

WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY

EXTENSION OF INFO PAGE-SCHEDULE WC 00 00 01 (A)

POLICY NUMBER: UB-6N259033-22-14-G

INSURER: THE CHARTER OAK FIRE INSURANCE COMPANY

INSURED'S NAME: CHAMPLAIN COLLEGE INCORPORATED 15318-IA

RATE BUREAU ID: 911451999

EXP. MOD. EFFECTIVE DATE: 02-15-22

PREMIUM BASIS

ESTIMATED RATES ESTIMATED

TOTAL ANNUAL PER \$100 OF ANNUAL

CLASSIFICATION CODE REMUNERATION REMUNERATION PREMIUM

LOCATION 001

FEIN 030220266 ENTITY CD 001 00

CHAMPLAIN COLLEGE INCORPORATED

IA- NO BUSINESS LOCATION

COLLEGE: PROFESSIONAL 8868 68203.00 0.53 361

EMPLOYEES & CLERICAL

IA MANUAL PREMIUM \$ 361

0.80% EMPL. LIAB. INCREASED LIMITS(9807) \$ 3

TOTAL PREMIUM SUBJECT TO EXPERIENCE MOD. 364
EXPERIENCE MODIFICATION: 0.65 MODIFIED PREMIUM 237
TOTAL ESTIMATED ANNUAL STANDARD PREMIUM 237

-4.60% PREMIUM DISCOUNT(0063) -11 TERRORISM(9740) 7

CAT (OTHER THAN CERT ACTS OF TERRORISM) (9741) 7
TOTAL ESTIMATED PREMIUM 240

TOTAL ESTIMATED PREMIUM 240
TOTAL PREMIUM 240
DEPOSIT AMOUNT DUE 240

DATE OF ISSUE: 02-14-22 LL SCHEDULE NO: 1 OF 1

IMPORTANT NOTICE – SOLE PROPRIETORS, PARTNERS, LIMITED LIABILITY COMPANY MEMBERS AND LIMITED LIABILITY PARTNERS – IOWA

NO COVERAGE IS PROVIDED BY THIS NOTICE. THIS NOTICE DOES NOT AMEND ANY PROVISION OF YOUR POLICY. YOU SHOULD REVIEW YOUR ENTIRE POLICY CAREFULLY FOR COMPLETE INFORMATION ON THE COVERAGES PROVIDED AND TO DETERMINE YOUR RIGHTS AND DUTIES UNDER YOUR POLICY. PLEASE CONTACT YOUR AGENT OR BROKER IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE OR ITS CONTENTS. IF THERE IS ANY CONFLICT BETWEEN YOUR POLICY AND THIS NOTICE, THE PROVISIONS OF YOUR POLICY PREVAIL.

In the state of Iowa, sole proprietors, partners, limited liability company members and limited liability partners are not automatically covered by the workers compensation laws of the state unless they purchase valid coverage that specifically endorses that person on to the policy.

If you are a sole proprietor or have partners, limited liability company members or limited liability partners who elect to remain excluded from workers compensation coverage, the state of lowa mandates that the nonelection form be completed online at https://www.iowaworkcomp.gov/nonelection-workers-compensation-or-employers-liability-coverage.