



INSURANCE SPECIALISTS

4610 Bluebonnet Blvd., Suite A Baton Rouge, LA 70809 Phone 225/295-2995 Fax 225/368-2145 www.alexsand.com

August 29, 2011

VIA Email: [cindoug@bellsouth.net](mailto:cindoug@bellsouth.net);

Ms. Cindy Henley  
Dammon Engineering, Inc.  
554 Old Spanish Trail  
Slidell, LA 70458

Re: Professional Liability Insurance  
XL Specialty Insurance Company/XL Design Professional

Dear Cindy:

Enclosed are our proposals for the September 6, 2011 renewal of your firm's professional liability coverage. Premium financing is available upon request.

Proposals for coverage through alternate markets are included. One of these carriers, Colony, operates on a surplus line basis in Louisiana and is not subject to protections of the Louisiana Insurance Guaranty Association. A 5% Louisiana Surplus Line Tax applies to all premiums and fees for this carrier.

Since you may be considering a change in insurance companies, any claim situation of which you become aware, in addition to those reported in the application, if any, should be reported immediately to the expiring carrier. Once the current policy expires, it will not respond to claims that have not been reported. You should notify my office of any new claim situation not previously disclosed in the application. If one of the alternate proposals is accepted, the new carrier will provide prior acts coverage for work after the September 6, 2002 retroactive date of your current insurance. However, they will not provide coverage for claim situations of which you have knowledge prior to their effective date.

Congratulations! Completion of the *Lessons in Professional Liability* Education Course has resulted in a 10% reduction of the 2011/12 professional liability premium. This credit is included on the renewal quotation.

Note that the quotes are being offered based on the information provided in the completed application dated August 8, 2011. If there are any changes in this information, the company may withdraw or modify the quotation. Any such changes should be reported to our office immediately.

Please call if you have any questions or when you have reached a decision regarding the renewal.

Kindest regards,

ALEXANDER & SANDERS INSURANCE AGENCY, INC.

A handwritten signature in black ink, appearing to read 'Richard Moeller'.

Richard Moeller  
Account Executive

dcr  
encls



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Date: August 29, 2011

Current Policy Expiration Date: September 6, 2011

Premium Quotation for: Dammon Engineering, Inc.

Carrier: XL Specialty Insurance Company/XL Design Professional (A.M. Best Rating A XV)

**PROFESSIONAL LIABILITY (Claims Made and Reported Coverage)**

Each Claim Limit	Aggregate Limit <sup>1</sup>	Each Claim Deductible <sup>2</sup>	Annual Premium	Less Credits	Net Premium
1,000,000	1,000,000	5,000	22,194	2,219	19,975
1,000,000	1,000,000	10,000	21,899	2,190	19,709

**CREDITS:**

<input checked="" type="checkbox"/> Completed Professional Liability Education Program (PLEP) <i>Lessons in Professional Liability</i>	10 %
<input type="checkbox"/> Limitation of Liability in Contracts	_____ %

**THESE QUOTATIONS SUBJECT TO:**

- Underwriter's suggests that you insert a disclaimer when contracting design without review
- Excluded Entity endorsement: DSDSD, LLC
- Professional, Environmental and Network Security Liability policy form LDD 050 0809
- Anniversary Date: September 6, 2002
- Other terms and conditions of the expiring policy

**EXCLUDES COVERAGE FOR SERVICES PRIOR TO RETROACTIVE DATE OF: September 6, 2002**

<sup>1</sup>The aggregate limit is the annual policy maximum for all damages and/or expenses payable for all claims made during the policy year.

<sup>2</sup>The deductible applies per claim to damages paid and defense cost.

This claims made policy covers only those claims that are made against you and reported to the insurance company during the term of the insurance policy, provided that you had no knowledge of the claim, or act, error or omission or circumstance prior to the effective date of this policy.

Information contained herein is for identification purposes only. Refer to the policy for actual terms and conditions. This quotation is valid for 30 days from above date or until expiration date of current policy if earlier.

J. Murphy – underwriter

dcr



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ALTERNATE PROPOSAL

Date: August 29, 2011

Current Policy Expiration Date: September 6, 2011

Premium Quotation for: Dammon Engineering, Inc.

Carrier: Hudson Insurance Company/Arrowhead Design Insurance Division (A.M. Best Rating A XV)

PROFESSIONAL LIABILITY (Claims Made and Reported Coverage)

Table with 5 columns: Per Claim Limit, Aggregate Limit, Per Claim Deductible, Premium, First Dollar Defense. Two rows of data.

THESE QUOTATIONS SUBJECT TO:

- Submission of a completed Employment Practices Liability Questionnaire to obtain a quotation for that coverage endorsement option
• Excluded Entity endorsement: DSDSD, LLC
• Prior Acts Coverage Limitation
• Named Insured Endorsement
• Service of Suit Clause
• Engineers & Environmental Services Policy Form ADI0510002
• Other terms and conditions of policy form

EXCLUDES COVERAGE FOR SERVICES PRIOR TO RETROACTIVE DATE OF: September 6, 2002

1 The aggregate limit is the annual policy maximum for all damages and/or expenses payable for all claims made during the policy year.

2 The deductible applies per claim to damages paid and defense cost.

3 With the First Dollar Defense Endorsement the insurance company pays 100% of the defense cost, subject to the per claim limit.

This claims made policy covers only those claims that are made against you and reported to the insurance company during the term of the insurance policy, provided that you had no knowledge of the claim, or act, error or omission or circumstance prior to the effective date of this policy.

Information contained herein is for identification purposes only. Refer to the policy for actual terms and conditions. This quotation is valid for 30 days from above date or until expiration date of current policy if earlier.

J. Hafner - underwriter

dcr



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ALTERNATE PROPOSAL

Date: August 29, 2011

Current Policy Expiration Date: September 6, 2011

Premium Quotation for: Dammon Engineering, Inc.

Carrier: Catlin Insurance Company, Inc. (AM Best Rating A XV)

PROFESSIONAL LIABILITY (Claims Made and Reported Coverage)

Table with 4 columns: Each Claim Limit, Aggregate Limit, Each Claim Deductible, Annual Premium. Row 1: 1,000,000, 1,000,000, 10,000, 20,888

THIS QUOTATION SUBJECT TO:

- SUBMISSION OF RESUMES OF FIRM PRINCIPALS, FIRM'S TYPICAL CONTRACT FOR PROFESSIONAL SERVICES AND NO KNOWN CLAIMS LETTER SIGNED BY A PRINCIPAL OR OFFICER OF THE FIRM
Entity Exclusion endorsement: DSDSD, LLC
Reliance on Another Insurance Company's Application
Louisiana Changes Endorsement
Professional and Pollution Liability Policy for Design Professionals Policy Form DPAE050 0908
Other terms and conditions of policy form

EXCLUDES COVERAGE FOR SERVICES PRIOR TO RETROACTIVE DATE OF: September 6, 2002

1The aggregate limit is the annual policy maximum for all damages and/or expenses payable for all claims made during the policy year.

2The deductible applies per claim to damages paid and defense cost.

This conditional indication is issued upon the reliance of the information submitted to Catlin by the applicant. By accepting this indication, 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.

This claims made policy covers only those claims that are made against you and reported to the insurance company during the term of the insurance policy, provided that you had no knowledge of the claim, or act, error or omission or circumstance prior to the effective date of this policy.

Information contained herein is for identification purposes only. Refer to the policy for actual terms and conditions. This quotation is valid for 30 days from above date or until expiration date of current policy if earlier. The company has the right to retract, restrict, modify, amend or change any part of this proposal for any reason upon receipt or failure to receive unsatisfactory information.

J. Efke - underwriter

dcr



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**ALTERNATE PROPOSAL**

**Date: August 29, 2011**

**Current Policy Expiration Date: September 6, 2011**

**Premium Quotation for: Dammon Engineering, Inc.**

**Carrier: Colony Insurance Company/Argo Group (AM Best Rating A)**

**PROFESSIONAL LIABILITY (Claims Made and Reported Coverage)**

Per Claim Limit	Aggregate Limit <sup>1</sup>	Per Claim Deductible <sup>2</sup>	Premium	Surplus Lines Tax	Total	First Dollar Defense <sup>3</sup>
1,000,000	1,000,000	10,000	15,841	792.05	16,633.05	710 + tax
2,000,000	2,000,000	10,000	19,067	953.35	20,020.35	710 + tax

**THESE INDICATIONS SUBJECT TO:**

- **SUBMISSION AND APPROVAL OF COMPLETED, SIGNED AND CURRENTLY DATED ARGO PRO APPLICATION AND LOSS RUNS SINCE FIRM WAS FIRST INSURED**
- **Specific Entity Exclusion endorsement: DSDSD, LLC**
- **5% Louisiana Surplus Line Tax**
- **Exclusion of coverage for claims and/or circumstances reported in the application**
- **Service of Suit endorsement**
- **Policy form INAE0001-0708**
- **Other terms and conditions of policy form**

**EXCLUDES COVERAGE FOR SERVICES PRIOR TO RETROACTIVE DATE OF: September 6, 2002**

<sup>1</sup> The aggregate limit is the annual policy maximum for all damages and/or expenses payable for all claims made during the policy year.

<sup>2</sup> The deductible applies per claim to damages paid and defense cost.

<sup>3</sup> With the First Dollar Defense Option the insurance company pays 100% of the defense cost, subject to the policy limits.

This claims made policy covers only those claims that are made against you and reported to the insurance company during the term of the insurance policy, provided that you had no knowledge of the claim, or act, error or omission or circumstance prior to the effective date of this policy.

This carrier operates on a Surplus Line basis in Louisiana, and is not subject to protections of the Louisiana Guaranty Fund. A 5% Louisiana Surplus Line Tax applies to all premiums and fees.

Information contained herein is for identification purposes only. Refer to the policy for actual terms and conditions. This quotation is valid for 30 days from above date or until expiration date of current policy if earlier.

R. Schmidt – underwriter

dcr



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## IMPORTANT NOTICE

Enclosed is a list of your outstanding Certificate Holders. Please review and let us know which are needed for your current renewal term.

Be sure to note any known changes of name, address, or other pertinent information so that we may most efficiently report current policy status to your clients.

Also attached is a blank form for your use in requesting new certificates.

Please direct this to the appropriate person in your firm.

# Certificate Holder List Report For Dammon Engineering, Inc.

DATE: JUL 5 2011

PAGE: 1

Certificate Holder / Description or Operations...	Issue Date	Certificate #	Notice
City of Slidell P.O. Box 828 Slidell, LA 70459	FEB 18 2011 RE: 5000-21	32113	30
St. Tammany Parish Government Office of Risk Management P.O. Box 628 Covington, LA 70434	FEB 2 2011 RE: Towers Building Renovations 06-009-1	31840	30

# REQUEST FOR CERTIFICATE OF INSURANCE

RETURN COMPLETED FORM TO:

ALEXANDER & SANDERS INSURANCE  
4610 Bluebonnet Blvd., Suite A, Baton Rouge, LA 70809  
Phone: (225) 295-2995 Fax: (225) 368-2145 Email: [info@alexsand.com](mailto:info@alexsand.com)

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

This Certificate needs to be delivered by: \_\_\_\_\_ AM or PM

*Please issue a Certificate of Insurance to:*

Certificate Holder Name: \_\_\_\_\_

To the Attention of (if applicable): \_\_\_\_\_

Certificate Holder Mailing Address: \_\_\_\_\_

**REQUIRED**

Project Description/Number (if applicable): \_\_\_\_\_

**FOR IDENTIFICATION PURPOSES ONLY**

*Please indicate the following coverages on the Certificate:*

**DO NOT CHECK COVERAGES THAT THIS AGENCY DOES NOT HANDLE FOR YOUR FIRM**

- |   |  |
|---|--|
| <input type="checkbox"/> Professional Liability | Current Limits to be shown, unless stated otherwise  |
| <input type="checkbox"/> General Liability      | <input type="checkbox"/> Show Additional Insured <input type="checkbox"/> Show Waiver of Subrogation |
| <input type="checkbox"/> Auto Liability         | <input type="checkbox"/> Show Additional Insured <input type="checkbox"/> Show Waiver of Subrogation |
| <input type="checkbox"/> Worker's Compensation  | <input type="checkbox"/> Show Waiver of Subrogation  |
| <input type="checkbox"/> Umbrella Liability     |  |

Email Certificate to: \_\_\_\_\_

Certificates will be sent via email to all address(s) listed here

Mail Certificate to: \_\_\_\_\_

(via US Post Office)

If requested, Certificates can be mailed to the Certificate Holder and/or the Insured

Special Cancellation Notice or Other Provisions/Instructions: \_\_\_\_\_

Note: Certificates cannot be issued without approval of the insured firm. If your client/prospect contacts Alexander & Sanders directly and requests a certificate of your insurance, we will contact you for authorization before releasing any information. **Requests will be processed in the order in which they are received. Please allow adequate processing time.**