1,250	1,000	E3121
2002	International	International	1HTMKADR92H529237	300,000	1,250	1,000	E381
2002	International	International	1HTMKADR32H529234	300,000	1,250	1,000	E391
2002	International	Midwest Tanker 4400	1HTMKADR62H529230	200,000	300	2,000	T383
2002	International	Midwest Tanker 4400	1HTMKADR2H529232	200,000	300	2,000	T333
2002	International	Midwest Tanker 4400	1HTMKADR82H529228	200,000	300	2,000	T343
2002	International	Midwest Tanker 4400	1HTMKADR2H529229	200,000	300	2,000	T3123
2002	International	Midwest Tanker 4400	1HTMKADR12H529233	200,000	300	2,000	T363
2002	Surrey	Fire Safety Trailer CC3500 Pickup Brush		40,000	NA	NA	Safe 1
2003	Chevrolet	Veh CC3500 Pickup Brush	1GBJK34UX3E151081	35,000	300	300	B3125
2003	Chevrolet	Veh CC3500 Pickup Brush	1GBJK34U93E154683	35,000	300	300	B316
2003	Chevrolet	Veh	1GBJK34U73E157002	35,000	300	300	B335
2005	Dodge	Pickup Brush veh	3D7MS46D65G771455	35,000	300	300	B345
2005	Dodge	Pickup Brush veh	3D7MS46D85G771456	35,000	300	300	B375
2006	International	Midwest Tanker 4400	1HTMKAZRX6H174206	200,000	300	2,000	T323
2006	International	Midwest Tanker 4400	1HTMKAZR96H174200	200,000	300	2,000	T373
2006	International	Midwest Tanker 4400	1HTMKAZR46H174203	200,000	300	2,000	T393
2007	Chevrolet	Light Rescue Type III	1GBJG316671214889	40,000	NA	NA	S358
2008	Ford	F350 Pickup Brush Veh	1FDWF37Y28EC60027	35,000	300	300	B325
2008	Ford	F350 Pickup Brush Veh	1FDWF37Y68EC60029	35,000	300	300	B355
2008	Ford	F350 Pickup Brush Veh	1FDWF37Y98EC60025	35,000	300	300	B365
2008	Ford	F350 Pickup Brush Veh	1FDWF37Y48EC60028	35,000	300	300	B385
2008	Ford	F350 Pickup Brush Veh	1FDWF37Y08EC60026	35,000	300	300	B395
2008	Ford	F550 Light Rescue	1FDAW57R98EC60010	200,000	NA	NA	R317
2009	International	KME Engine	1HTMKAZR59H116734	300,000	1,250	1,000	E341
2009	International	KME Engine	1HTMKAZR59H116735	300,000	1,250	1,000	E3101
2009	International	KME Engine	1HTMKAZR59H116736	300,000	1,250	1,000	E371
2009	International	KME Engine	1HTMKAZR59H116737	300,000	1,250	1,000	E321
2009	International	Midwest Tanker 4400	1HTMKAZR09H125116	200,000	300	2,000	T353
2009	Ford	Air Cascade	1FTWW31Y29EA47674	30,000	NA	NA	A3108
2009	Ford	Explorer Support Unit	1FMEU73E59UA21423	26,000	NA	NA	R3118
2009	Ford	Explorer Support Unit	1FMEU73E59UA21424	26,000	NA	NA	C302

2009	Chevrolet	Light Rescue	1GBE4C3999F401194	75,000	NA	NA	R3117
2011	Ford	F350 Pickup Brush Veh	1FDRF3H62BEC71630	35,000	300	300	B3105
2013	International	KME Engine	1HTMKAZR1DH203024	300,000	1250	1000	E351
2013	Ford	F250 Support Unit	1FT7W2B65DEA86814	35,000	NA	NA	C303
2014	Chevrolet	Tahoe Support Unit	1GNSK2EOXER157410	40,000	NA	NA	C304
2017	Ford	F350 Pickup Brush Veh	1FDRF3H60HED59472	45,000	300	300	B315
2019	International	KME Tanker	1HTEUTAROKH317986	220,000	300	2000	T3103
2019	International	KME Tanker	1HTEUTAR9KH317985	220,000	300	2000	T313
2019	International	KME Engine	1HTEUTAR7KH166550	320,000	1250	1000	E311
2019	International	KME ENGINE	1HTEUTAROKH166549	320,000	1250	1000	E301
2019	Ford	F250	1FT7W2B60KEE37030	50,000	NA	NA	C301
2019	Ford	F350 Pickup Brush Veh	1FDRF3H62KEE37029	50,000	300	300	B305
2020	Chevrolet	Tahoe	1GNSKFEC96R244844	43,108	NA	NA	C300

1989	Hull	Trailer	438US1620KS002593	600	NA	NA	TRLR-7
2008	Karavan/Lowe	Trailer	5KTBS22188F207470	500	NA	NA	TRLR-3
2013	Big T	Trailer	16VAX1210D2A98783	1,475	NA	NA	TRLR-6
2015	Load Trail	Trailer	4ZEUT1420F1078447	1,995	NA	NA	TRLR-4
2015	Haul Rite	Trailer	19BEK1519FCB15093	2,085	NA	NA	TRLR-2
2015	Lamar	Trailer	5RVUT1221FP033608	2,155	NA	NA	TRLR-1
2017	Big T	Trailer	16VAX1013H2030967	1,420	NA	NA	TRLR-5
2018	Doolittle	Trailer	1DGCS0819JM030389	1,550	NA	NA	TRLR-8
2019	Load Trail	Trailer	4ZEUT1622K1175219	2,760	NA	NA	TRLR-9

The following vehicles should be covered in the policy as well:

2002	John Deere	Gator	VG06X4D031074	2,500	NA	NA	U308
2013	Polaris	Ranger	4XAWH7EA6DG692900	14,000	85	50	U3118
2015	Polaris	Ranger	3NSRTE871FG486818	14,000	85	50	U318
2017	Polaris	Ranger	4XARTE876H8558503	14,000	85	50	U358
2015	Polaris	Ranger	3NSRTE877FG887161	14,000	85	50	U368
2013	Mercury	Boat	USA42273D313	9,000			BOAT2
2015	Mercury	Motor	30HP	3,000			
2018	Zodiak	Boat	XMPC993ZK718	9,000			BOAT3
2018	Mercury	Motor	40HP	5,000			

General Liability:

Limits:

\$3,000,000.00 General aggregate
\$3,000,000.00 Products/completed operations aggregate
\$1,000,000.00 Per offense (personal injury & advertising injury)
\$1,000,000.00 Per occurrence (bodily injury & property damage)
\$1,000,000.00 Fire damage legal liability
\$5,000.00 Medical payment (any one person)

No deductible

Minimum coverage requirements:

1. "Occurrence form"
2. Aggregate limit must apply per location
3. Aggregate limit must apply per named insured, if more than one
4. Employees and volunteers must be insured's under the policy while acting on behalf of the named insured
5. Professional health care (medical malpractice) liability must cover all employees and volunteers, whether certified or not
6. "Good Samaritan" liability for employees and volunteers
7. Bodily injury or property damage resulting from intentional acts must be covered, if actions are taken to protect life or property
8. "Host" liquor liability coverage must be included
9. Asbestos related liability at the scene of an emergency must be included
10. Defense costs must be in addition to the limit of liability
11. Pollution liability resulting from training and emergencies
12. Fellow member liability

Management Liability:

Limits:

\$1,000,000.00 Each wrongful act
\$3,000,000.00 Annual aggregate
\$25,000.00 Injunctive relief
\$None Deductible

Minimum Coverage Requirements:

The policy shall apply to liability arising out of an actual or alleged act, error, or omission by or on behalf of the insured in the performance of the insured's operations.

Insured shall be defined as the named insured, any officer or director and any individual member, paid or volunteer

1. Include \$5,000.00 for reimbursement of reasonable legal fees incurred as a result of demands for injunctive relief
2. Include costs for defense outside of the policy limit
3. Include Civil Rights coverage
4. If claims made, the policy shall provide full prior acts coverage

Employment Practices Liability:

Limits:

\$1,000,000.00 Each Occurrence
\$1,000,000.00 Annual Aggregate
Deductible: None

Crime:

Money and Securities

Broad Form: \$10,000.00 inside and outside premises

Position Schedule Bond:

Position	Amount	Faithful Performance
<u>President of the Board</u>	<u>\$1,000.00</u>	<u>Yes</u>
<u>Board Member</u>	<u>\$1,000.00</u>	<u>Yes</u>
<u>Board Member</u>	<u>\$1,000.00</u>	<u>Yes</u>

Named Schedule Bond:

<u>Secretary/Treasurer</u>	<u>\$200,000.00</u>	<u>Yes</u>
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Umbrella/Excess Liability:

Limits:

\$2,000,000.00 Each Occurrence

\$4,000,000.00 Annual Aggregate

\$None Retained Limit on Uninsured/Self-Insured Exposures

Minimum Coverage Requirements:

1. Excess coverage will be provided for the primary liability insurance.
2. Coverage not provided by the primary policy and not excluded by the umbrella shall be afforded primary coverage by the umbrella.
3. Automatic coverage will be provided for primary liability policies whose aggregate limits have been exhausted by a loss.

Workers Compensation:

Coverage & Condition:

1. Statutory limits for the State of Missouri

2. Employers Liability:

\$1,000,000.00 Bodily Injury per Accident

\$1,000,000.00 Bodily Injury by Disease-policy limit

\$1,000,000.00 Bodily Injury by Disease-each employee

3. Classifications:

Firefighters and Drivers #7710 (full and part time) (5 personnel) – Payroll \$251,443.00

Firefighters and Drivers #7711 (volunteers) (106 personnel) – Payroll \$123,468.00

Clerical Office Employees #8810 – Payroll \$34,954.00

Accident and Sickness:

The policy shall provide at least the following benefits:

1. Heart or circulatory malfunctions for members under age 65 and specified conditions of flu, gripe, pneumonia, hernia and back sprain or strain shall be covered the same as any injury
2. Weekly income shall be paid from the first day of injury or sickness
3. Weekly income shall be paid regardless of any other insurance or benefits available to a member for the first thirty (30) days of disability. The disability benefit for the first thirty (30) days shall equal the level purchased. The disability benefit for the second thirty (30) day period shall be the greater of the scheduled benefit or three (3) times the scheduled benefit, not to exceed 100% of the pre-disability income when combined with worker's compensation.
4. Weekly income shall be paid for a period of five (5) years. If the member is still disabled, a permanent impairment payment equal to the death benefit shall be paid to the member
5. The definition of disability shall be the inability to do the substantial and material duties pertaining to his occupation for the entire period of disability
6. When a member suffers a heart or circulatory malfunction as a result of participation in an emergency duty, coverage shall be provided if the member is medically treated within 48 hours of such participation
7. Medical expense benefits shall be excess of any worker's compensation benefits paid
8. Infectious diseases (if medical treatment is received within thirty (30) days after and if a direct result of taking part in an emergency duty)

9. HIV positive benefit equal to the sum of the death benefit payable upon positive diagnosis of the HIV virus within 52 weeks of an emergency duty (subject to testing provisions contained in policy)

See options for coverage amounts:

Accident and Sickness Options/Amounts:

Loss of Life Benefits

Accidental Death/Dismemberment.....	100,000
Additional Seat Belt.....	10,000
Illness Loss of Life Benefit.....	100,000
Dependent Benefit Amount (Per Dependent Child).....	10,000
Spousal Support Benefit Amount.....	5,000
Memorial Benefit Amount.....	2,000

Lump Sum Living Benefits

Permanent Physical Impairment.....	100,000
Vision Impairment Benefit.....	100,000
Cosmetic Disfigurement from Burns.....	100,000
HIV Positive Benefit.....	100,000

Weekly Income Benefits

Total Disability Weekly Income Benefit (first 28 days).....	300
Total Disability Maximum Weekly Amount (after 28 days).....	900
Total Disability Minimum Weekly Amount.....	75
Partial Disability Weekly Income Benefit (first 28 days).....	150
Partial Disability Maximum Weekly Amount (after 28 days).....	450
Partial Disability Minimum Weekly Amount.....	38

Medical Expense Benefit

Medical Expense Maximum Amount.....	10,000
Additional Plastic Surgery Maximum Amount.....	5,000
Critical Incident Stress Benefit Maximum Amount.....	2,500
Post Traumatic Stress Disorder Maximum Amount.....	10,000
Family Expense Benefit.....	100

Hospital Indemnity-Weekly.....300

Additional Weekly Disability.....300

Vendor Identification

Agency submitting bid: _____

Agent who will service the account and location: _____

Principal owners of firm: _____

Number of insurance personnel at office address city above: _____ full-time _____ part time

Number of year's firm has operated: _____ Under current owner(s): _____

What is the complete individual name of the insurance company providing coverage for each policy? A.M. Best Rating?

Property: _____

Rating: _____

Crime: _____

Rating: _____

Portable Equipment: _____

Rating: _____

Automobile: _____

Rating: _____

General Liability: _____

Rating: _____

Umbrella: _____

Rating: _____

Management Liability: _____

Rating: _____

Workers Compensation: _____

Rating: _____

Accident & Sickness: _____

Rating: _____

Rate-Premium Proposal Quotation Form

Type	Premium	Options	Years
Property_____	:_____	:_____	:_____
Crime_____	:_____	:_____	:_____
Portable Equipment_____	:_____	:_____	:_____
Automobile_____	:_____	:_____	:_____
General Liability_____	:_____	:_____	:_____
Umbrella_____	:_____	:_____	:_____
Management Liability_____	:_____	:_____	:_____
Workers Compensation_____	:_____	:_____	:_____
Accident & Sickness_____	:_____	:_____	:_____

Verification:

The undersigned hereby certifies the coverage's cited in this proposal to be in compliance with the Johnson County Fire Protection District proposal specifications unless otherwise stated.

Agency: _____

Signed: _____

Date: _____