

Safety Specialty Insurance Company
1832 Schuetz Road
St. Louis, MO 63146
1-888-995-5300

LAW ENFORCEMENT LIABILITY DECLARATIONS

SURPLUS LINES BROKER: USI Insurance Services LLC

POLICY NUMBER: SLE6675617

SURPLUS LINES BROKER NUMBER: 8676982

RENEWAL OF: SLE6675617

NOTICE: THIS IS A SURPLUS LINES POLICY, ISSUED BY A NON-ADMITTED INSURER, AND IS NOT PROTECTED BY THE DEPARTMENT OF INSURANCE OR GUARANTY ASSOCIATION.

NOTICE: THIS FORM PROVIDES COVERAGE ON AN OCCURRENCE BASIS. PLEASE REVIEW THE POLICY CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENT OR BROKER.

ITEM 1. Named Insured and Mailing Address

COUNTY OF WAKE
PO BOX 550
RALEIGH, NC 27602

ITEM 2. a. Policy Period From: 06/01/2021
(12:01 am standard time at your address)

b. Policy Period To: 06/01/2022
(12:01 am standard time at your address)

ITEM 3. Limit of Liability \$2,000,000 Each **Wrongful Act**
\$2,000,000 Policy Aggregate

ITEM 4. Self-Insured Retention \$1,000,000 Each **Wrongful Act,**
including **Claims Expenses**

ITEM 5. Total Advance Premium \$46,467

ITEM 6. Minimum Earned Premium \$46,467

ITEM 7. Notification

Notice to the **Company** under this policy should be given to:
COUNTY OF WAKE (919) 856-5500

ITEM 8.

Forms and Endorsements attached to the policy at inception:

Form Number	Form Title
PEPN01 0416	Privacy Statement
IL N 001 0903	Fraud Statement
IL P 001 0104	U.S. Treasury Department's Office Of Foreign Assets Control ("OFAC") Advisory Notice To Policyholders
SNIL PN 001 09 0509	Important Notice
PEPNNC01 1215	North Carolina Disclosure Notice
ILNONSTACK 0416	Non-Stacking Of Limits Endorsement
ILSIR 0716	Self-Insured Retention Endorsement
MECHANGE 1215	Manuscript Change Endorsement
MECHANGE 1215	Manuscript Change Endorsement
MECHANGE 1215	Manuscript Change Endorsement
LELPOF 0416	Law Enforcement Liability Coverage Form - Occurrence Form

Date

Authorized Signature