



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

August 23, 2016

VIA Email: cindy@dammonengineering.com

Ms. Cindy Robison
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 Septemeber 6, 2016 renewal of your firm's professional liability coverage. Premium financing is available upon request.

Our records indicate you have not completed the *Contract Review: Focus on Liability* education program. Successful completion by all principals of the firm PRIOR to September 6, 2016 will result in a 10% reduction of the 2016/17 premium. If you have not already done so, we urge you to get started right away. Let us know if we can be of any assistance in this endeavor.

Note that the quotes are being offered based on the information provided in the completed application dated July 25, 2016. 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. You should also advise of any known claim situations that have not previously been disclosed. Failing to promptly report any known claims or potential claims situations may void your insurance coverage.

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

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encls



INSURANCE SPECIALISTS

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

Date: August 23, 2016

Current Policy Expiration Date: September 6, 2016

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 ¹	Each Claim Deductible ²	Annual Premium	PENDING Credits**
1,000,000	1,000,000	5,000	24,262	2,426
1,000,000	2,000,000	5,000	25,891	2,589
2,000,000	2,000,000	5,000	29,213	2,921

CREDITS:

_____ Completed Professional Liability Education Program (PLEP) <i>per binding condition below**</i>	_____ %
_____ Limitation of Liability in Contracts	_____ %

THESE QUOTATIONS SUBJECT TO:

- ****SUCCESSFUL COMPLETION OF THE CONTRACT REVIEW: FOCUS ON LIABILITY EDUCATION PROGRAM PRIOR TO BINDING TO RECEIVE 10% PREMIUM CREDIT INDICATED ABOVE**
- Individual Notice of Cancellation endorsement: City of Slidell
- Excluded Entity endorsement: DSDSD, LLC
- Amended Definition of Damages endorsement
- Enhanced Professional Services endorsement
- Crisis Management Elite endorsement
- Professional, Environmental and Network Security Liability policy form LDD 050 0809
- Anniversary Date: September 6, 2006
- Other terms and conditions of the expiring policy

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 claims made policy contains an **Anniversary Date** as listed above. As a condition of the policy form, coverage is not provided for any circumstance, or act, error or omission or potential claim situation(s) that you have knowledge of prior to this date.

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 prior to the **Effective Date** of this policy arising from professional services performed subsequent to the **Retroactive Date**.

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.

S. Marable – underwriter

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Certificate Holder List
9/3/2015 to 8/23/2016

Dammon Engineering, Inc.

Certificate Number/Description: CL159301954 MC 15/16**Certificate Holder:** Chenier Property Partners, LLC**Contact:****Address:** 3525 N. Causeway Blvd. Suite 301**City, State, Zip:** Metairie, LA 70002**Fax Number:****Email:****Description of Operations/Special Conditions:**

RE: Project: Renovate an existing building into a dental office.

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.

Certificate Number/Description: CL159301954 MC 15/16**Certificate Holder:** City of Slidell**Contact:****Address:** P.O. Box 828**City, State, Zip:** Slidell, LA 70459**Fax Number:****Email:****Description of Operations/Special Conditions:**

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.

Certificate Number/Description: CL159301954 MC 15/16**Certificate Holder:** Robert Wolfe**Contact:****Address:** 868 Behrman Hwy**City, State, Zip:** Gretna, LA 70056**Fax Number:****Email:****Description of Operations/Special Conditions:**

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.

Certificate Number/Description: CL159301954 MC 15/16**Certificate Holder:** Rotolo Consultants, Inc**Contact:** Rhonda Plulinski**Address:** 984 Robert Blvd.**City, State, Zip:** Slidell, LA 70458**Fax Number:****Email:** rhondap@rotoloconsultants.com**Description of Operations/Special Conditions:**

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.

Certificate Holder List
9/3/2015 to 8/23/2016**Certificate Number/Description:** CL159301954 MC 15/16**Certificate Holder:** Slidell Refrigeration & Metal Fabricators**Contact:** Scott Morrison**Address:** 1543 US-190**City, State, Zip:** Slidell, LA 70460**Fax Number:****Email:** scott@slidellrefrigeration.com**Description of Operations/Special Conditions:**

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.

Certificate Number/Description: CL159301954 MC 15/16**Certificate Holder:** St. Tammany Parish Government**Contact:** Risk Management**Address:** P.O. Box 628**City, State, Zip:** Covington, LA 70434**Fax Number:****Email:****Description of Operations/Special Conditions:**

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.
RE: Koop Campus Building B Buildout

Certificate Number/Description: CL159301954 MC 15/16**Certificate Holder:** St. Tammany Parish Public Schools**Contact:** Attn: Cameron Tipton**Address:** 321 Theard St.**City, State, Zip:** Covington, LA 70433**Fax Number:****Email:****Description of Operations/Special Conditions:**

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Certificate Number/Description: CL159301954 MC 15/16**Certificate Holder:** St. Tammany Parish Public Schools**Contact:****Address:** 321 Theard St.**City, State, Zip:** Covington, LA 70433**Fax Number:****Email:****Description of Operations/Special Conditions:**

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.

Certificate Holder List
9/3/2015 to 8/23/2016**Certificate Number/Description:** CL159301954 MC 15/16**Certificate Holder:** State of Louisiana Facility Planning & Control**Contact:****Address:** P.O. Box 94095 Claiborn Building**City, State, Zip:** Baton Rouge, LA 708049095**Fax Number:****Email:****Description of Operations/Special Conditions:**

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.
RE: Project No. 08-403-11-01, Part 01

Certificate Number/Description: CL159301954 MC 15/16**Certificate Holder:** State of Louisiana Facility Planning & Control**Contact:** Denise Brumfield**Address:** P.O. Box 94095**City, State, Zip:** Baton Rouge, LA 70804**Fax Number:****Email:****Description of Operations/Special Conditions:**

CONSULTING ENGINEER - FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR ALL COVERED CLAIMS PRESENTED WITHIN THE POLICY PERIOD. THE LIMIT WILL BE REDUCED BY PAYMENTS OF INDEMNITY AND EXPENSE.
RE: BCCY
30 day Notice of Cancellation Endorsement has been requested in accordance with the previously attached form for the Professional Liability Policy.