

Colony Insurance Company  
8720 Stony Point Parkway, Suite 400  
Richmond, VA 23235

POLICY NUMBER:

PXL 17109502

## PUBLIC ENTITY EXCESS LIABILITY POLICY DECLARATIONS

### SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY

<b>Producing agency and mailing address:</b> Apex Insurance Services, Inc. 201 Concourse Blvd., Suite 260 Glen Allen, VA 23059	<b>Surplus lines agency and mailing address:</b> C&C Risk Services, LLC 1095 Evergreen Circle, Suite 200 The Woodlands, TX 77380
<b>NAMED INSURED:</b> <u>City of Fort Lauderdale</u>	
<b>MAILING ADDRESS:</b> <u>100 N Andrews Avenue, 3<sup>rd</sup> Floor</u> <u>Fort Lauderdale, FL 33301</u>	
<b>POLICY PERIOD: FROM</b> <u>10/01/2017</u> <b>TO</b> <u>10/01/2018</u> <b>AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS</b>	
<b>RENEWAL OF POLICY:</b> <u>ABOVE PXL 16106202</u>	

<b>COVERAGES:</b>	<b><u>Self-Insured Retention</u></b>
General Liability, Employee Benefits and Employers Liability:	\$ 1,000,000 per occurrence
Workers Compensation:	\$ 1,000,000 per occurrence
<b>LIMITS OF INSURANCE:</b>	
\$ 1,000,000 per occurrence/\$ 2,000,000 policy aggregate for General Liability and Employee Benefits Liability	
\$1,000,000 combined single limit for Employers Liability	
Statutory for Workers Compensation	
<b><i>All coverages, except Workers Compensation, contribute to the reduction of the policy aggregate</i></b>	
<b>PREMIUM: \$390,000</b>	

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

Authorized Representative: Craig S. Balcer