QBE Specialty Insurance Company
55 Water Street, New York, New York 10041
Home Office: c/o CT Corporation System, 314 East Thayer Avenue, Bismarck, North Dakota 58501

PUBLIC OFFICIALS AND EMPLOYMENT LIABILITY COVERAGE (CLAIMS MADE BASIS)

Policy No.: QJC01018-05 **Renewal of: QJC01018-04**

DECLARATIONS

Item 1. **Insured Public Entity:**

Township of Medford
17 North Main Street
Medford, NJ 08055

Lead Agent:

Burlington County Municipal
Joint Insurance Fund
Attn: Paul Miola
Arthur J. Gallagher Risk Management Services, Inc.
6000 Sagemore Drive, Suite 6203
Marlton, NJ 08053-0436

Item 2. **Limits of Liability:**

(A)	$2,000,000	Standard: Combined Single Limit per **Claim** (except **Land Use Claims**) and Annual Aggregate.
(B)	$25,000	for defense only of **Claims** based on civil union and or marriage.
(C)	$1,000,000	**Land Use Claim** Limit per **Claim.**

Note that the **Limits of Liability** and **Retention Amount** are reduced or exhausted by **Defense Costs**.

Item 3. **Coinsurance Contribution Percentage and Loss Amount**:

The Coinsurance Percentages apply to the Loss Amounts below.

		Insured Percentage	**Company** Percentage	Loss Amount
(A)	Any covered **Claim** other than a **Claim** arising out of a **Wrongful Employment Practice** or a **Land Use Claim**	20%	80%	$250,000
(B)	**Claim** arising out of a **Wrongful Employment Practice**	20%	80%	$250,000
(C)	**Land Use Claim**	20%	80%	$1,000,000

Item 4. **Retention Amount:**

(A)	Any covered **Claim** other than a **Claim** arising out of a **Wrongful Employment Practice** or a **Land Use Claim**	$20,000
(B)	**Claim** arising out of a **Wrongful Employment Practice**	$20,000
(C)	**Land Use Claim**	$20,000

Item 5. **Coverage Period:** Effective Date: **January 1, 2021**
Expiration Date: **January 1, 2022**

each at 12:01 a.m. Standard Time at the address of the **Public Entity** as stated herein.

Item 6. **Extended Reporting Period:**

(A)	Additional Assessment:	200% of Annual Assessment
(B)	Additional Period:	12 Months
(C)	Insured Notification Period:	30 Days

Item 7. **Public Officials Liability Retroactive Date:**

1. Provide "full prior acts" coverage to members with five continuous years of membership.
2. Provide "full prior acts" coverage to new members who have full prior acts coverage in force at time of membership.
3. Provide prior acts to the existing retroactive date (defined as the retroactive date identified in their expiring or prior policy) for new members that do not have full prior acts coverage or a one year retroactive date, whichever is greater.

Item 8. **Employment Liability Retroactive Date:**

1. Members as of 1/1/1997 will have a uniform retroactive date of 10/1/1993. The members' respective retention and coinsurance contribution in effect at the time the **claim** is made will apply. This is based on whether or not the member has an **approved loss control/risk management plan** in place.
2. Members with effective dates after 1/1/1997 with prior Employment Liability coverage will have a retroactive date of 10/1/1993. All new members with prior coverage will have a six (6) month grace period for approval of a loss control/risk management plan in order to maintain the lower retention and the lower coinsurance contribution.
3. Members with effective dates after 1/1/1997 with no prior Employment Liability coverage will have a retroactive date that is the same as the date of membership. All new members with no prior coverage will have the higher retention and higher coinsurance percentage until their loss control/risk management program is submitted and approved.

Item 9. **Notice of Claim to be given to:**

Summit Risk Services
Attn: Alice Ivers
120 Gibraltar Road, Suite 210
Horsham, PA 19044
Email: newfundclaim@summitrisk.com
Phone: 215-443-3598 Fax: 215-773-7725

Item 10. **Endorsements:** Forms and Endorsements attached at issuance:

PRU-PO-400001-NJ (02-19) – New Jersey Surplus Lines Stamp
PRU-PO-100001-NJ (05-18) – Public Officials and Employment Liability Coverage Form
PRU-IL-2001-NJ (04-20) – Service of Process Clause – New Jersey

Item 11. **Warranty:** It is represented and warranted that with regard to a **Claim** arising out of a **Wrongful Employment Practice**, the statements contained in the written application regarding

employment liability, a copy of which is on file at the offices of QBE Specialty Insurance Company, hereinafter referred to as the **Company**, and the Declarations, are reaffirmed as of the Effective Date of this policy, and are the basis of employment coverage under the policy and are considered as incorporated in and constituting part of this policy.

Item 12. **Annual Premium:** $70,582

This Declarations Page is issued with, and forms a part of, the PUBLIC OFFICIALS AND EMPLOYMENT LIABILITY COVERAGE POLICY.

Todd Jones
President

Mark Pasko
Secretary