

# COMMERCIAL GENERAL LIABILITY DECLARATIONS

## SAFETY NATIONAL CASUALTY CORP

ST. LOUIS, MO 63146  
(888) 995-5300

## COMMERCIAL GENERAL LIABILITY COVERAGE FORM DECLARATIONS

Policy Number	Policy Period	
	From	To
GLE4056889	06/01/2021	06/01/2022
12:01 A.M. Standard Time at the described location		
Previous Policy Number: GLE4056889		

<b>Transaction</b>	
Renewal	
Named Insured and Address	Agent
COUNTY OF WAKE PO BOX 550 RALEIGH, NC 27602	60518 USI Insurance Services LLC P O BOX 97787 RALEIGH, NC 27624-7787  Telephone:
Business Description	Type of Business
COUNTY GOVT INCLUDING EMS, SHERIFF, JAILS	GOVERNMENTAL UNIT

**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.**

LIMITS OF INSURANCE		
EACH OCCURRENCE LIMIT	\$ 2,000,000	Combined BI & PD
DAMAGE TO PREMISES RENTED TO YOU LIMIT	\$ 500,000	Any one premises
MEDICAL EXPENSE LIMIT	N/A - No Coverage	Any one person
PERSONAL & ADVERTISING INJURY LIMIT	\$ 2,000,000	Any one person or organization
GENERAL AGGREGATE LIMIT		\$ 4,000,000
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT		\$ 4,000,000

DESCRIPTION OF BUSINESS	
FORM OF BUSINESS:	
<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> PARTNERSHIP
<input type="checkbox"/> JOINT VENTURE	<input type="checkbox"/> TRUST
<input type="checkbox"/> LIMITED LIABILITY COMPANY	<input checked="" type="checkbox"/> ORGANIZATION, INCLUDING A CORPORATION (BUT NOT INCLUDING A PARTNERSHIP, JOINT VENTURE OR LIMITED LIABILITY COMPANY)
BUSINESS DESCRIPTION: <u>COUNTY GOVT INCLUDING EMS, SHERIFF, JAILS</u>	

**SAFETY NATIONAL CASUALTY CORP**  
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**COMMERCIAL GENERAL LIABILITY DECLARATIONS**

Policy Number:	GLE4056889
Named Insured:	COUNTY OF WAKE
Agent:	USI Insurance Services LLC
Effective Date:	06/01/2021

ALL PREMISES YOU OWN, RENT OR OCCUPY	
LOCATION NUMBER	ADDRESS OF ALL PREMISES YOU OWN, RENT OR OCCUPY
Schedule on File with Company	See Schedule on File with Company

CLASSIFICATION AND PREMIUM							
LOCATION NUMBER	CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE		ADVANCE PREMIUM	
				Prem/Ops	Prod/Comp Ops	Prem/Ops	Prod/Comp Ops
Schedule on file with Company	Governmental Subdivision-not state or fed Counties, Parishes Population>250,000	44113	Total Operating Expenses			\$65,533	Included
TOTAL PREMIUM (SUBJECT TO AUDIT)						\$ 65,533	
STATE SURCHARGES (if applicable)							
TOTAL DUE AT INCEPTION:						\$ 65,533	
AT EACH ANNIVERSARY							
(IF POLICY PERIOD IS MORE THAN ONE YEAR AND PREMIUM IS PAID IN ANNUAL INSTALLMENTS)							
AUDIT PERIOD (IF APPLICABLE)		<input type="checkbox"/> ANNUALLY	<input type="checkbox"/> SEMI-ANNUALLY	<input type="checkbox"/> QUARTERLY	<input type="checkbox"/> MONTHLY		

ENDORSEMENTS
ENDORSEMENTS ATTACHED TO THIS POLICY:
See Attached Schedule of Forms and Endorsements

**THESE DECLARATIONS, TOGETHER WITH THE COMMON POLICY CONDITIONS AND COVERAGE FORM(S) AND ANY ENDORSEMENT(S), COMPLETE THE ABOVE NUMBERED POLICY.**

Countersigned:	By:
(Date)	(Authorized Representative)

# SCHEDULE OF FORMS AND ENDORSEMENTS

**SAFETY NATIONAL CASUALTY CORP**  
 ST. LOUIS, MO 63146  
 (888) 995-5300

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COUNTY OF WAKE PO BOX 550 RALEIGH, NC 27602	USI Insurance Services LLC P O BOX 97787 RALEIGH, NC 27624-7787  Telephone:

Form Number	Form Title
PN 99 02 0209	Privacy Statement
CP 99 03 05 19	Commercial Policy Cover
CG 10 01 11 09	Commercial General Liability Declarations
IL 10 06 12 08	Schedule Of Forms And Endorsements
IL N 001 09 03	Fraud Statement
IL P 001 01 04	U.S. Treasury Dept's Office Of Foreign Assets Control
SNGL 004 1111	Amended Definition Of Bodily Injury
SNGL 044 0514	Asbestos Exclusion
CG 21 70 01 15	Cap On Losses from Certified Acts of Terrorism
SNGL 012 1209	Co-Employee Exclusion Deleted
IL 10 05 12 08	Common Policy Change Endorsement
SNGL 053 0514	Deletion Of Premium Audit Condition
SNGL 022 1111	Designated Additional Insured
IL 09 85 12 20	Disclosure Pursuant To Terrorism Risk Insurance Act
SNGL 002 0908	ERISA Exclusion
CG 02 24 10 93	Earlier Notice Of Cancellation Provided By Us
SNGL 054 0514	Employee Benefits Liability Coverage With Self-Insured
CG 21 47 12 07	Employment-Related Practices Exclusion
CG 21 07 05 14	Exclusion - Access or Disclosure of Confidential or Per
CG 21 35 10 01	Exclusion - Coverage C - Medical Payments
CG 22 50 04 13	Exclusion - Failure To Supply
CG 22 56 07 98	Exclusion - Injury To Volunteer Firefighters
CG 22 51 07 98	Exclusion - Law Enforcement Activities
CG 21 67 12 04	Fungi Or Bacteria Exclusion
CG 24 09 07 98	Governmental Subdivisions
SNGL 043 0514	Lead Contamination Exclusion
IL 00 21 09 08	Nuclear Energy Liability Exclusion End (Broad Form)
SNGL 024 1111	Self-Insured Retention Endorsement
CG 21 96 03 05	Silica Or Silica-Related Dust Exclusion
SNGL 050 0514	Special Notice Of Cancellation Service Provided To Spec
CG 21 65 12 04	Total Pollution Excl With A Building Heating Cooling
SNGL 021 1111	Unintentional Failure To Disclose Hazards Or Occurrence
CG 24 04 12 19	Waiver Of Transfer Of Rights Of Recovery Against Others
IL 02 69 09 08	North Carolina Changes - Cancellation And Nonrenewal
IL 00 17 11 98	Common Policy Conditions

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CG 00 01 04 13

Commercial General Liability Coverage Form