

Leading to Meet the Growing Public Safety Needs of our Regional Communities Leadership - Integrity - Trust - Respect - Excellence

Board of Commissioners Regular Meeting Agenda February 6, 2024

Attendance

7:00 PM

In Person at Headquarters and Zoom Virtual Meeting ID 861 5293 4763

- 1. CALL TO ORDER (7:00 p.m.)
- 2. PLEDGE OF ALLEGIANCE (7:01 p.m.)
- 3. APPROVAL OF AGENDA (7:02 p.m.)
- 4. CONSENT AGENDA (7:04 p.m.)
 - a. Payroll Summary and Authorization for December 2023
 - b. Payroll Summary and Authorization for January 2024
 - c. Claims Voucher totaling \$1,377,360.69

5. APPROVAL OF MEETING MINUTES (7:06 p.m.)

- a. January 2, 2024 Regular Meeting
- b. January 16, 2024 Regular Meeting
- 6. PUBLIC COMMENT Notice: All public comment are public records and may be subject to disclosure pursuant to the Public Records Act, RCW Chapter 42.56. (7:08 p.m.)
- 7. FIRE CHIEF REPORT (7:17 p.m.)
- 8. LEGAL REPORT (7:22 p.m.)
- 9. UNION REPORT (7:27 p.m.)
- 10. UNFINISHED BUSINESS (7:32 p.m.)
 - a. Continued Discussion on Fire Marshal/Fire Code Official Duties within South County Fire Boundaries - Assistant Chief Bob Eastman
 - b. Amendment to SCF Policy Article 400.180.0 Vacation for Discussion -

Human Resources Director David Cullen

11. NEW BUSINESS (7:50 p.m.)

- a. Establish 2024 Benefit Charge Appeals Deadline and Appeals Board Chief Financial Officer Chris Bothwell
- b. 2024 General and Excess Liability Insurance Policy Renewal for Action -Chief Financial Officer Chris Bothwell
- c. Public Comment Policy and Protocol for Discussion and Potential Action -Chair Micah Rowland

12. COMMITTEE UPDATES (8:30 p.m.)

- a. Capital Facilities
- b. Finance and Human Resources
- c. Intergovernmental
- d. SNO911 Commissioner Michael Fearnehough

13. COMMISSIONER COMMENTS (8:40 p.m.)

14. EXECUTIVE SESSION (8:50 p.m.)

- a. Review the Performance of a Public Employee Pursuant to RCW 42.30.110(1)(g)
- b. To Consider the Selection of a Site or the Acquisition of Real Estate by Lease or Purchase Pursuant to RCW 42.30.110(1)(b)(c)

15. ADJOURNMENT (9:50 p.m.)

16. AGENDA DISCLAIMER - Members of the public are advised that times listed on the agenda are approximate and that items on the agenda may be addressed sooner or later than the time specified.

South County Fire strives to provide accessible opportunities for all members of the public. Please notify the Board Executive Assistant at 425-551-1251 or mblankenship@southsnofire.org at least 48 hours prior to any South County Fire meeting if any accommodations are needed.



PAYROLL SUMMARY AND AUTHORIZATION FOR: December 2023

I, the undersigned, do hereby certify that the foregoing payroll is just, true and correct, that the persons whose names appear thereon actually performed labor for the month stated above.

	Pay Date	Total
Total Payroll Expense	12/7/2023	\$ 20,616.08
Total Payroll Expense	12/15/2023	\$ 3,362,678.03
Total Payroll Expense	12/29/2023	\$ 2,863,188.17

TOTAL PAYROLL EXPENSE \$6,246,482.28

Prepared by: _____

Finance Manager

Allowed in the sum of:

\$6,246,482.28

Signed this:

February 1, 2024

Approved by the Chair: _____



PAYROLL SUMMARY AND AUTHORIZATION FOR: January 2024

I, the undersigned, do hereby certify that the foregoing payroll is just, true and correct, that the persons whose names appear thereon actually performed labor for the month stated above.

	Pay Date	Total
Total Payroll Expense	1/12/2024	\$ 4,993,490.83
Total Payroll Expense	1/25/2024	\$ 14,438.02
Total Payroll Expense	1/31/2024	\$ 2,889,495.64

TOTAL PAYROLL EXPENSE \$7,897,424.49

Prepared by: _______ Aurora Belli

Finance Manager

Allowed in the sum of:

\$7,897,424.49

Signed this:

February 1, 2024

Approved by the Chair: _____



SOUTH SNOHOMISH COUNTY FIB 12425 MERIDIAN AVE S Everett, WA 98208-5728 Semi-Monthly Regular 01/12/2024 United States

Payroll Overview	
Payroll	Semi-Monthly Regular 01/12/2024
Pay Date	01/12/2024
# Employees	395
# Paid Employees	393
# Regular	395
# Pay Periods	1

Employee Payments

	#	EE's	\$ Amount	
Direct Deposits Debited	495	393	1,798,708.47 D	
Total				1,798,708.47
(D) POD4 UK	G Payrol	l Servic	es Admin Debit	-1,798,708.47
Your Remaining Bank Account Liability			0.00	
Vouchers Printed	0			
Vouchers Suppressed	0			

Taxes

	EIN	EE's	\$ Amount	
FIT/EE	82-2238883	387	308,818.13 D	
FICA/ER	82-2238883	2	726.26 D	
FICA/EE	82-2238883	2	726.26 D	
MEDI/ER	82-2238883	393	39,043.14 P	
MEDI/EE	82-2238883	393	39,043.14 P	
WA L&I/ER	311,180-02	372	83,830.40	
WA PFML/ER (28.57%)	C604154826	389	5,706.45 P	
WA PFML/EE (71.43%)	C604154826	388	14,237.86 ^D	
Washington Long/EE	C604154826	179	6,135.84 P	
Total				498,267.48
(D) POD	4 UKG Payrol	I Service	es Admin Debit	-414,437.08
	Your I	Remainiı	ng Tax Liability	83,830.40

Vendor Liabilities

	EE's	\$ Amount	
Annuity Premium Reserve Accnt	1	1,204.45 ^c	
BPAS FSA	37	4,029.99	
BPAS VEBA	392	1,411,073.16	
DEPT. OF RETIREMENT SYSTEMS	170	119,381.40	
NATIONWIDE RETIREMENT SOLUT	42	28,131.38 c	
South Snohomish County Fireℜ	392	624,901.79	
State Retirement Systems -L2	355	345,366.63	
State Retirement Systems P2	27	20,774.71	
State Retirement Systems-PERS 3	6	5,699.93	
VOYA LIFE INSURANCE & ANNUIT	179	133,725.81 ^c	
WASHINGTON STATE SUPPORT R	6	2,225.63	
Total			2,696,514.88
	(C)	Vendor Checks	-163,061.64
Your Ren	naining '	Vendor Liability	2,533,453.24
Total			
		Total	4,993,490.83
POD4 UKG Payro	es Admin Debit	-2,213,145.55	

Total of Your Responsibility

Recap

POD4 UKG Payroll S	Date	Bank Account #	\$ Amount
Tax Payment	01/11/2024	xxxxxxx2154	414,437.08
Empl. Dir. Dep. SPA	01/11/2024	xxxxxxx2154	1,798,708.47
		Total Debits	2,213,145.55
Cash Requirements: xx		.54	\$ Amount
Tax Payment			414,437.08
Empl. Dir. Dep. SPA			1,798,708.47
		Total	2,213,145.55
Cash Requirements: xx		.54	\$ Amount
Vendor Checks			163,061.64
Tax Payment			83,830.40
		Total	246,892.04
	Tot	al Cash Required	2,460,037.59
General Ledger Summa	iry		
		Debit/Exp.	Credit/Liab.
Earning		2,536,045.77	
ER Deduction		144,603.88	
ER Tax (Offset)		45,475.85	
Tax			6,135.84
Tux		2,726,125.50	6,135.84



Rolling 12 Month Payroll View



📲 Gross Payroll 🔶 Gross Payroll Plus ER Paid Taxes, Benefits & Billing

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Grouped By: None Sorted By: None Filtered By: None

Kronos SaaShr, Inc. KG SOUTH SNOHOMISH COUNTY FIRE

Kronos SaaShr, Inc. / 3040 Route 22 West, Suite 200, Branchburg, New Jersey 08876 / 800-394-4357

Information regarding fees: The fees for the services are reflected in your Sales Order. No fee is charged to you for this payroll funding transaction.

2,780,345.28



SOUTH SNOHOMISH COUNTY FIR IN Recap & Funding 12425 MERIDIAN AVE S Everett, WA 98208-5728 United States

Termination-01/25/2024

2

2

4

1

Payroll Overview Payroll Termination 01/25/2024 Pay Date # Employees # Paid Employees # Pay Statements # Regular 2

Manual 1 # Void 1 EE's Paid More Than Once

Employee Payments

	#	EE's	\$ Amount	
Checks	1	1	172.76	
Direct Deposits Debited	2	2	4,481.88 D	
Direct Dep (Block Reversal	1	1	-1,321.31 *	
Total				4,654.64
Total Void				-1,321.31
(D) POD4 UKG	Payro	ll Service	s Admin Debit	-4,481.88
	Direc	t Dep (B	lock Reversal)	-1,321.31
Your Rem	naining	Bank Ac	count Liability	172.76
Vouchers Printed	0			
Vouchers Suppressed	0			

Taxes

	EIN	EE's	\$ Amount	
FIT/EE	82-2238883	2	1,903.41 ^D	
MEDI/ER	82-2238883	2	184.95 D	
MEDI/EE	82-2238883	2	184.95 D	
WA L&I/ER	311,180-02	1	-224.46	
WA PFML/ER (28.57%)	C604154826	2	-1.66 D	
WA PFML/EE (71.43%)	C604154826	2	-4.17 D	
Washington Long/EE	C604154826	2	-3.41 D	
Total				2,039.61
Total Void				-505.47
(D) POD	4 UKG Payrol	I Service	es Admin Debit	-2,264.07
	Your I	Remainir	ng Tax Liability	-224.46

Vendor Liabilities			
	EE's	\$ Amount	
BPAS FSA	1	0.00	
BPAS VEBA	1	1,558.50	
DEPT. OF RETIREMENT SYSTEMS	2	2,164.36	
SSCF&R EMPLOYEE REPAY	2	5,233.02	
South Snohomish County Fireℜ	1	0.00	
State Retirement Systems -L2	2	-90.80	
WSCFF-EMPLOYEES BENEFIT TRU	1	200.00 ^c	
Total			9,065.08
	(C) V	endor Checks	-200.00
Your Ren	naining V	endor Liability	8,865.08
Total			
		Total	14,438.02
POD4 UKG Payrol	ll Service	s Admin Debit	-6,745.95
Tota	l of Your	Responsibility	7,692.07

Grouped By: None Sorted By: None Filtered By: None

Kronos SaaShr, Inc. SOUTH SNOHOMISH COUNTY FIRE

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Kronos SaaShr, Inc. / 3040 Route 22 West, Suite 200, Branchburg, New Jersey 08876 / 800-394-4357

Information regarding fees: The fees for the services are reflected in your Sales Order. No fee is charged to you for this payroll funding transaction.

Recap			
POD4 UKG Payroll S	Date	Bank Account #	\$ Amount
Tax Payment	01/24/2024	xxxxxxx2154	2,264.07
Empl. Dir. Dep. SPA	01/24/2024	xxxxxxx2154	4,481.88
		Total Debits	6,745.95
Cash Requirements: x	xxxxxx21	54	\$ Amount
Tax Payment			2,264.07
Empl. Dir. Dep. SPA			4,481.88
		Total	6,745.95
Cash Requirements: x	xxxxxx21	54	\$ Amount
Vendor Checks			200.00
Tax Payment (Void)			-224.46
Empl. Checks			172.76
		Total	148.30
	Tot	tal Cash Required	6,894.25

General Ledger Summary		
	Debit/Exp.	Credit/Liab.
Earning	17,097.35	4,106.14
ER Tax (Offset)	254.86	71.57
ER Deduction	200.46	236.10
Tax	23.82	20.41
	17,576.49	4,434.22





-- Gross Payroll -- Gross Payroll Plus ER Paid Taxes, Benefits & Billing



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SOUTH SNOHOMISH COUNTY FIB 12425 MERIDIAN AVE S Everett, WA 98208-5728 Semi-Monthly Regular 01/31/2024 United States

Payroll Overview

Payroll	Semi-Monthly Regular 01/31/2024
Pay Date	01/31/2024
# Employees	412
# Paid Employees	411
# Pay Statements	419
# Regular	412
# Manual	1
# Void	1
# Payroll Adjustment	5
# Pay Periods	1
EE's Paid More Than Once	6
Base Compensation Changes	370
Terminations	2

Employee Payments

	#	EE's	\$ Amount	
Payroll Adjustment		5	1,035.02 P	
Direct Deposits Debited	509	409	1,593,915.23 P	
Void Direct Deposits	2	1	-2,035.78 P	
Total				1,594,950.25
Total Void				-2,035.78
(PA	A) Payroll	Adjustr	ment Payments	-1,035.02
(D) POD4 Uł	(G Payrol	I Servic	es Admin Debit	-1,591,879.45
Your R	emaining	Bank A	ccount Liability	0.00
Vouchers Printed	0			
Vouchers Suppressed	0			

Taxes				
	EIN	EE's	\$ Amount	
FIT/EE	82-2238883	397	280,887.08 P	
FICA/ER	82-2238883	4	278.94 P	
FICA/EE	82-2238883	4	278.94 ^D	
MEDI/ER	82-2238883	403	36,914.60 D	
MEDI/EE	82-2238883	403	36,914.60 P	
WA L&I/ER	311,180-02	1	-269.35	
WA PFML/ER (28.57%)	C604154826	404	5,035.59 P	
WA PFML/EE (71.43%)	C604154826	403	12,531.54 P	
Washington Long/EE	C604154826	196	6,065.75 D	
Total				378,637.69
Total Void				-487.76
(D) POD4	I UKG Payrol	l Servic	es Admin Debit	-378,907.04

Your Remaining Tax Liability

Vendor Liabilities

	EE's	\$ Amount
AFLAC	28	2,481.54 ^c
Annuity Premium Reserve Accnt	1	973.57 °
BPAS FSA	36	4,024.99
BPAS VEBA	3	2,333.34
DELTA DENTAL OF WASHINGTON	390	58,234.67 °
DEPT. OF RETIREMENT SYSTEMS	167	119,305.58
DiMartino Assoc	356	57,381.59 ^c
IAFF	349	2,617.50 P
IAFF LABOR UNION	349	69,781.69 ¤
More		

Grouped By: None Sorted By: None

Filtered By: None

Vendor Liabilities - Continued

	EE's	\$ Amount	
LEGAL SHIELD	2	46.85 c	
NATIONWIDE RETIREMENT SOLU	T 42	28,788.71 ^c	
South County Firefighters Founda	t 242	2,449.00 ^D	
South Snohomish County Fireℜ	e 1	0.00	
State Retirement Systems -L2	353	335,491.04	
State Retirement Systems P2	27	21,645.32	
State Retirement Systems-PERS	3 5	5,329.48	
Support 7	28	425.00 c	
VOYA LIFE INSURANCE & ANNUIT	r 178	132,648.92	
WASHINGTON COUNTY INS FUND	389	2,798.28 ^c	
WASHINGTON NATIONAL INSURA	A 1	45.80 c	
WASHINGTON STATE SUPPORT R	6	2,225.63	
WSCFF-EMPLOYEES BENEFIT TRU	J 354	69,950.00 c	
Tota	al		918,978.50
(D) POD4 UKG Pay	roll Servio	ces Admin Debit	-74,848.19
		Vendor Checks	-221,126.01
Your R	emaining	Vendor Liability	623,004.30
Total			
		Total	2,889,495.64
POD4 UKG Pay	roll Servio	ces Admin Debit	-2,045,634.68
Тс	otal of You	ır Responsibility	843,860.96
			,
Recap			
POD4 UKG Payroll S	Date Ba	nk Account #	\$ Amount
Vendor Payment SPA 01/30	/2024	xxxxxxx2154	74,848.19
Tax Payment 01/30	/2024	xxxxxxx2154	378,907.04
Empl. Dir. Dep. SPA 01/30	/2024	xxxxxxxx2154	1,593,915.23
Empl. Dir. Dep. SPA (Refund) 01/31	/2024	xxxxxxxx2154	-2,035.78
		Total Debits	2,045,634.68
Cash Requirements: xxxxxx	xx2154		\$ Amount
Vendor Payment SPA			74,848.19
Tax Payment			378,907.04
Empl. Dir. Dep. SPA			1,593,915.23
		Total	2,047,670.46
Cash Requirements: xxxxxx	vv2154		\$ Amount
Vendor Checks			221,126.01
Tax Payment (Void)			-269.35
Empl. Dir. Dep. SPA (Refund)			-2,035.78
		Total	218,820.88
	T . 1 . 1 .	and Branda I	
	lotal C	Cash Required	2,266,491.34

Kronos SaaShr, Inc. SOUTH SNOHOMISH COUNTY FIRE

2,266,491.34

General Ledger Summary		
	Debit/Exp.	Credit/Liab.
Earning	2,530,516.17	13,152.91
ER Deduction	141,051.06	140.11
ER Tax (Offset)	42,533.77	304.64
Tax		6,065.75
	2,714,101.00	19,663.41

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Kronos SaaShr, Inc. / 3040 Route 22 West, Suite 200, Branchburg, New Jersey 08876 / 800-394-4357

Information regarding fees: The fees for the services are reflected in your Sales Order. No fee is charged to you for this payroll funding transaction.

-269.35

SOUTH SNOHOMISH COUNTY FIBIL Recap & Funding 12425 MERIDIAN AVE S Everett, WA 98208-5728 Semi-Monthly Regular 01/31/2024 United States





Rolling 12 Month Payroll View



-- Gross Payroll -- Gross Payroll Plus ER Paid Taxes, Benefits & Billing

Grouped By: None Sorted By: None Filtered By: None Kronos SaaShr, Inc. SOUTH SNOHOMISH COUNTY FIRE Generated: 01/31/2024 04:06p Generated By: MARIA D. BLANCO Page 2 of 2

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Blanket Voucher Approval

Date: February 6, 2024

SOUTH SNOHOMISH COUNTY FIRE & RESCUE CLAIMS VOUCHER

We the undersigned Board of Commissioners of the above-named governmental unit do hereby certify that the merchandise or services hereinafter specified have been received, that any advance payment is due and payable pursuant to a contract, and that the vouchers identified below are approved for payment.

Board Chair

	CLAIMS BY FUNI)	
	GENERAL FUND 00		749,266.08
	LEOFF 1 CLAIM FUND 003	3	404,174.29
	RESERVE FUND 302	2	45,681.88
	HEALTHCARE SELF INS FUND 502	2	·
	TOTAL CLAIMS BY FUNE)	178,238.44
		,	1,377,360.69
Voucher No	Claimant	Reference	Amount
14937	911 SUPPLY, INC.	JACKETS	3,324.89
14938	AIRGAS INC.	OXYGEN	9.59
14939	A-LIST PLUMBING	REPAIR/MAINTENANCE	4,435.48
14940	ALLIANCE DISTRIBUTION HOLDINGS INC,	REPAIR/MAINTENANCE	549.50
14941	AMERIGAS PROPANE LP	ALL STATION PROPANE	75.88
14942	ANDERSON, VERN	LEOFF 1 CLAIM	494.70
14943	ASSOCIATED PETROLEUM PRODUCTS, INC.	FUEL	7,005.04
14944	AT&T FIRST NET	COMMUNICATION	1,825.14
14945	AVENZA SYSTEMS INC	ANNUAL SUBSCRIPTION	624.95
14946	BATES, MICHAEL	LEOFF 1 CLAIM	494.70
14947	BOEHM, PAUL	LEOFF 1 CLAIM	1,978.80
14948	CDK CONSTRUCTION SERVICES, INC	REPAIR/MAINTENANCE	32.072.00

NORTHWEST SAFETY CLEAN		
MORGAN MECHANICAL	REPAIR/MAINTENANCE	11,252.67
MEYER, SHANNON-LEE	PROFESSIONAL SERVICES	1,950.00
LYNNWOOD, CITY OF	REPAIR/MAINTENANCE	216,947.83
LONG, KARL	REIMBURSEMENT	572.90
LN CURTIS AND SONS	SAFETY EQUIPMENT	5,358.73
LIFE ASSIST	EMS SUPPLIES	19,685.35
LES SCHWAB	REPAIR/MAINTENANCE	721.24
KROESEN'S UNIFORM COMPANY	UNIFORMS	3,911.06
JESKE, ROBERT	LEOFF 1 CLAIM	1,870.80
IRON MOUNTAIN	DATA STORAGE	170.19
IMS ALLIANCE	REPAIR/MAINTENANCE	101.46
HONEY BUCKET	RENTAL	174.95
HALVERSON, MERLIN	LEOFF 1 CLAIM	244.60
GRAND CANYON EDUCATION, INC	TUITION	2,067.19
GRAINGER	STATION SUPPLIES	4,201.10
GASKILL, JOHN	LEOFF 1 CLAIM	1,906.80
GALLS, LLC	UNIFORMS	830.42
FIRE PROTECTION INC.	REPAIR/MAINTENANCE	3,557.33
EMSCONNECT, LLC	ANNUAL SUBSCRIPTION	2,333.50
EFAX CORPORATE	FAX SERVICES	287.10
EASTSIDE INTEGRATIVE MEDICINE	YEARLY STIPEND	2,500.00
DELTA DENTAL OF WASHINGTON	INSURANCE	3,562.00
DAPPER, STEPHANIE	REIMBURSEMENT	145.00
CSD ATTORNEYS AT LAW	LEGAL SERVICES	6,763.51
CRESSY DOOR COMPANY INC	REPAIR/MAINTENANCE	8,112.13
COPIERS NORTHWEST	COPIER LEASE	3,488.89
COMCAST	INTERNET	3,354.49
CHUNG, EUNKU	LEOFF 1 CLAIM	3,041.88
	COMCASTCOPIERS NORTHWESTCRESSY DOOR COMPANY INCCSD ATTORNEYS AT LAWDAPPER, STEPHANIEDELTA DENTAL OF WASHINGTONEASTSIDE INTEGRATIVE MEDICINEEFAX CORPORATEEMSCONNECT, LLCFIRE PROTECTION INC.GALLS, LLCGASKILL, JOHNGRAINGERGRAND CANYON EDUCATION, INCHALVERSON, MERLINHONEY BUCKETIMS ALLIANCEIRON MOUNTAINJESKE, ROBERTKROESEN'S UNIFORM COMPANYLES SCHWABLIFE ASSISTLN CURTIS AND SONSLONG, KARLLYNNWOOD, CITY OFMEYER, SHANNON-LEE	SUP I WARE LICENSESCHUNG, EUNKULEOFF I CLAIMCOMCASTINTERNETCOPIER SNORTHWESTCOPIER LEASECRESSY DOOR COMPANY INCREPAIR/MAINTENANCECSD ATTORNEYS AT LAWLEGAL SERVICESDAPPER, STEPHANIEREIMBURSEMENTDELTA DENTAL OF WASHINGTONINSURANCEEASTSIDE INTEGRATIVE MEDICINEYEARLY STIPENDEFAX CORPORATEFAX SERVICESEMSCONNECT, LLCANNUAL SUBSCRIPTIONFIRE PROTECTION INC,REPAIR/MAINTENANCEGALLS, LLCUNIFORMSGRAINGERSTATION SUPPLIESGRAND CANYON EDUCATION, INCTUITIONHALVERSON, MERLINLEOFF 1 CLAIMHONEY BUCKETREPAIR/MAINTENANCEIRON MOUNTAINDATA STORAGEIRON MOUNTAINDATA STORAGELES SCHWABREPAIR/MAINTENANCELIFE ASSISTEMS SUPPLIESLONG, KARLREIMBURSEMENTLONG, KARLREIMBURSEMENTLONG, KARLREIMBURSEMENTLONG, KARLREPAIR/MAINTENANCEMOREGAN MECHANICALREPAIR/MAINTENANCE

14979	OFFICE DEPOT, INC	OFFICE SUPPLIES	60.56
14980	PACIFIC COPY & PRINTING	BUSINESS CARDS	172.88
14981	PACIFIC MOBILE STRUCTURES, INC	RENTAL	814.94
14982	PARATEX	REPAIR/MAINTENANCE	1,038.70
14983	PARDEE, JENNIFER	REIMBURSEMENT	194.06
14984	PERFORMANCE SYSTEMS INTEGRATION, LLC	REPAIR/MAINTENANCE	558.03
14985	PROMO BOX LLC	UNIFORMS	1,541.35
14986	QUINTEL, JAMES	LEOFF 1 CLAIM	2,378.80
14987	READY REBOUND LLC	PROFESSIONAL SERVICES	81,982.00
14988	RESCUE HUB	PROFESSIONAL SERVICES	21,693.60
14989	RETROFITPLUMBING, LLC	REPAIR/MAINTENANCE	3,699.36
14990	ROBERT HALF INTERNATIONAL, INC.	PROFESSIONAL SERVICES	2,282.37
14991	RUSSELL'S MOBILE CAR DETAILING	REPAIR/MAINTENANCE	196.54
14992	SEAWESTERN	SAFETY EQUIPMENT	152,558.42
14993	SEYFARTH SHAW LLP	PROFESSIONAL SERVICES	129.00
14994	SHARP ELECTRONICS CORP	IT SUPPLIES	9.44
14995	SHERMAN OPTICAL LLC	PERSCRIPTION SAFETY GLASSES	230.00
14996	SISKUN POWER EQUIPMENT	REPAIR/MAINTENANCE	220.29
14997	SNO & ISLAND CO FIRE COMM ASSN	BANQUET REGISTRATIONS	360.00
14998	SNO CO FIRE DIST #26	PROFESSIONAL SERVICES	550.00
14999	SNO-KING STAMP	NAME PLATES	20.74
15000	STRYKER CORPORATION	ANNUAL SERVICE CONTRACT	38,409.19
15001	TCA ARCHITECTURE - PLANNING	PROFESSIONAL SERVICES	10,568.00
15002	TRILOGY MEDWASTE WEST LLC	HAZARDOUS WASTE DISPOSAL	1,344.81
15003	TRINITY GATE AND DOOR CO	REPAIR/MAINTENANCE	748.69
15004	UE MEDICAL DEVICES, INC.	EMS SUPPLIES	1,825.00
15005	UNIFIRST	REPAIR/MAINTENANCE	531.51
15006	WA ST AUDITOR	PROFESSIONAL SERVICES	25,880.83
15007	WA ST DEPT OF L & I WORKERS COMP	REIMBURSEMENT	554.14
15008	WALKER, PAUL E.	LEOFF I CLAIM	1,978.80

MEMBERSHIP	39,658.05
MEMBERSHIP CHECK REISSUE	75.00
	REPAIR/MAINTENANCE MEMBERSHIP

	Claimant	Reference	Amount
WIRE	EMPLOYMENT SECURITY DEPT	Q4 UNEMPLOYMENT TAXES	18,297.00
WIRE	FED EX	POSTAGE & FREIGHT PICKUP	113.38
WIRE	HEALTHCARE MGMT ADMINISTRATORS	INSURANCE	565,402.93
WIRE	SNO CO PUD	ELECTRICITY	21,101.32
WIRE	US BANK	CREDIT CARD CHARGES	4,562.09
WIRE	WA ST DEPT OF LABOR & INDUSTRIES	REPAIR/MAINTENANCE	269.10
			609,745.82

Accounts Payable

Disbursement Voucher

User: SEvenson Printed: 02/01/2024 - 3:00PM



Date	Invoice No.	Description	G/L Account No.	Invoice Amount
Vendor No.	50440			
Claimant:	911 SUPPLY, INC. 4101 RIVER ROAD N KEIZER, OR 97303-5	502	Fund No Account	
Voucher No.	000014937	Check No. 000014937	Check Date 2/6/2024	
1/8/2024	INV-2-34933	(2) Blauer Jackets with Fleece Liner	001-55-10-522-20-35-25	1,252.84
1/8/2024	INV-2-34934	(1) Blauer Jacket with Fleece Liner	001-55-10-522-20-35-25	546.77
1/15/2024	INV-2-35112	(43) Name Tags	001-55-10-522-20-35-25	436.19
1/17/2024	INV-2-35180	(2) Blauer Jackets with Fleece Liner	001-55-10-522-20-35-25	1,089.09
			Vendor Total:	3,324.89
Vendor No.	50023			
Claimant:	AIRGAS INC. PO BOX 102289 PASADENA, CA 9113	89-2289	Fund No Account	
Voucher No.	000014938	Check No. 000014938	Check Date 2/6/2024	
1/23/2024	9146228701	Sta 11 Oxygen	001-42-10-522-20-31-00	9.59
			Vendor Total:	9.59
Vendor No.	51092			
Claimant:	A-LIST PLUMBING 21133 22ND AVE W LYNNWOOD, WA 98	036	Fund No Account	
Voucher No.	000014939	Check No. 000014939	Check Date 2/6/2024	
1/16/2024	9331407	Sta 21 Leak Repair	001-62-10-522-50-48-00	1,353.63
1/13/2024	9333310	Sta 21 Frozen Pipe Repair	001-62-10-522-50-48-00	1,547.00
1/19/2024	9363928	Sta 23 Bathroom Faucet Repair	001-62-10-522-50-48-00	1,534.85
			Vendor Total:	4,435.48

Date	Invoice No.	Description	G/L Account No.	Invoice Amount
Vendor No.	51606			
Claimant:	ALLIANCE DISTR 12910 NE 125th Wa Kirkland, WA 9801	ay, Bldg B-3	Fund No. Account No.	001
Voucher No. 1/16/2024	000014940 101558	Check No. 000014940 Sta 76 Washer Repair	Check Date 2/6/2024 001-62-10-522-50-48-00	549.50
			Vendor Total:	549.50
Vendor No.	50433			
Claimant:	AMERIGAS PROP PO BOX 660288 DALLAS, TX 752		Fund No. Account No.	001
Voucher No. 1/17/2024	000014941 3159876198	Check No. 000014941 All Sta Propane	Check Date 2/6/2024 001-62-10-522-50-31-00	75.8
			Vendor Total:	75.88
			a	
Vendor No.	50352			
Claimant:	ANDERSON, VER 21 LEONES CT PT LUDLOW, WA		Fund No. Account No.	003
Voucher No. 1/9/2024	000014942 Jan 24	Check No. 000014942 10/23 - 12/23 Medicare Part B	Check Date 2/6/2024 003-00-00-522-10-29-00	494.70
			Vendor Total:	494.70
Vendor No.	50257			
Claimant:	ASSOCIATED PET PO BOX 34600 SEATTLE, WA 98	TROLEUM PRODU	Fund No. Account No.	001
Voucher No.	000014943	Check No. 000014943	Check Date 2/6/2024	
1/8/2024	24-004184	Sta 21 Fuel	001-60-00-522-60-32-00	1,456.0
1/8/2024	24-004185	Sta 10 Fuel	001-60-00-522-60-32-00	1,187.3
1/11/2024	24-006386	Sta 11 Fuel	001-60-00-522-60-32-00	667.8
1/12/2024	24-007288	Sta 22 Fuel	001-60-00-522-60-32-00	1,008.3
1/16/2024	24-009268	Sta 13 Fuel	001-60-00-522-60-32-00	353.0
1/22/2024	24-013487	Sta 21 Fuel	001-60-00-522-60-32-00	999.49

Date	Invoice No.	Description	G/L Account No.		Invoice Amount
1/22/2024	24-013488	Sta 10 Fuel	001-60-00-522-60-32-00		1,332.87
			Vendor Total:		7,005.04
Vendor No.	51587				
Claimant:	AT&T FIRST NET PO BOX 5085 CAROL STREAM, IL	60197		d No. count No.	001
Voucher No. 1/4/2024	000014944 TPR122023	Check No. 000014944 12/23 Mobile Data Services	Check Date 2/6/2024 001-32-00-522-20-42-00		1,825.14
			Vendor Total:		1,825.14
Vendor No.	51163				
Claimant:	AVENZA SYSTEMS II 84 MERTON ST TORONTO, ONTARIC			d No. ount No.	001
Voucher No.	000014945	Check No. 000014945	Check Date 2/6/2024		
1/10/2024		1/24 Avenza Map Pro Subscription	001-32-00-522-20-48-00		624.95
			Vendor Total:		624.95
Vendor No.	50377				
Claimant:	BATES, MICHAEL 15302 EAST 682 PR BENTON CITY, WA	99320-8871		d No. ount No.	003
Voucher No. 1/9/2024	000014946 Jan 24	Check No. 000014946 10/23 - 12/23 Medicare Part B	Check Date 2/6/2024 003-00-00-522-10-29-00		494.70
			Vendor Total:		494.70
Vendor No.	50298				
Claimant:	BOEHM, PAUL 601 S PIONEER WAY, MOSES LAKE, WA 9			d No. ount No.	003
/oucher No.	000014947	Check No. 000014947	Check Date 2/6/2024		
1/9/2024	Jan 24	1/23 - 12/23 Medicare Part B	003-00-00-522-10-29-00		1,978.80

Date	Invoice No.	Description	G/L Account No.		Inv	oice Amount
			Vendor Total:	1 <u>/2"</u>		1,978.80
Vendor No.	51651					
Claimant:	CDK CONSTRUCTIO PO BOX 1767 DUVALL, WA 98019	N SERVICES, I		Fund No. Account No.	302	
/oucher No. /24/2024	000014948 232204-2	Check No. 000014948 1/24 HQ Basement Consulting Work	Check Date 2/6/2 302-63-00-594-22-48-0			32,072.00
			Vendor Total;			32,072.00
/endor No.	50004					
Elaimant:	CDW GOVERNMENT 75 REMITTANCE DR CHICAGO, IL 60675-	STE 1515		Fund No. Account No.	302	
/oucher No. /17/2024	000014949 PC24686	Check No. 000014949 (14) Monitors	Check Date 2/6/2 302-67-00-594-22-64-1			3,041.88
			Vendor Total:			3,041.88
/endor No.	51161					
laimant:	CHUNG, EUNKU 22815 100TH AVE W SEATTLE, WA 98020			Fund No. Account No.	003	
/oucher No. /9/2024	000014950 Jan 24	Cheek No. 000014950 11/23 LEOFF 1 Claim	Check Date 2/6/2 003-00-00-522-10-29-0			121.00
			Vendor Total:			121.00
/endor No.	50006					
laimant:	COMCAST PO BOX 60533 CITY OF INDUSTRY,	CA 91716-052		Fund No. Account No.	001	
/oucher No.	000014951	Check No. 000014951 Sta 76 Internet	Check Date 2/6/2 001-32-00-522-20-42-0			320.28
1/26/2024 1/13/2024	8661-01-24 8662-01-24	Sta 20 Internet	001-32-00-522-20-42-0			204.72
,	0002 01 21	Sta 26 Internet	001-32-00-522-20-42-0			10.51

)ate	Invoice No.	Description	G/L Account No.	Invoice Amoun
/13/2024	8662-01-24	Sta 14 internet	001-32-00-522-20-42-00	196.02
/13/2024	8662-01-24	Sta 12 Internet	001-32-00-522-20-42-00	199.6
/13/2024	8662-01-24	Sta 15 Internet	001-32-00-522-20-42-00	196.02
/13/2024	8662-01-24	Sta 17 Internet	001-32-00-522-20-42-00	205.84
13/2024	8662-01-24	Sta 16 Internet	001-32-00-522-20-42-00	200.97
13/2024	8662-01-24	Sta 10 Internet	001-32-00-522-20-42-00	204.24
13/2024	8662-01-24	Sta 19 Internet	001-32-00-522-20-42-00	204.24
13/2024	8662-01-24	Sta 23 Internet	001-32-00-522-20-42-00	202.9
/13/2024	8662-01-24	Sta 13 Internet	001-32-00-522-20-42-00	200.40
13/2024	8662-01-24	Sta 22 Internet	001-32-00-522-20-42-00	199.6
13/2024	8662-01-24	Sta 18 Internet	001-32-00-522-20-42-00	204.78
13/2024	8662-01-24	HQ Internet	001-32-00-522-20-42-00	198.22
13/2024	8662-01-24	Sta 21 Internet	001-32-00-522-20-42-00	202.9
/13/2024	8662-01-24	Sta 11 Internet	001-32-00-522-20-42-00	202.97
			Vendor Total:	3,354.49
vendor No.	50007			
laimant:	COPIERS NORTH	WEST	Fund No.	001
iannant.	615 S ALASKA ST		Account No.	
	SEATTLE, WA 98	108		
oucher No.				
outfill 110.	000014952	Check No. 000014952	Check Date 2/6/2024	
	000014952 INV2763299	Check No. 000014952 1/24 HQ Copier Lease	Check Date 2/6/2024 001-32-00-522-20-48-00	3,488.89
/9/2024	INV2763299		001-32-00-522-20-48-00	3,488.89
/9/2024 /endor No.			001-32-00-522-20-48-00	
/9/2024	INV2763299	1/24 HQ Copier Lease	001-32-00-522-20-48-00	
9/2024 endor No. laimant:	INV2763299 51622 CRESSY DOOR CO PO BOX 1329 KENT, WA 98035	1/24 HQ Copier Lease	001-32-00-522-20-48-00 Vendor Total: Fund No. Account No.	3,488.8
9/2024 endor No. aimant: pucher No.	INV2763299 51622 CRESSY DOOR CO PO BOX 1329 KENT, WA 98035 000014953	1/24 HQ Copier Lease DMPANY INC Check No. 000014953	001-32-00-522-20-48-00 Vendor Total: Fund No. Account No. Check Date 2/6/2024	3,488.8
9/2024 endor No. aimant: pucher No. 9/2024	INV2763299 51622 CRESSY DOOR CO PO BOX 1329 KENT, WA 98035 000014953 192304	1/24 HQ Copier Lease DMPANY INC Check No. 000014953 Sta 15 Door Repair	001-32-00-522-20-48-00 Vendor Total: Fund No. Account No. Check Date 2/6/2024 001-62-10-522-50-48-00	001
9/2024 endor No. aimant: pucher No. 9/2024 11/2024	INV2763299 51622 CRESSY DOOR CO PO BOX 1329 KENT, WA 98035 000014953 192304 192585	1/24 HQ Copier Lease DMPANY INC Check No. 000014953 Sta 15 Door Repair Sta 23 Door Repair	001-32-00-522-20-48-00 Vendor Total: Fund No. Account No. Check Date 2/6/2024 001-62-10-522-50-48-00 001-62-10-522-50-48-00	3,488.8 001 1,343.0 976.2
9/2024 endor No. aimant: 9/2024 11/2024 18/2024	INV2763299 51622 CRESSY DOOR CC PO BOX 1329 KENT, WA 98035 000014953 192304 192585 192725	1/24 HQ Copier Lease DMPANY INC Check No. 000014953 Sta 15 Door Repair Sta 23 Door Repair Sta 19 Door Repair	001-32-00-522-20-48-00 Vendor Total: Fund No. Account No. Check Date 2/6/2024 001-62-10-522-50-48-00 001-62-10-522-50-48-00 001-62-10-522-50-48-00	001 1,343.0 976.2 972.4
9/2024 endor No.	INV2763299 51622 CRESSY DOOR CO PO BOX 1329 KENT, WA 98035 000014953 192304 192585	1/24 HQ Copier Lease DMPANY INC Check No. 000014953 Sta 15 Door Repair Sta 23 Door Repair	001-32-00-522-20-48-00 Vendor Total: Fund No. Account No. Check Date 2/6/2024 001-62-10-522-50-48-00 001-62-10-522-50-48-00	3,488.8

Date	Invoice No.	Description	G/L Account No.	In	voice Amount
Vendor No.	50005				
Claimant:	CSD ATTORNEYS A 1500 RAILROAD A BELLINGHAM, WA	VE	Fund No Account		
Voucher No.	000014954	Check No. 000014954	Check Date 2/6/2024		
12/31/2023	120748	12/23 Legal Services	001-15-00-522-10-41-00		6,763.51
			Vendor Total:		6,763.5
Vendor No.	51523				
Claimant:	DAPPER, STEPHAN	νIE	Fund No Account		
	WA 98208				
Voucher No. 1/11/2024	000014955 4104-406077	Check No. 000014955 App 162 (6) Gallons Antifreeze Reir	Check Date 2/6/2024 nb. 001-60-00-522-60-31-00		145.00
			Vendor Total:		145.0
Vendor No.	50093				
Claimant:	DELTA DENTAL OI PO BOX 741301 LOS ANGELES, CA		Fund No Account		
Voucher No. 1/24/2024	000014956 00665-02-24	Check No. 000014956 2/24 Leoff 1 Retire Dental	Check Date 2/6/2024 003-00-00-522-10-46-00		3,562.0
			Vendor Total:		3,562.0
Vendor No.	51158				
Claimant:	EASTSIDE INTEGR 14841 179TH AVE S MONROE, WA 982	Е	Fund No Account		
			Check Date 2/6/2024		
Voucher No. /29/2024	000014957 1013	Check No. 000014957 2024 Yearly Stipend	001-42-10-522-20-41-00		2,500.0

Date	Invoice No.	Description	G/L Account No.		Inv	oice Amount
Vendor No.	50193					
Claimant:	EFAX CORPORATE C\O JCLOUD SERVIC PO BOX 51873 LOS ANGELES, CA			Fund No. Account No.	001	
Voucher No.	000014958	Check No. 000014958	Check Date 2/6/2	.024		
0/31/2023	4674591	10/23 Fax Line Monthly Fee	001-32-00-522-20-42-00)		143.55
2/31/2023	4736316	12/23 Fax Line Monthly Fee	001-32-00-522-20-42-00)		143.55
			Vendor Total:			287.10
Vendor No.	50279					
Claimant:	EMPLOYMENT SECU UI TAX ADMINISTRT PO BOX 34949 SEATTLE, WA 98124	ION		Fund No. Account No.	001	
/oucher No.	00000000	Check No. 000000000	Check Date 2/6/2	024		
/31/2024	Q4 2023	Q4 2023 Unemployment Tax	001-15-00-522-10-46-01	l		18,297.00
			Vendor Total:			18,297.00
Vendor No.	51654					
Claimant:	EMSCONNECT, LLC PO BOX 8648 SPOKANE, WA 99203	3		Fund No. Account No.	001	
Voucher No.	000014959	Check No. 000014959	Check Date 2/6/2	024		
/1/2024	10157	EMS Training Platform Subscription	001-32-00-522-20-48-00			2,333.50
			Vendor Total:			2,333.50
/endor No.	50121					
Claimant:	FEDEX PO BOX 94515 PALATINE, IL 60094-	4515		Fund No. Account No.	001	
Voucher No. /19/2024	00000000 8-382-19026	Check No. 000000000 2023 W2's & 1/24 Payroll Freight	Check Date 2/6/2 001-15-00-522-10-42-00			113.38
			Vendor Total:			113.38

Date	Invoice No.	Description	G/L Account No.	In	voice Amount
Vendor No.	50242				
Claimant:	FIRE PROTECTIO 17410 ASH WAY S LYNNWOOD, WA	TE 8	Fund No. Account N	001 No.	
Voucher No.	000014960	Check No. 000014960	Check Date 2/6/2024		
/1/2024	86719	Sta 15 Fire Alarm Monitoring	001-62-10-522-50-48-00		508.1
/1/2024	86719	HQ Fire Alarm Monitoring	001-62-10-522-50-48-00		508.1
/1/2024	86719	Sta 12 Fire Alarm Monitoring	001-62-10-522-50-48-00		508.1
/1/2024	86719	Sta 18 Fire Alarm Monitoring	001-62-10-522-50-48-00		508.19
/1/2024	86719	Sta 14 Fire Alarm Monitoring	001-62-10-522-50-48-00		508.19
/1/2024	86719	Sta 10 Fire Alarm Monitoring	001-62-10-522-50-48-00		508.19
/1/2024	86719	Sta 21 Fire Alarm Monitoring	001-62-10-522-50-48-00		508.19
			Vendor Total:		3,557.33
/endor No.	50643				
Claimant:	GALLS, LLC PO BOX 743626 LOS ANGELES, C.	A 90074-3626	Fund No. Account N	001 No.	
Joucher No.	000014961	Check No. 000014961 J.Nguyen (1) Boot (1) Belt (1) Pant	Check Date 2/6/2024 001-55-10-522-20-35-25		324.1
/15/2024			001-33-10-322-20-33-23		
117/0004	26788658				
	2678638 26811747 26866808	T.Keene (1) Pant K.Borden (1) Station Boot	001-55-10-522-20-35-25 001-55-10-522-20-35-25		142.2 363.9
	26811747	T.Keene (1) Pant	001-55-10-522-20-35-25		142.2
/17/2024 /23/2024 /endor No	26811747 26866808	T.Keene (1) Pant	001-55-10-522-20-35-25 001-55-10-522-20-35-25		142.2 363.9
	26811747 26866808 50157 GASKILL, JOHN 2325 E FIR ST	T.Keene (1) Pant K.Borden (1) Station Boot	001-55-10-522-20-35-25 001-55-10-522-20-35-25	003 No.	142.2 ⁻ 363.9
/23/2024 Vendor No.	26811747 26866808 50157 GASKILL, JOHN	T.Keene (1) Pant K.Borden (1) Station Boot	001-55-10-522-20-35-25 001-55-10-522-20-35-25 Vendor Total: Fund No.		142.2 363.9
/23/2024 Vendor No.	26811747 26866808 50157 GASKILL, JOHN 2325 E FIR ST	T.Keene (1) Pant K.Borden (1) Station Boot	001-55-10-522-20-35-25 001-55-10-522-20-35-25 Vendor Total: Fund No.		142.2 363.9
/23/2024 éendor No. Jaimant:	26811747 26866808 50157 GASKILL, JOHN 2325 E FIR ST MT VERNON, WA	T.Keene (1) Pant K.Borden (1) Station Boot 98273-2742	001-55-10-522-20-35-25 001-55-10-522-20-35-25 Vendor Total: Fund No. Account N		142.2 363.9

Date	Invoice No.	Description	G/L Account No.		Inv	oice Amount
Vendor No.	50010					
Claimant:	GRAINGER			Fund No.	001	
	DEPT 829670207			Account No:		
	PO BOX 419267					
	KANSAS CITY, MO	64141-6267				
/oucher No.	000014963	Check No. 000014963	Check Date 2/6/2	024		
/9/2024	9956373931	Sta 19 Station Supplies	001-62-10-522-50-48-00)		92.61
/11/2024	9960473297	Sta 11 Station Supplies	001-62-10-522-50-48-00)		19.17
/16/2024	9963515276	Sta 14 Station Supplies	001-62-10-522-50-31-00)		552.16
/16/2024	9963515284	Sta 14 Station Supplies	001-62-10-522-50-31-00)		65.44
/16/2024	9964506563	(5) Fire Extinguishers (Inventory)	001-35-10-522-20-48-00)		1,055.55
/17/2024	9964964739	(5) Push Brooms	001-35-10-522-20-31-00)		162.76
/17/2024	9965404693	(10) Broom Handles-Central Stores Stock	001-62-10-522-50-31-00)		163.10
/18/2024	9966702780	Sta 16 Station Supplies	001-62-10-522-50-31-00)		49.02
/18/2024	9966702798	Sta 18 Station Supplies	001-62-10-522-50-31-00)		76.00
/18/2024	9967131724	Sta 16 Station Supplies	001-62-10-522-50-31-00)		218.92
/18/2024	9967573396	(10) Bags Ice Melt-Central Stores Stock	001-62-10-522-50-31-00)		322.99
/18/2024	9967640963	Sta 76 Ice Melt	001-62-10-522-50-31-00)		64.66
/19/2024	9968661760	Sta 10 Station Supplies	001-62-10-522-50-48-00)		137.05
/24/2024	9973294367	Sta 76 Station Supplies	001-62-10-522-50-31-00)		128.41
/24/2024	9973607998	Sta 12 Station Supplies	001-62-10-522-50-31-00)		129.52
/24/2024	9974050149	Technical Rescue Equipment	001-43-10-522-10-35-00)		623.88
/24/2024	9974239999	Sta 17 Station Supplies	001-62-10-522-50-48-00)		78.23
/24/2024	9974391238	Technical Rescue Equipment	001-43-10-522-10-35-00)		261.63
			Vendor Total:	0		4,201.10
Vendor No.	50026					
71. im ont		DUCATION INC		Fund No.	001	
Claimant:	GRAND CANYON EI GRAND CANYON UI			Account No.	001	
	3300 W CAMELBACI					
	PHOENIX, AZ 85017	7				
/oucher No.	000014964	Check No. 000014964	Check Date 2/6/2	024		
/24/2024	17056	A.Nay Sociology Winter Tuition	001-46-10-522-45-43-40			2,067.19
			Vendor Total:	-		2,067.19
/endor No.	50509					
llaimant:	HALVERSON, MERL PO BOX 508 SULTAN, WA 98294	IN		Fund No. Account No.	003	
/oucher No.	000014965	Check No. 000014965	Check Date 2/6/2	024		

ate	Invoice No.	Description	G/L Account No.	ln	ivoice Amoun
			Vendor Total:		244.6
endor No.	50080				
aimant:	HEALTHCARE MGM PO BOX 85016 BELLEVUE, WA 980		Fund No. Account No	003 o.	
oucher No.	00000000	Check No. 000000000	Check Date 2/6/2024		
11/2024	18044	Healthcare Claims 1/11/24	003-00-00-522-10-46-00		-22,023.1
11/2024	18044	Healthcare Claims 1/11/24	502-00-00-522-10-46-00		26,919.3
18/2024	18538	1/18 Healthcare Claims	003-00-00-522-10-46-00		11,695.6
18/2024	18538	1/18 Healthcare Claims	502-00-00-522-10-46-00		151,319.1
25/2024	18871	Healthcare Claims 1/25	003-00-00-522-10-46-00		1,566.5
25/2024	18871	Healthcare Claims 1/25	003-00-00-522-10-46-00		395,925.3
			Vendor Total:		565,402.9
endor No. aimant:	50372 HONEY BUCKET PO BOX 73399		Fund No. Account No	001 o.	
	PUYALLUP, WA 983	73			
oucher No.	PUYALLUP, WA 983 000014966	73 Check No. 000014966	Check Date 2/6/2024		
oucher No. 4/2024			Check Date 2/6/2024 001-46-10-522-45-45-00		174.9
	000014966	Check No. 000014966			174.9
	000014966	Check No. 000014966	001-46-10-522-45-45-00		
4/2024	000014966 0553936261	Check No. 000014966 1/4/24-1/31/24 Standard Unit Weekly 125	001-46-10-522-45-45-00	001 p.	
4/2024 endor No. aimant: pucher No.	000014966 0553936261 50373 IMS ALLIANCE 21818 MTN HWY E # SPANAWAY, WA 983 000014967	Check No. 000014966 1/4/24-1/31/24 Standard Unit Weekly 125 187 Check No. 000014967	001-46-10-522-45-45-00 Vendor Total: Fund No. Account No Check Date 2/6/2024		174.9
4/2024 endor No. aimant:	000014966 0553936261 50373 IMS ALLIANCE 21818 MTN HWY E # SPANAWAY, WA 983	Check No. 000014966 1/4/24-1/31/24 Standard Unit Weekly 125	001-46-10-522-45-45-00 Vendor Total: Fund No. Account No		

Date	Invoice No.	Description	G/L Accou	nt No.	Inv	oice Amount
Vendor No.	50122					
Claimant:	IRON MOUNTAIN PO BOX 27128 NEW YORK, NY 11	0087-7128		Fund No. Account No.	001	
Voucher No. 8/31/2022	000014968 GGVRR386	Check No. 0000149 9/22 Data Storage	68 Check Date 001-32-00-52;	2/6/2024		170.19
315 112022	00 / 10(300	JIZZ Data Storage	001-52-00-522			170.15
			Vendor Total	:		170.19
Vendor No.	50204		2			
Claimant:	JESKE, ROBERT 15104 10TH DR NW MARYSVILLE, WA			Fund No. Account No.	003	
Voucher No.	000014969	Check No. 0000149	69 Check Date	2/6/2024		
/9/2024	Jan 24	1/23 - 12/23 Medicare Part B	003-00-00-522			1,870.80
			Vendor Total	É		1,870.80
Vendor No.	50037					
Claimant:	KROESEN'S UNIFO 2922 6TH AVE S SEATTLE, WA 9813			Fund No. Account No.	001	
Voucher No.	000014970	Check No. 0000149	70 Check Date	2/6/2024		
/13/2023	1374	J.Anderson Class A Uniform	001-55-10-522	2-20-35-25		656.78
/19/2024	4184	M.Matthews Class A Uniform	001-55-10-522			842.77
/11/2024	4717	(14) Badges	001-55-10-522			1,359.81
/24/2024 /12/2024	5184 5318	T.Anderson (1) Boot R.Cyr Class A Uniform	001-55-10-522 001-55-10-522			223.05 828.65
			Vendor Total	:		3,911.06
/endor No.	50137					
Claimant:	LES SCHWAB 17117 HIGHWAY 99			Fund No. Account No.	001	
	LYNNWOOD, WA	78037				
Joucher No.	LYNNWOOD, WA 9	Check No. 0000149	71 Check Date	2/6/2024		

Invoice No.

Description

G/L Account No.

Invoice Amount

Vendor Total:

721.24

Vendor No. 50038 Claimant: LIFE ASSIST Fund No. 001 Account No. 11277 SUNRISE PARK DR RANCHO CORDOVA, CA 95742 Check No. Check Date Voucher No. 000014972 000014972 2/6/2024 001-42-10-522-20-31-00 16,498.76 1/11/2024 1396049 (2) Lacrdal Software 001-42-10-522-20-31-00 1,988.97 1/11/2024 1396049 (2) Infant Airway Trainers 1/12/2024 Sta 15 EMS Supplies 001-42-10-522-20-31-00 209.03 1396493 1/24/2024 Sta 15 EMS Supplies 001-42-10-522-20-31-00 1,445.54 1399821 1/24/2024 Sta 16 EMS Supplies 001-42-10-522-20-31-00 6.42 1399980 (2) Monitor by Laerdel & (2) TruMonitor \$001-42-10-522-20-31-00 12,705.29 1/24/2024 1400108 1/24/2024 1400109 (2) Laerdahl Bundled Software Credit 001-42-10-522-20-31-00 -16,498.76 1/24/2024 1400128 Sta 16 EMS Supplies 001-42-10-522-20-31-00 310.40 1/24/2024 1400279 Sta 11 EMS Supplies 001-42-10-522-20-31-00 3,019.70 Vendor Total: 19,685.35 Vendor No. 50013 Fund No. 001 Claimant: LN CURTIS AND SONS PO BOX 884921 Account No. LOS ANGELES, CA 90088-4921 Check No. Check Date Voucher No. 000014973 2/6/2024 000014973 001-37-00-522-20-35-10 479.42 1/10/2024 (4) Gloves INV781544 001-37-00-522-20-35-10 2,805.41 1/10/2024 INV781643 (6) Helmets 001-55-10-522-20-35-00 1/19/2024 INV783990 (10) Fire Hooks, Misc Supplies 2,073.90 Vendor Total: 5,358.73 Vendor No. 51397 Claimant: LONG, KARL Fund No. 001 Account No. WA 98208 Voucher No. 000014974 Check No. 000014974 Check Date 2/6/2024 K.Long Mileage Reimbursemen Hazmat S:001-46-10-522-45-43-11 38.86 1/29/2024 Hazmat Symp 1/29/2024 Hazmat Symp K.Long Per Diem Hazmat Symposium 001-46-10-522-45-43-11 200.00 K.Long Parking Reimbursemen Hazmat Sy001-46-10-522-45-43-11 159.49 1/29/2024 Hazmat Symp K.Long Car Rental Reimbursement Hazma 001-46-10-522-45-43-11 117.10 1/29/2024 Hazmat Symp

Date	Invoice No.	Description		G/L Account No	•	Invoice Amount
1/29/2024 1/29/2024	Hazmat Symp Hazmat Symp			at Sy001-46-10-522-45-4 Sym001-46-10-522-45-4		29.88 27.57
				Vendor Total _*))	572.90
Vendor No.	50083					
Claimant:	LYNNWOOD, CITY 19100 44TH AVE W LYNNWOOD, WA	7			Fund No. Account No.	001
Voucher No.	000014975	Check No.	000014975	Check Date 2	/6/2024	
12/31/2023	18889	App 207 Repair		001-60-00-522-60-4	8-00	1,708.58
12/31/2023	18890	App 113 Repair		001-60-00-522-60-4	8-00	869.81
12/31/2023	18891	App 125 Repair		001-60-00-522-60-4	8-00	7,353.56
12/31/2023	18892	App 231 Vehicle	Outfitting	001-60-00-522-60-4	8-00	397.03
12/31/2023	18893	App 220 Repair		001-60-00-522-60-4	8-00	8,593.32
12/31/2023	18894	App 204 Repair		001-60-00-522-60-4	8-00	1,240.00
12/31/2023	18895	App 92 Repair		001-60-00-522-60-4	8-00	1,289.64
12/31/2023	18896	App 162 Repair		001-60-00-522-60-4		2,231.79
12/31/2023	18897	App 214 Repair		001-60-00-522-60-4	8-00	1,218.79
12/31/2023	18898	App 184 Repair		001-60-00-522-60-4	8-00	4,139.31
12/31/2023	18899	App 190 Repair		001-60-00-522-60-4	8-00	6,925.12
12/31/2023	18900	App 179 Repair		001-60-00-522-60-4		503.46
12/31/2023	18901	App 148 Repair		001-60-00-522-60-4	8-00	1,722.58
12/31/2023	18902	App 202 Repair		001-60-00-522-60-4	8-00	877.19
12/31/2023	18903	App 118 Repair		001-60-00-522-60-4	8-00	3,349.46
12/31/2023	18904	App 214 Repair		001-60-00-522-60-4	8-00	5,083.83
12/31/2023	18905	App 158 Repair		001-60-00-522-60-4	8-00	1,228.13
12/31/2023	18906	App 110 Repair		001-60-00-522-60-4	8-00	519.95
12/31/2023	18907	App 197 Repair		001-60-00-522-60-4	8-00	1,739.50
12/31/2023	18908	App 202 Repair		001-60-00-522-60-4	8-00	217.11
12/31/2023	18909	App 168 Repair		001-60-00-522-60-4	8-00	824.70
12/31/2023	18910	App 165 Repair		001-60-00-522-60-4	8-00	2,427.86
12/31/2023	18911	App 201 Repair		001-60-00-522-60-4	8-00	504.00
12/31/2023	18912	App 126 Repair		001-60-00-522-60-4	8-00	232.50
12/31/2023	18913	App 204 Repair		001-60-00-522-60-4	8-00	4,311.76
12/31/2023	18914	App 201 Repair		001-60-00-522-60-4	8-00	13,645.24
12/31/2023	18915	App 222 Repair		001-60-00-522-60-4	8-00	51.56
12/31/2023	18916	App 153 Repair		001-60-00-522-60-4	8-00	87.10
12/31/2023	18917	App 120 Repair		001-60-00-522-60-4	8-00	144.89
12/31/2023	18918	App 193 Repair		001-60-00-522-60-4	8-00	446.66
12/31/2023	18919	App 210 Repair		001-60-00-522-60-4	8-00	1,240.28
12/31/2023	18920	App 116 Repair		001-60-00-522-60-4	8-00	1,840.75
12/31/2023	18921	App 112 Repair		001-60-00-522-60-4	8-00	1,020.87
12/31/2023	18922	App 243 Repair		001-60-00-522-60-4	8-00	813.87
12/31/2023	18923	App 217 Repair		001-60-00-522-60-4	8-00	465.00
12/31/2023	18924	App 71 Repair		001-60-00-522-60-4	8-00	620.00

Date	Invoice No.	Description	G/L Account No.	Invoice Amount
12/31/2023	18925	App 169 Repair	001-60-00-522-60-48-00	1,435.32
12/31/2023	18926	App 221 Repair	001-60-00-522-60-48-00	4,328.09
12/31/2023	18927	App 162 Repair	001-60-00-522-60-48-00	12,254.26
12/31/2023	18928	App 71 Repair	001-60-00-522-60-48-00	19,391.94
12/31/2023	18929	App 217 Repair	001-60-00-522-60-48-00	5,472.36
12/31/2023	18930	App 206 Repair	001-60-00-522-60-48-00	387.50
12/31/2023	18931	App 218 Repair	001-60-00-522-60-48-00	7,023.64
12/31/2023	18932	App 192 Repair	001-60-00-522-60-48-00	297.66
12/31/2023	18933	App 170 Repair	001-60-00-522-60-48-00	1,192.43
12/31/2023	18934	App 163 Repair	001-60-00-522-60-48-00	16,280.38
12/31/2023	18935	App 118 Repair	001-60-00-522-60-48-00	387.50
12/31/2023	18936	App 208 Repair	001-60-00-522-60-48-00	1,708.77
12/31/2023	18937	App 159 Repair	001-60-00-522-60-48-00	301.74
12/31/2023	18938	App 160 Repair	001-60-00-522-60-48-00	301.74
12/31/2023	18939	App 158 Repair	001-60-00-522-60-48-00	301.74
12/31/2023	18940	App 233 Repair	001-60-00-522-60-48-00	299.99
12/31/2023	18941	App 113 Repair	001-60-00-522-60-48-00	930.00
12/31/2023	18942	App 120 Repair	001-60-00-522-60-48-00	2,092.50
12/31/2023			001-60-00-522-60-48-00	4,201.60
	18943	App 188 Repair	001-60-00-522-60-48-00	1,554.88
12/31/2023	18944	App 192 Repair		915.85
12/31/2023	18945	App 204 Repair	001-60-00-522-60-48-00	
12/31/2023	18946	App 189 Repair	001-60-00-522-60-48-00	3,138.46
12/31/2023	18947	App 113 Repair	001-60-00-522-60-48-00	3,642.50
12/31/2023	18948	App 165 Repair	001-60-00-522-60-48-00	1,472.50
12/31/2023	18949	App 140 Repair	001-60-00-522-60-48-00	9,513.56
12/31/2023	18950	App 214 Repair	001-60-00-522-60-48-00	620.00
12/31/2023	18951	App 226 Repair	001-60-00-522-60-48-00	2,519.83
12/31/2023	18952	App 195 Repair	001-60-00-522-60-48-00	11.72
12/31/2023	18953	App 197 Repair	001-60-00-522-60-48-00	1,085.00
12/31/2023	18954	App 163 Repair	001-60-00-522-60-48-00	2,205.84
12/31/2023	18955	App 207 Repair	001-60-00-522-60-48-00	225.81
12/31/2023	18956	App 192 Repair	001-60-00-522-60-48-00	386.75
12/31/2023	18957	App 208 Repair	001-60-00-522-60-48-00	225.81
12/31/2023	18958	App 163 Repair	001-60-00-522-60-48-00	508.76
12/31/2023	18959	App 233 Repair	001-60-00-522-60-48-00	1,860.49
12/31/2023	18960	App 189 Repair	001-60-00-522-60-48-00	386.75
12/31/2023	18961	App 179 Repair	001-60-00-522-60-48-00	155.00
12/31/2023	18962	App 188 Repair	001-60-00-522-60-48-00	442.66
12/31/2023	18963	App 189 Repair	001-60-00-522-60-48-00	405.91
12/31/2023	18964	App 228 Repair	001-60-00-522-60-48-00	3,604.62
12/31/2023	18965	App 218 Repair	001-60-00-522-60-48-00	61.74
12/31/2023	18966	App 163 Repair	001-60-00-522-60-48-00	4,165.06
12/31/2023	18967	App 192 Repair	001-60-00-522-60-48-00	205.63
12/31/2023	18968	App 214 Repair	001-60-00-522-60-48-00	77.98
12/31/2023	18969	App 226 Repair	001-60-00-522-60-48-00	1,163.02
12/31/2023	18970	App 170 Repair	001-60-00-522-60-48-00	959.44
12/31/2023	18971	App 162 Repair	001-60-00-522-60-48-00	279.15
12/31/2023	18972	App 205 Repair	001-60-00-522-60-48-00	318.95
			001-60-00-522-60-48-00	465.00
12/31/2023	18973	App 221 Repair	001-00-00-JZZ-00-40-UU	405.00

Date	Invoice No.	Description	G/L Account No.	Invoice Amount
2/31/2023	18974	App 191 Repair	001-60-00-522-60-48-00	951.80
2/31/2023	18975	App 208 Repair	001-60-00-522-60-48-00	228.32
2/31/2023	18976	App 205 Repair	001-60-00-522-60-48-00	620.72
2/31/2023	18977	App 191 Repair	001-60-00-522-60-48-00	2,485.2
2/31/2023	18978	App 195 Repair	001-60-00-522-60-48-00	6,161.9
2/31/2023	18979	App 118 Repair	001-60-00-522-60-48-00	1,483.6
2/31/2023	18980	App 189 Repair	001-60-00-522-60-48-00	189.9
2/31/2023	18981	App 217 Repair	001-60-00-522-60-48-00	359.4
2/31/2023	18982	App 206 Repair	001-60-00-522-60-48-00	119.2
2/31/2023	18983	App 165 Repair	001-60-00-522-60-48-00	205.6
2/31/2023	18984	App 214 Repair	001-60-00-522-60-48-00	925.8
2/31/2023	18985	App 125 Repair	001-60-00-522-60-48-00	91.3
2/31/2023	18986	App 162 Repair	001-60-00-522-60-48-00	706.1
2/31/2023	18987	App 163 Repair	001-60-00-522-60-48-00	860.0
2/31/2023	18988	App 228 Repair	001-60-00-522-60-48-00	45.8
2/31/2023	18989	App 188 Repair	001-60-00-522-60-48-00	82.5
2/31/2023	18990	App 226 Repair	001-60-00-522-60-48-00	27.6
2/31/2023	18991	App 192 Repair	001-60-00-522-60-48-00	283.92
2/31/2023	18992	App 120 Repair	001-60-00-522-60-48-00	65.6
			Vendor Total:	216,947.8
<i>V</i> endor No.	51093			
/endor No. Claimant:	51093 MEYER, SHANN PO BOX 3073 BELLINGHAM, V		Fund No. Account No.	001
Claimant:	MEYER, SHANNO PO BOX 3073 BELLINGHAM, V	VA 98227	Account No.	001
člaimant: Koucher No.	MEYER, SHANNO PO BOX 3073 BELLINGHAM, V 000014976	VA 98227 Check No. 000014976	Account No. Check Date 2/6/2024	
laimant: oucher No. /10/2024	MEYER, SHANN PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023	VA 98227 Check No. 000014976 12/23 Consulting	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00	450.00
'laimant: Youcher No. /10/2024	MEYER, SHANNO PO BOX 3073 BELLINGHAM, V 000014976	VA 98227 Check No. 000014976	Account No. Check Date 2/6/2024	
	MEYER, SHANN PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023	VA 98227 Check No. 000014976 12/23 Consulting	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00	450.00
Claimant: Youcher No. /10/2024 /10/2024	MEYER, SHANNA PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023 Nov 2023	VA 98227 Check No. 000014976 12/23 Consulting	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00 001-48-10-522-20-41-00	450.00 1,500.00
faimant: foucher No. /10/2024 /10/2024	MEYER, SHANN PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023 Nov 2023	VA 98227 Check No. 000014976 12/23 Consulting 11/23 Consulting	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00 001-48-10-522-20-41-00 Vendor Total:	450.00 1,500.00 1,950.00
laimant: oucher No. /10/2024 /10/2024	MEYER, SHANNA PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023 Nov 2023	VA 98227 Check No. 000014976 12/23 Consulting 11/23 Consulting ANICAL JRT NE BLDG A	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00 001-48-10-522-20-41-00	450.00 1,500.00
laimant: Joucher No. /10/2024 /10/2024	MEYER, SHANNA PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023 Nov 2023 50040 MORGAN MECH 12314 134TH COU	VA 98227 Check No. 000014976 12/23 Consulting 11/23 Consulting ANICAL JRT NE BLDG A	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00 001-48-10-522-20-41-00 Vendor Total: Fund No.	450.0 1,500.0 1,950.0
laimant: oucher No. /10/2024 /10/2024 endor No. laimant:	MEYER, SHANNA PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023 Nov 2023 50040 MORGAN MECH 12314 134TH COU	VA 98227 Check No. 000014976 12/23 Consulting 11/23 Consulting ANICAL JRT NE BLDG A	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00 001-48-10-522-20-41-00 Vendor Total: Fund No.	450.0 1,500.0 1,950.0 001
laimant: oucher No. (10/2024 (10/2024 laimant: laimant:	MEYER, SHANNA PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023 Nov 2023 50040 MORGAN MECH 12314 134TH COU REDMOND, WA	VA 98227 Check No. 000014976 12/23 Consulting 11/23 Consulting ANICAL JRT NE BLDG A 98052	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00 O01-48-10-522-20-41-00 Vendor Total: Fund No. Account No.	450.0 1,500.0 1,950.0 001
laimant: oucher No. /10/2024 /10/2024 laimant: oucher No. 2/29/2023	MEYER, SHANNA PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023 Nov 2023 50040 MORGAN MECH 12314 134TH COU REDMOND, WA	VA 98227 Check No. 000014976 12/23 Consulting 11/23 Consulting ANICAL JRT NE BLDG A 98052 Check No. 000014977	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00 001-48-10-522-20-41-00 Vendor Total: Fund No. Account No. Check Date 2/6/2024	450.0 1,500.0 1,950.0 001
faimant: foucher No. /10/2024 /10/2024	MEYER, SHANNA PO BOX 3073 BELLINGHAM, V 000014976 Dec 2023 Nov 2023 50040 MORGAN MECH 12314 134TH COU REDMOND, WA	VA 98227 Check No. 000014976 12/23 Consulting 11/23 Consulting 11/23 Consulting ANICAL JRT NE BLDG A 98052 Check No. 000014977 Sta 21 Furnace Replacement	Account No. Check Date 2/6/2024 001-48-10-522-20-41-00 001-48-10-522-20-41-00 Vendor Total: Fund No. Account No. Check Date 2/6/2024 001-62-10-522-50-48-00	450.00 1,500.00 1,950.00 001

Date	Invoice No.	Description	G/L Accoun	nt No.	Inv	voice Amoun
			Vendor Total			11,252.67
Vendor No.	50091					
Claimant:	NORTHWEST SAFE 5004 SE JOHNSON MILWAUKIE, OR	CREEK BLVD		Fund No. Account No.	001	
Voucher No.	000014978	Check No. 0000)14978 Check Date	2/6/2024		
10/18/2023	23-36553	(3) Coat & Pant Cleaning	001-37-00-522	2-20-48-00		384.76
1/2/2023	23-36696	(1) Pant Cleaning	001-37-00-522	2-20-48-00		39.23
1/2/2023	23-36697	(1) Pant & Coat Cleaning	001-37-00-522	2-20-48-00		71.77
1/2/2023	23-36698	(3) Pant & Coat Cleaning	001-37-00-522	2-20-48-00		899.03
1/2/2023	23-36700	(1) Pant & Coat Cleaning	001-37-00-522	2-20-48-00		161.61
1/2/2023	23-36701	(3) Pant & Coat Cleaning	001-37-00-522	2-20-48-00		229.29
1/2/2023	23-36702	(13) Pant & Coat Cleaning	001-37-00-522	2-20-48-00		1,428.54
2/11/2023	23-36942sp	Short Pay on Invoice 23-3	6942 001-37-00-522	2-20-48-00		0.20
2/20/2023	23-37107	(7) Pant (7) Coat Cleaning	001-37-00-522	2-20-48-00		1,297.16
2/20/2023	23-37108	(6) Pant (7) Coat Cleaning	001-37-00-522	2-20-48-00		608.41
/11/2024	23-37248	(10) Coat (10) Pant (6) Sus	p (1) Hood (4) (001-37-00-522	2-20-48-00		1,512.41
/11/2024	24-37248	(10) Coat & Pant Cleaning	001-37-00-522	2-20-48-00		1,512.41
/23/2024	24-37298	(1) Pant (1) Coat Repair; (1	l) Coat Alteratio 001-37-00-522	2-20-48-00		486.11
			Vendor Total	:		8,630.93
Vendor No.	50086					
		-		T. 131.	001	
Claimant:	OFFICE DEPOT, IN PO BOX 29248 PHOENIX, AZ 8503			Fund No. Account No.	001	
Voucher No.	000014979	Check No. 0000)14979 Check Date	2/6/2024		
/19/2024	350718432001	Sta 18 Office Supplies	001-15-00-522	2-10-31-00		45.59
/19/2024	350722679001	HQ Office Supplies	001-15-00-522	2-10-31-00		14.97
			Vendor Total:	:		60.56
7. 1	60000					
/endor No.	50233					
Vendor No. Claimant:	50233 Pacific Copy & Pi 3502 Broadway Everett, Wa 982			Fund No. Account No.	001	
	PACIFIC COPY & PI 3502 BROADWAY	01	114980 Check Date		001	

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Date	Invoice No.	Description G/L Account No.		Invoice Amount
1/11/2024	111682	(250) T. Keene Business Cards	001-15-00-522-10-31-00	52.59
			Vendor Total:	172.88
Vendor No.	50786			
Claimant:	PACIFIC MOBILE STF PO BOX 24747 SEATTLE, WA 98124	RUCTURES, IN	Fund No. Account No.	001
Voucher No. 2/1/2024	000014981 INV-00355030	Check No. 000014981 2/24 Job Shack Rental	Check Date 2/6/2024 001-46-10-522-45-45-00	814.94
			Vendor Total:	814.94
Vendor No.	50042			
Claimant:	PARATEX 423 S. HORTON ST. SEATTLE, WA 98134		Fund No. Account No.	001
/oucher No.	000014982	Check No. 000014982	Check Date 2/6/2024	
/8/2024	269918	Sta 22 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 14 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 21 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 10 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	HQ Pest Control	001-62-10-522-50-48-00	110.50
/8/2024	269918	Sta 19 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 11 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 17 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 16 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 15 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 23 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 12 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024	269918	Sta 13 Pest Control	001-62-10-522-50-48-00	66.30
/8/2024 /8/2024	269918	Sta 18 Pest Control Sta 20 Pest Control	001-62-10-522-50-48-00 001-62-10-522-50-48-00	66.30 66.30
/8/2024	269918	Sta 20 Pest Control	001-02-10-322-30-48-00	
			Vendor Total:	1,038.70
Vendor No.	51653			
Claimant:	PARDEE, JENNIFER		Fund No.	001
			A	~~~

Account No.

Date	Invoice No.	Description	G/L Account No.		Ιπνα	ice Amount
Voucher No.	000014983	Check No. 000014983		5/2024		
/16/2024	First Watch	J.Pardee Mileage First Watch Confere				34.06
1/16/2024	First Watch	J.Pardee Per Diem First Watch Confer	ence 001-03-00-522-45-43	-11		160.00
			Vendor Total:			194.06
Vendor No.	51086					
Claimant:	PERFORMANCE SY 7325 SW DURHAM PORTLAND, OR 9'	RD		Fund No. Account No.	001	
Voucher No	000014984	Check No. 000014984	Check Date 2/6	5/2024		
1/24/2024	12578789	HQ Fire Extinguisher Inspection & Se	rvice001-62-10-522-50-48	-00		558.03
			Vendor Total:			558.03
Vendor No.	51576					
Claimant:	PROMO BOX LLC 909 SE EVERETT M EVERETT, WA 982			Fund No. Account No.	001	
Voucher No.	000014985	Check No. 000014985	Check Date 2/6	5/2024		
1/10/2024	5771	(150) Beanie Hats	001-55-10-522-20-35	-25		1,541.35
			Vendor Total:			1,541.35
Vendor No.	50205					
Claimant:	QUINTEL, JAMES 429 PRIEST PT DRI TULALIP, WA 982			Fund No. Account No.	003	
Voucher No.	000014986	Check No. 000014986	Check Date 2/6	5/2024		
1/9/2024	Jan 24	1/23 - 12/23 Medicare Part B	003-00-00-522-10-29	-00		1,978.80
/9/2024	Jan 24	1/24 LEOFF 1 Claim	003-00-00-522-10-29	-00		400.00
			Vendor Total:			2,378.80
Vendor No.	51129					
Claimant:	READY REBOUND PO BOX 8282 CAROL STREAM, I			Fund No. Account No.	001	

Date	Invoice No.	Description	G/L Account No.	Inv	oice Amount
Voucher No. 12/4/2023	000014987 2852	Check No. 000014987 1/24 Annual Service Agreement	Check Date 2/6/2024 001-37-00-522-20-41-00		81,982.00
			Vendor Total:		81,982.00
Vendor No.	50254				
Claimant:	RESCUE HUB DROPKICK STUDIO 690 WINTON RD S ROCHESTER, NY		Fund No. Account No.	001	
Voucher No. /12/2024	000014988 INV-0142	Check No. 000014988 Fire Svs Train Management (393) Us	Check Date 2/6/2024 er Lic 001-32-00-522-20-48-00		21,693.60
			Vendor Total:		21,693.60
Vendor No.	50982				
Claimant:	RETROFITPLUMBI 7241 185TH AVE NE REDMOND, WA 98	UNIT 68	Fund No. Account No.	001	
Voucher No. /24/2024	000014989 FIRESTN10	Check No. 000014989 Sta 10 Solo Washer Plumbing	Check Date 2/6/2024 001-62-10-522-50-48-00		3,699.36
			Vendor Total:		3,699.36
Vendor No.	51585				
Claimant:	ROBERT HALF INT PO BOX 743295 LOS ANGELES, CA		Fund No. Account No.	001	
Voucher No. 1/17/2024	000014990 63083248	Check No. 000014990 Week Ending 1/12/2024 Temp SVC	Check Date 2/6/2024 001-18-00-522-10-41-00		2,282.37
			Vendor Total:		2,282.37
Vendor No.	50709				
laimant:	RUSSELL'S MOBILI 20100 8TH PL W LYNNWOOD, WA		Fund No. Account No.	001	
Voucher No. /11/2024	000014991 2193	Check No. 000014991 App 143 Detail	Check Date 2/6/2024 001-60-00-522-60-48-00		196.54

Date	Invoice No.	Description	G/L Account No.	In	voice Amount
			Vendor Total:		196.54
Vendor No.	50130				
Claimant:	SEAWESTERN PO BOX 51 KIRKLAND, WA	98083	Fund No. Account No.	001	
Voucher No. 11/22/2023	000014992 INV27833	Check No. 000014992 (35) Sets of PPE Turnout Gear	Check Date 2/6/2024 001-37-00-522-20-35-10		139,706.63
1/9/2024 1/16/2024	INV28802 INV28906	(6) Gloves (3) Sets PPE Turnout Gear	001-37-00-522-20-35-10 001-37-00-522-20-35-10		786.65 12,065.14
			Vendor Total:		152,558.42
Vendor No.	51121				
Claimant:	SEYFARTH SHAW 233 S WACKER DI CHICAGO, IL 600	RIVE STE 8000	Fund No. Account No.	001	
Voucher No. 1/8/2024	000014993 4403688	Check No. 000014993 12/23 Labor Relations	Check Date 2/6/2024 001-15-00-522-10-41-00		129.00
			Vendor Total:		129.00
Vendor No.	51164				
Claimant:	SHARP ELECTRO DEPT. LA 21648 PASADENA, CA		Fund No. Account No.	001	
Voucher No. 1/7/2024	000014994 SH607308	Check No. 000014994 Fax Expansion Kit	Check Date 2/6/2024 001-32-00-522-20-48-00		9.44
			Vendor Total:		9.44
Vendor No.	50090				
Claimant:	SHERMAN OPTIC 21676 76TH AVE S EDMONDS, WA	TE 106	Fund No. Account No.	001	
Voucher No.	000014995	Check No. 000014995	Check Date 2/6/2024		
1/12/2024	20351	Prescription Safety Glasses	001-37-00-522-20-35-10		230.0

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Date	Invoice No.	Description		G/L Account No		Invo	oice Amount
				Vendor Total			230.00
		2					
Vendor No.	50218						
Claimant:	SISKUN POWER EQUI 2805 BROADWAY EVERETT, WA 98201	PMENT			Fund No. Account No.	001	
Voucher No.	000014996	Check No.	000014996	Check Date 2	/6/2024		
1/4/2024	468279	Chainsaw Repair		001-35-10-522-20-4	8-00		148.66
/19/2024	468582	Chainsaw Repair		001-35-10-522-20-4	8-00		71.63
				Vendor Total			220.29
Vendor No.	50246						
Claimant:	SNO & ISLAND CO FIF 12425 MERIDIAN AVE EVERETT, WA 98208				Fund No. Account No.	001	
Voucher No.	000014997	Check No.	000014997	Check Date 2	/6/2024		
/27/2024	24 Banquet	(6) 2024 Banquet I	Dinners	001-01-00-522-10-4	9-00		360.00
				Vendor Total:			360.00
Vendor No.	50737						
Claimant:	SNO CO FIRE DIST #26 PO BOX 376 GOLD BAR, WA 98251				Fund No. Account No.	001	
Voucher No. 12/15/2023	000014998 2023-34	Check No.	000014998 S Training Heartsay	Check Date 2 er Fi001-46-10-522-45-4	/6/2024		550.00
1211312023	2023-34	(II) Voluncei Livi					
				Vendor Total:			550.00
/endor No.	50046						
Claimant:	SNO CO PUD PO BOX 1100 EVERETT, WA 98206-	1100			Fund No. Account No.	001	
Voucher No.	00000000	Check No.	000000000	Check Date 2	/6/2024		
/17/2024	106174602	Sta 18 Electricity		001-62-10-522-50-4	7-25		897.35
/5/2024	122644783	Sta 76 Electricity		001-62-10-522-50-4	7-25		365.15

Date	Invoice No.	Description	G/L Account No.	Invoice Amount
1/10/2024	122648261	Sta 15 Electricity	001-62-10-522-50-47-25	1,379.40
12/29/2023	129234063	Sta 14 Electricity	001-62-10-522-50-47-25	404.47
1/3/2024	132540820	Sta 18 Street Lights	001-62-10-522-50-47-25	9.68
1/22/2024	132552272	Sta 13 Electricity	001-62-10-522-50-47-25	487.72
12/29/2023	139045567	HQ Electricity	001-62-10-522-50-47-25	6,044.06
12/29/2023	139045568	Sta 11 Electricity	001-62-10-522-50-47-25	2,235.58
1/18/2024	142380002	Sta 22 Electricity	001-62-10-522-50-47-25	584.92
12/15/2023	145711068	Sta 21 Electricity	001-62-10-522-50-47-25	2,414.05
1/9/2024	152318494	Sta 12 Electricity	001-62-10-522-50-47-25	1,176.02
1/22/2024	152323436	Sta 18 Electricity	001-62-10-522-50-47-25	44.23
1/5/2024	161921543	Sta 10 Electricity	001-62-10-522-50-47-25	961.18
1/16/2024	161926618	Sta 19 Electricity	001-62-10-522-50-47-25	1,303.69
1/19/2024	161929495	Sta 21 Electricity	001-62-10-522-50-47-25	2,422.94
1/24/2024	168280211	Sta 23 Electricity	001-62-10-522-50-47-25	370.88
			Vendor Total:	21,101.32
Vendor No.	50019			
Claimant:	SNO-KING STAMP VAL-KEL, INC PO BOX 626 LYNNWOOD, WA	98046-0626	Fund No. Account No.	001
Voucher No.	000014999	Check No. 000014	999 Check Date 2/6/2024	
1/11/2024	79187	J.Simmons Name Plate	001-15-00-522-10-31-00	20.74
			Vendor Total:	20.74
Vendor No.	50430			
Claimant:	STRYKER CORPOR PO BOX 93308 CHICAGO, IL 6067		Fund No. Account No.	001
Voucher No.	000015000	Check No. 000015	000 Check Date 2/6/2024	
1/1/2024	9205332688	2024 Procare Service Contrac	001-42-10-522-20-48-00	38,409.19
			Vendor Total:	38,409.19
Vendor No.	50098			
Claimant:	TCA ARCHITECTUI 6211 ROOSEVELT V SEATTLE, WA 9811	VAY NE	Fund No. Account No.	302
Voucher No.	000015001	Check No. 000015	01 Check Date 2/6/2024	

Date	Invoice No.	Description	G/L Account No.	Invoice Amount
1/15/2024	7981	12/23 Phase 3 Consulting	302-63-00-594-22-41-00	1,408.00
1/15/2024	7987	12/23 Contract Coordination	302-63-00-594-22-41-00	9,160.00
			Vendor Total;	10,568.00
Vendor No.	51047			
Claimant:	TRILOGY MEDW PO Box 670567 Dallas, TX 75267	ASTE WEST LLC	Fund No. Account No.	001
Voucher No.	000015002	Check No. 000015002	Check Date 2/6/2024	
2/31/2023	1508180	Sta 20 Hazardous Waste Disposal	001-42-10-522-20-47-00	228.82
2/31/2023	1508180	Sta15 Hazardous Waste Disposal	001-42-10-522-20-47-00	95.26
2/31/2023	1508180	Sta 22 Hazardous Waste Disposal	001-42-10-522-20-47-00	48.76
2/31/2023	1508180	Sta 23 Hazardous Waste Disposal	001-42-10-522-20-47-00	95.26
2/31/2023	1508180	Sta 18 Hazardous Waste Disposal	001-42-10-522-20-47-00	95.26
2/31/2023	1508180	Sta 13 Hazardous Waste Disposal	001-42-10-522-20-47-00	48.76
2/31/2023	1508180	Sta 76 Hazardous Waste Disposal	001-42-10-522-20-47-00	89.87
2/31/2023	1508180	Sta 16 Hazardous Waste Disposal	001-42-10-522-20-47-00	95.26
2/31/2023	1508180	Sta 12 Hazardous Waste Disposal	001-42-10-522-20-47-00	48.76
2/31/2023	1508180	Sta14 Hazardous Waste Disposal	001-42-10-522-20-47-00	95.26
2/31/2023	1508180	Sta 21 Hazardous Waste Disposal	001-42-10-522-20-47-00	173.84
2/31/2023	1508180	Sta 11 Hazardous Waste Disposal	001-42-10-522-20-47-00	132.18
2/31/2023 2/31/2023	1508180 1508180	Sta 10 Hazardous Waste Disposal Sta 17 Hazardous Waste Disposal	001-42-10-522-20-47-00 001-42-10-522-20-47-00	48.76 48.76
	1000100		7	
			Vendor Total:	1,344.81
/endor No.	50268			
Claimant:	TRINITY GATE AN 8225 140TH AVE N REDMOND, WA	ΙE	Fund No. Account No.	001
Joucher No.	000015003	Check No. 000015003	Check Date 2/6/2024	
/23/2024	39338	HQ Gate Repair	001-62-10-522-50-48-00	748.69
			Vendor Total:	748.69
/endor No.	50981			
Claimant:	UE MEDICAL DEV 831 BEACON ST, 5 NEWTON, MA 02	STE 136	Fund No. Account No.	001

Date	Invoice No.	e No. Description		G/L Account No.		Invoice Amo	
/oucher No.	000015004	Check No.	000015004	Check Date 2	2/6/2024		
/17/2024	2690	(20) Single Use	Blades	001-42-10-522-20-3	1-00		725.0
/17/2024	2691	(20) Single Use	Blades	001-42-10-522-20-3	1-00		725.00
1/17/2024	2692	(10) Single Use	Blades	001-42-10-522-20-3	1-00		375.00
				Vendor Total:			1,825.00
Vendor No.	51001						
Claimant;	UNIFIRST				Fund No.	001	
	ATTN - ACCOUNT	IS RECEIVABLE			Account No.		
	PO BOX 650481						
	DALLAS, TX 752	265-0481					
/oucher No.	000015005	Check No.	000015005	Check Date 2	2/6/2024		
/16/2024	2230031637	HQ Mat Mainte	nance	001-62-10-522-50-4			74.00
/16/2024	2230031638	Sta 11 Mat Mair	ntenance	001-62-10-522-50-4	8-00		43.77
/17/2024	2230031952	Sta 14 Mat Main		001-62-10-522-50-4			50.53
/17/2024	2230031956	Sta 10 Mat Main	ntenance	001-62-10-522-50-4	8-00		41.16
/17/2024	2230031959	Sta 23 Mat Main		001-62-10-522-50-4			41.10
/17/2024	2230031963	Sta 21 Mat Main	ntenance	001-62-10-522-50-4	8-00		50.49
/18/2024	2230032019	Sta 22 Mat Main		001-62-10-522-50-4	8-00		41.10
/18/2024	2230032022	Sta 18 Mat Mair		001-62-10-522-50-4			43.7
/18/2024	2230032025	Sta 15 Mat Mair		001-62-10-522-50-4			47.17
/23/2024	2230032668	Sta 17 Mat Mair		001-62-10-522-50-4			51.17
/23/2024	2230032669	Sta 20 Mat Mair	itenance	001-62-10-522-50-4	8-00		47.13
				Vendor Total:			531.51
/endor No.	50115						
Claimant:	US BANK				Fund No.	001	
	PO BOX 790428				Account No.		
	ST LOUIS, MO 63	3179-0428					
oucher No.	00000000	Check No.	000000000	Check Date 2	/6/2024		
/18/2024	0083-01-24			- ing ,001-45-10-522-20-4			20.00
/18/2024	0083-01-24			Regi001-45-10-522-45-4			50.00
/18/2024	0083-01-24		Manual Ventilation	001-42-10-522-20-3			2,995.00
/18/2024	0083-01-24	G.Rudiger PSA	S Online Conference	Regi 001-45-10-522-45-4	3-10		50.00
/18/2024	0083-01-24	_		ing :001-45-10-522-20-4			20.00
/4/2024	9858-01-24		Hazmat Symposium	001-46-10-522-45-4			645.20
/4/2024	9858-01-24		g Hazmat Symposium	001-46-10-522-45-4	3-11		648.01
/4/2024	9858-01-24		g Hazmat Symposium	001-46-10-522-45-4	3-11		133.88
/4/2024							
Date	Invoice No.	Description	G/L Account No.		Inv	oice Amoun	
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Vendor No.	50573						
Claimant:	WA ST AUDITOR			Fund No. Account No.	001		
	PO BOX 40021 OLYMPIA, WA 9850	04-0021					
Voucher No.	000015006	Check No. 000015006	Check Date 2/6/2	2024			
/10/2024	L159012	12/23 2021-2022 Audit	001-15-00-522-10-41-0	0		25,880.8	
			Vendor Total:			25,880.8	
/endor No.	50991						
Claimant:	WA ST DEPT OF L &	I WORKERS CI		Fund No. Account No.	001		
	PO BOX 44291 Olympia, wa 9850)4-4291					
Voucher No. 1/18/2024	000015007 BK47812	Check No. 000015007 Time Loss Refund for Claim BK47812	Check Date 2/6/2 001-00-00-398-10-00-0			554.14	
			Vendor Total:	8		554.14	
Vendor No.	50347						
Claimant:	WA ST DEPT OF LAI BOILER, PRESSURE PO BOX 44410 OLYMPIA, WA 9850	VESSEL SECTI		Fund No. Account No.	001		
/oucher No. /2/2024	00000000 370702	Check No. 000000000 1/24 Boiler Inspection Certificate	Check Date 2/6/2 001-62-10-522-50-48-0			269.1	
			Vendor Total;	2		269.10	
vendor No.	50160						
laimant:	WALKER, PAUL E. PO BOX 214 KETTLE FALLS, WA	. 99141		Fund No. Account No.	003		
/oucher No.	000015008 Jan 24	Check No. 000015008 1/23 - 12/23 Medicare Part B	Check Date 2/6/2 003-00-00-522-10-29-0			1,978.80	
/9/2024	Sun Li					,	

Date	Invoice No.	Description	G/L Account No.		nvoice Amoun
Vendor No.	50237				
Claimant:	WASHINGTON FIR 605 11TH AVE SE, 5 OLYMPIA, WA 98:	STE 211	Fund Accou	No. 001 int No.	
Voucher No. 1/23/2024	000015009 2024 Leg Day	Check No. 000015009 2024 Legislative Day Registration	Check Date 2/6/2024 001-03-00-522-45-43-10		120.0
			Vendor Total:		120.00
Jendor No.	50305				
Claimant:	WEBSTER, GLEN 6211 133RD AVE NI LAKE STEVENS, W		Fund I Accou		
Joucher No. /9/2024	000015010 Jan 24	Check No. 000015010 1/23 - 12/23 Medicare Part B	Check Date 2/6/2024 003-00-00-522-10-29-00		1,978.8
			Vendor Total:		1,978.80
/endor No.	51652				
Claimant:	WESTERN MECHA 5725 164TH ST. SW LYNNWOOD, WA		Fund I Accou		
/oucher No. /9/2024	000015011 230696-1	Check No. 000015011 Sta 15 Radiant Heater Installation	Check Date 2/6/2024 001-62-10-522-50-48-00		39,658.05
			Vendor Total:		39,658.0
/endor No.	50282				
'laimant:	WFOA 2601 4TH AVE, STE SEATTLE, WA 981		Fund 1 Accou		
/oucher No. /26/2024	000015012 2012	Check No. 000015012 2024 WFOA Membership-Belli	Check Date 2/6/2024 001-18-00-522-10-49-00		75.00
					75.00

Invoice No.	Description		G/L Account	t No.		I	nvoice Amount
51641							
						001	
000015013 4741	Check No. (50) XPT APP Pure	000015013 chase	Check Date 001-48-10-522-		Ļ		2,495.25
			Vendor Total:				2,495.25
			Report Total;				1,377,360.69
	51641 XPTLIFE, LLC 3106 W OCEANF NEWPORT BEAC 000015013	51641 XPTLIFE, LLC 3106 W OCEANFRONT NEWPORT BEACH, CA 92663 000015013 Check No.	51641 XPTLIFE, LLC 3106 W OCEANFRONT NEWPORT BEACH, CA 92663 000015013 Check No. 000015013	51641 XPTLIFE, LLC 3106 W OCEANFRONT NEWPORT BEACH, CA 92663 000015013 Check No. 000015013 Check Date 4741 (50) XPT APP Purchase 001-48-10-522- Vendor Total:	51641 XPTLIFE, LLC For 3106 W OCEANFRONT A NEWPORT BEACH, CA 92663 000015013 Check No. 000015013 Check Date 2/6/2024 4741 (50) XPT APP Purchase 001-48-10-522-20-41-00 Vendor Total:	51641 XPTLIFE, LLC Fund No. 3106 W OCEANFRONT Account No. NEWPORT BEACH, CA 92663 Account No. 000015013 Check No. 000015013 000015013 Check No. 000015013 4741 (50) XPT APP Purchase 001-48-10-522-20-41-00 Vendor Total:	51641 XPTLIFE, LLC Fund No. 001 3106 W OCEANFRONT Account No. 001 NEWPORT BEACH, CA 92663 000015013 Check Date 2/6/2024 000015013 Check No. 000015013 Check Date 2/6/2024 4741 (50) XPT APP Purchase 001-48-10-522-20-41-00 Vendor Total:

I THE UNDERSIGNED DO HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE MATERIALS HAVE BEEN FURNISHED, THE SERVICES RENDERED OR THE LABOR PERFORMED AS DESCRIBED HEREIN, THAT ANY ADVANCE PAYMENT IS DUE AND PAYABLE PURSUANT TO A CONTRACT OR IS AVAILABLE AS AN OPTION FOR FULL OR PARTIAL FULFILLMENT OF A CONTRACTUAL OBLIGATION, AND THAT THE CLAIM IS A JUST, DUE AND UNPAID OBLIGATION AGAINST THE ABOVE-NAMED GOVERNMENTAL UNIT, AND THAT I AM AUTHORIZED TO AUTHENTICATE AND CERTIFY TO SAID CLAIM.

SIGNATURE

_____AUDITING OFFICER DATE: February 6, 2024



Board of Commissioners Minutes of Regular Board Meeting January 2, 2024

<u>PRESENT</u>

Commissioner Micah Rowland Commissioner Michael Fearnehough Commissioner Jim Kenny (Unable to attend) Commissioner David Chan Commissioner Mark Laurence Commissioner Chris Teofilak Commissioner Michael Fearnehough Brier Liaison Paula Swisher (Unable to attend) Mountlake Terrace Liaison Jesse Hoffman

<u>STAFF</u>

Assistant Chief Bob Eastman Assistant Chief Shaughn Maxwell Assistant Chief Jason Isotalo Human Resources Director David Cullen Chief Financial Officer Chris Bothwell Executive Assistant Melissa Blankenship

<u>GUESTS</u>

Local 1828 Representative Zach Cash Attorney Richard Davis

> 7:00 PM In person at Headquarters and Zoom Virtual Meeting ID 861 5293 4763

MEETING WAS AUDIO/VIDEO RECORDED

1. CALL TO ORDER (7:00 p.m.)

Commissioner Rowland called the Regular Meeting to order at 7:02 p.m.

2. PLEDGE OF ALLEGIANCE (7:01 p.m.)

3. APPROVAL OF AGENDA (7:02 p.m.)

<u>Motion</u>

David Chan

Motion to defer the Board Chair and Vice Chair Elections until next meeting and designate the next meeting a special meeting.

Second: Ed Widdis

Motion passed 6-0;

Commissioner Chan requested to move new business items 11 a, b, d. to the next meeting to allow a full Board to participate in the discussion to which the Board agreed.

<u>Motion</u>

David Chan

Motion to adopt agenda as amended.

Second: Chris Teofilak

Motion passed 6-0;

4. BOARD CHAIR AND VICE CHAIR ELECTIONS - Commissioner Micah Rowland (7:04 p.m.)

<u>Motion</u>

David Chan

Motion to appoint Commissioner Rowland and Fearnehough as temporary Chair and Vice Chair respectively until the permanent Chair and Vice chair have been elected.

Second: Chris Teofilak

Motion passed 6-0;

5. CONSENT AGENDA (7:14 p.m.)

Motion

Chris Teofilak

Motion to approve consent agenda as presented.

Second: Ed Widdis

Motion passed 6-0;

a. Claims Voucher totaling \$612,069.28

6. APPROVAL OF MEETING MINUTES (7:15 p.m.)

a. November 21, 2023 Regular Meeting

Motion

Chris Teofilak

Motion to approve minutes as presented.

Second: Mark Laurence

Motion passed 5-0;

b. December 5, 2023 Regular Meeting

Motion

David Chan

Motion to approve December 5, 12, 19 minutes as presented.

Second: Ed Widdis

Motion passed 6-0;

- c. December 12, 2023 Work Session
- d. December 19, 2023 Regular Meeting

7. PUBLIC COMMENT Notice: All public comment and testimony are public records and may be subject to disclosure pursuant to the Public Records Act, RCW Chapter 42.56. (7:18 p.m.)

None.

8. FIRE CHIEF REPORT (7:27 p.m.)

Assistant Chief Eastman reported on and provided updates on the following:

- January 11, 530 7pm Lake Serene Fire Station 23 Open House.
- Scout Day at Fire Station 11 January 13.
- Fire that occurred in Everett where several animals were rescued. Everett Fire assisted South County Fire.
- Proud of the many accomplishments in 2023.
- PIO Hynes and Chief Eastman met with Mayor Elect Rosen to provide a brief and would stay in touch with him as he was sworn in as the new mayor of Edmonds.

9. LEGAL REPORT (7:32 p.m.)

Richard Davis reported on the following:

- South County Fire had accomplished a lot in 2023 and CSD was privileged to be a part of all of the accomplishments.
- Enjoyed reconnecting with former Chief and new Commissioner Ed Widdis during OPMA and Records training.

Chair Rowland asked Mr. Davis if we should be taking any action based on the recent adjustments to public comment rules that local city governments had been adopting to which Mr. Davis stated that he would be happy to provide a detailed memo that the Board

could consider as they discuss public comment policies.

10. UNION REPORT (7:37 p.m.)

Local 1828 Representative Zach Cash reported on the following:

- Commented on the fire that occurred in Eastmont and the crew did an excellent job.
- Station 12 received a brand new engine and the crews were very happy with it.
- Firefighter from the Port of Seattle Local 1257 passed away from occupational cancer and we were fortunate to have a department who supported the effort to screen for cancers early to take care of our people.

The Board asked if there were any updates on the PFAS issue to which Mr. Cash responded that there were 5 departments working with the State Council and a solution was being discussed that would be brought to the Board when fully vetted.

11. NEW BUSINESS (7:42 p.m.)

a. Annual Meeting Calendar for Approval - Board Chair (PAGE 46)

Item moved to special meeting January 9.

b. Committee Creations, Dissolutions and Appointments - Board Chair

Item moved to special meeting January 9.

c. Third Quarter 2023 Financial Report for Discussion - CFO Chris Bothwell (PAGES 47 - 53)

CFO Chris Bothwell presented the Third Quarter 2023 South County Fire Financial Report for Board review and discussion.

CFO Bothwell provided other financial updates which included the following:

- 2021 and 2022 Audits were underway.
- Banking RFP scheduled for Q1.
- Open period had been implemented for 2023.
- Investment policy implementation to resume.
 - d. Priorities Planning and Exercise for Discussion Board Chair

Item moved to special meeting January 9.

e. WFCA Legislative Day for Discussion - Board Chair/Executive Assistant Melissa Blankenship (PAGE 54)

Ms. Blankenship shared background on board participation in WFCA Legislative Day and asked Commissioners if they would like to attend on January 23rd as well as what issues they would like to address. Deadline to RSVP would be January 16th. It was discussed to drive to Olympia the night prior to the event as it was set to begin at 8:00 am.

f. Commissioner Apparel for Discussion - Commissioner Micah Rowland

Chair Rowland initiated a conversation regarding Board consideration of additional apparel items for Board members. Apparel recommendations were discussed, including heavier jackets for more extreme weather conditions and there was extensive conversation about making sure Commissioners did not appear similar to firefighters on scene at an incident.

The Board agreed to continue the discussion at a future meeting.

12. COMMISSIONER COMMENTS (8:45 p.m.)

Commissioner Chan shared comments from his trip to Taiwan.

Commissioner Fearnehough commented that he was disappointed with the division between the department and Commissioners when discussing uniforms and gear.

13. EXECUTIVE SESSION (9:00 p.m.)

a. Review the Performance of a Public Employee Pursuant to RCW 42.30.110(1)(g)

Chair Rowland called an executive session at 8:50 p.m. to Review the Performance of a Public Employee Pursuant to RCW 42.30.110(1)(g) for 30 minutes with action possible at the conclusion.

Chair Rowland called the meeting back to order at 9:20 p.m.

<u>Motion</u>

Micah Rowland

Motion to appoint Commissioners Teofilak and Widdis to review employment contract negotiations with Ms. Blankenship.

Second: David Chan

Motion passed 6-0;

14. ADJOURNMENT (9:30 p.m.)

15. AGENDA DISCLAIMER - Members of the public are advised that times listed on the agenda are approximate and that items on the agenda may be addressed sooner or later than the time specified.

Without objection, Chair Rowland adjourned the meeting at 9:22 p.m.

Presented by:

Micah Rowland Board Chair Melissa Blankenship Executive Assistant to the Board of Commissioners

South County Fire strives to provide accessible opportunities for all members of the public. Please notify the Board Executive Assistant at 425-551-1251 or mblankenship@southsnofire.org at least 48 hours prior to any South County Fire meeting if any accommodations are needed.



Board of Commissioners Minutes of Regular Board Meeting January 16, 2024

<u>PRESENT</u>

Chair Micah Rowland Vice Chair Michael Fearnehough Commissioner Jim Kenny Commissioner David Chan Commissioner Mark Laurence Commissioner Chris Teofilak Commissioner Ed Widdis Brier Liaison Paula Swisher Mountlake Terrace Liaison Jesse Hoffman

<u>STAFF</u>

Deputy Chief Bob Eastman Assistant Chief Shaughn Maxwell Communications Director Leslie Hynes Chief Financial Officer Chris Bothwell Human Resources Director David Cullen Executive Assistant Melissa Blankenship

<u>GUESTS</u>

Local 1828 Representative Justin Pickens

7:00 PM In person at Headquarters and Zoom Virtual Meeting ID 861 5293 4763

MEETING WAS AUDIO/VIDEO RECORDED

1. CALL TO ORDER (7:00 p.m.)

Chair Rowland called the Regular Meeting to order at 7:02 p.m.

2. PLEDGE OF ALLEGIANCE (7:01 p.m.)

3. APPROVAL OF AGENDA (7:02 p.m.)

Motion

David Chan

Motion to approve agenda as presented.

Second: Ed Widdis

Motion passed unanimously 7-0;

4. CONSENT AGENDA (7:04 p.m.)

Motion

Mark Laurence	Motion to approve consent agenda as presented.
Second:	

Ed Widdis

Motion passed unanimously 7-0;

- a. Claims Voucher totaling \$1,177,258.49
- b. Claims Voucher totaling \$751,993.04

5. APPROVAL OF MEETING MINUTES (7:06 p.m.)

Motion

Mark Laurence

Motion to approve minutes as presented.

Second: Ed Widdis

Motion passed unanimously 7-0;

a. January 9, Special Meeting

6. RECOGNITION OF EMT SCHOLARSHIP RECIPIENTS - Fire Chief Thad Hovis/Assistant Chief Shaughn Maxwell/Ms. Penny Coyne (7:08 p.m.)

Assistant Chief Shaughn Maxwell and Ms. Penny Coyne introduced and recognized 2 Volunteer Firefighters Madison German and Justin Nguyen who were each awarded a full EMT Scholarship as a donation from Ms. Coyne.

7. PUBLIC COMMENT Notice: All public comment and testimony are public records and may be subject to disclosure pursuant to the Public Records Act, RCW Chapter 42.56. (7:15 p.m.)

Mr. Willie Russell of the 21st Legislative District Cascade Precinct provided public comment.

Chair Rowland called a recess for 10 minutes at 7:20 p.m.

Chair Rowland called the regular meeting back to order at 7:30 p.m.

Commissioner Chan and Vice Chair Fearnehough congratulated the EMT Scholarship recipients.

8. FIRE CHIEF REPORT (7:24 p.m.)

In Chief Hovis's absence, Assistant Chief Bob Eastman updated the Board on the following:

- Extreme weather created a high call demand but there were no issues at any of our stations.
- Scout day was cancelled due to weather.
- Lake Serene Station neighborhood night cancelled due to weather.
- Night Light kit fall prevention event.

Commissioner Kenny asked if the lake had frozen over and if there were any calls related to that to which staff stated that it had not and there were no calls.

9. UNION REPORT (7:29 p.m.)

Local 1828 Representative Justin Pickens reported updated the Board on the following:

- Thank you to the crews for their hard work during the recent cold weather event.
- Congratulations to the Scholarship recipients thank you to Penny Coyne for her generosity.
- Conference season for Local 1828 members.
- Legislative Sessions in WA State and DC keeping the Union busy.
- Fitch and Associates met with Local 1828 to discuss work they were doing with the City of Edmonds.

10. UNFINISHED BUSINESS (7:34 p.m.)

a. Committee Assignments - Chair Micah Rowland

<u>Motion</u>	
Ed Widdis	Motion to appoint Commissioner Kenny, Chair Rowland, Commissioner Laurence to serve on the Capital Facilities Committee.
Second: David Chan Motion	Motion passed unanimously 7-0;
Micah Rowland	Motion to appoint Commissioner Chan, Commissioner Rowland, Commissioner Widdis to serve on the Intergovernmental Committee.

<u>Motion</u>	
Micah Rowland	Motion to appoint Commissioner Fearnehough as the Sno911 Liaison.
Second: David Chan	Motion passed unanimously 7-0;
	nmended that this committee review HR procedures and

Motion

David Chan

Mark Laurence

Motion to create a combined Finance and Human Resources committee.

Second: Mark Laurence

Motion passed unanimously 7-0;

Motion passed unanimously 7-0;

Chair Rowland stated his recommendations for committees after discussing participation with Board members.

It was noted by Commissioner Kenny that Liaisons would not count towards a quorum so committees could have 4 members if one member was a Liaison.

Motion

Ed Widdis

Motion to appoint Commissioner Chan, Commissioner Laurence, Commissioner Teofilak and Liaison Swisher to the Finance and Human Resources Committee.

Second: David Chan

Motion passed unanimously 7-0;

b. Memorializing the 2024 Benefit Charge Formula - For Action - Assistant Chief Bob Eastman (PAGES 51-55)

Assistant Chief Eastman stated that South County's Benefit Charge Formula for 2024 was preliminary when Resolution 11212023-28 was adopted. The benefit charge formula was updated after receiving the Snohomish County Assessor's certified data on January 3rd, 2024.

Commissioner Kenny stated that he would like to discuss the category factors in more depth during the 2025 budget discussions.

<u>Motion</u>

Second: Ed Widdis

Motion passed unanimously 7-0;

c. Fire Marshal and Prevention Duties - for Discussion - Assistant Chief Bob Eastman (PAGE 56)

Assistant Chief Eastman stated that this was a continuation of the discussion at the December 12, 2023 work session and the January 9, 2024 special meeting on Fire Marshal/Fire Code

Official Duties related to services for the City of Brier and Mountlake Terrace.

Assistant Chief Eastman shared that based on staff and Counsel's interpretation of RCW and IFC – 2018 it appeared that the RFA had the duty and responsibility to perform all Fire Marshal/Fire Code Duties within the RFA incorporated boundaries. There was more work and research to be done as we moved forward that will include further consultation with our legal counsel.

Assistant Chief Eastman stated that this was a complex issue as there were existing/pending ILAs for Fire Marshal services, impacts to regional partners, and budget implications and information would continue to be presented to the Board for discussion.

d. Mountlake Terrace RAISE Grant Support Request - for Action - Chair Micah Rowland (PAGES 57-58)

Liaison Hoffman requested that the Board submit a letter of support to the City Council regarding a RAISE Grant to assist with their continued Main Street revitalization project.

Motion

Ed Widdis

Motion to approve a letter of support from South County Fire to the Mountlake Terrace City Council for a RAISE Grant.

Second: David Chan

Motion passed unanimously 7-0;

11. COMMISSIONER COMMENTS (8:30 p.m.)

Chair Rowland excused Jim Kenny for his absence at the January 2nd Board meeting.

Commissioner Kenny reminded the Board that the SnoIsle Fire Commissioners Association annual banquet at Shawn O'Donnell's would be held on January 27th and RSVP's were requested as soon as possible.

Chair Rowland requested that the Board consider Public Comments be submitted to the Board in written form only. Discussion ensued with a majority of the Board not in favor of

the consideration. The request was postponed indefinitely.

Liaison Hoffman thanked the Board for their support of the RAISE Grant letter.

12. EXECUTIVE SESSION (8:35 p.m.)

a. Review the Performance of a Public Employee Pursuant to RCW 42.30.110(1)(g)

The executive session was cancelled due to deteriorating weather conditions.

13. ADJOURNMENT (9:30 p.m.)

14. AGENDA DISCLAIMER - Members of the public are advised that times listed on the agenda are approximate and that items on the agenda may be addressed sooner or later than the time specified.

Without objection the regular meeting was adjourned at 8:45 p.m.

Approved by:

Presented by:

Micah Rowland Board Chair Melissa Blankenship Executive Assistant to the Board of Commissioners

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Board Meeting Agenda Bill Agenda Item 10.b.

Meeting Date: 2/6/2024

Department:

Human Resources

Subject

Amendment to SCF Policy Article 400.180.0 Vacation - for Discussion - Human Resources Director David Cullen

Prior Board Action: Recommended Action:	Board approval of SCF Policy Article 400.180.02 on 8/17/21 Discussion with possible action to approve a motion to amend SCF Policy Article 400.180.02 – Vacation by adding the proposed language: "Uniformed personnel subject to this policy shall be granted vacation hours in accordance with the schedule identified in the prevailing agreement with IAFF, Local 1828- S. Assistant Chiefs and direct reports to the Chief may sell back up to 240 hours."
Related Items:	SCF Policy Article 400.180.02 – Vacation (Exhibit #1); Copy of the vacation table from the agreement with IAFF Local 1828 (Exhibit #2); Copy of the vacation table from the agreement with IAFF Local 1828-S (Exhibit #3)
Staff Contact:	Human Resources Director David Cullen
Approval Signature:	Fire Chief Thad Hovis
Legal Review:	No Legal Review Required

<u>Summary</u>

We have a structural incongruity in the amount of vacation hours that can be accrued and carried over from year to year when we compare and contrast among and between our two labor agreements and the Vacation Policy to which our admin staff are subject.

Our Agreement with IAFF Local 1828 allows for a maximum carryover for shift personnel of 768 hours. Our Agreement with IAFF Local 1828 - S allows for a maximum carryover of 528 hours. Our Vacation Policy for Admin allows for a maximum carryover of 410 hours.

The uniformed staff subject to this policy are few, Assistant Chiefs and the Fire Chief, yet are most negatively impacted by the incongruity as they matriculate upward through the ranks, given both the diminishing carryover limits and the operational requirements that generally preclude extensive vacation time in the first-year post promotion to Deputy Chief, Assistant Chief or Fire Chief.

Non-uniformed staff who report directly to the Chief do not have diminishing carryover limits but can have the same operational challenges that limit vacation time in particular years and, if long tenured, would face the same conundrum where they would earn more vacation than could be used or sold under the existing policy.

Discussion

When this topic was previously addressed, discussion was largely supportive of an effort to address the incongruity, especially as we plan for succession of the sort that could be negatively impacted should we leave the policy status quo.

Fiscal Impact

Generally neutral. Negative from a cash flow perspective but a savings over time as we would tend to dispense with unliquidated obligations at a lower rate.

Recommendation

Staff recommends that the Board approve a motion to amend SCF Policy Article 400.180.02 – Vacation by adding the proposed language:

"Uniformed personnel subject to this policy shall be granted vacation hours in accordance with the schedule identified in the prevailing agreement with IAFF, Local 1828-S.

Assistant Chiefs and direct reports to the Chief may sell back up to 240 hours."

ATTACHMENTS:

Description Leave/Vacation Policy supporting document Type Backup Material

Article 400.180.02 – Vacation

Completed	Vacation Days	Hours Earned	Hours Earned	Maximum
Months of	Per Year	Per Month	Per Year	Hours of
Service				Carryover
0-36	12	8	96	144
37 – 72	15	10	120	180
73 – 120	18	12	144	216
121 – 228	24	16	192	288
229 – 288	29	19.33	232	348
289 and after	34	22.66	272	410

Employees shall receive vacation paid at their position's normal rate of pay. Vacation time off must be pre-approved by the appropriate level supervisor. Vacation hours shall accrue as follows:

Upon resignation or termination, any unused vacation leave will be included in the employee's final pay calculation on an hour for hour basis.

Exempt employees are charged a vacation day only when they do not spend any part of a scheduled workday at work. Regular part-time employees receive a pro-rated amount of vacation leave based on the number of hours the employee is allocated to work.

In November of each year, employees may sell back accrued, unused vacation hours to South County Fire at their regular rate of pay. A regular employee may sell back up to 80 hours, and a part-time employee working 20 hours per week may sell back up to 40 hours.

Uniformed personnel subject to this policy shall be granted vacation hours in accordance with the schedule identified in the prevailing agreement with IAFF, Local 1828-S

Assistant Chiefs and direct reports to the Chief may sell back up to 240 hours.

"shift day" (0800-0800) shall have 240 hours of vacation leave available.

- 39.6 For forty (40) hour per week employees, vacations shall be scheduled by mutual consent of the employee and their supervisor.
- 39.7 Vacation requests must be written and approved prior to taking such vacation.
- 39.8 Vacation hours shall be granted in accordance with the following schedule:

For Shift Personnel (12- or 24-hour shifts)

COMPLETED MONTH OF SERVICE	NTH OF VACATION		MAXIMUM CARRYOVER HOURS ALLOWED
	MONTH	YEAR	
0-48	8	96	192
49 - 120	15	180	360
121 – 180	18	216	432
181 – 240	20	240	480
241 - 288	24	288	576
289 - 360	28	336	672
361 +	32	384	768

For Day Personnel (40 hours/week)

COMPLETED MONTH OF SERVICE	HOURS OF VACATION		MAXIMUM CARRYOVER HOURS ALLOWED
	MONTH	YEAR	
0-48	8	96	192
49 – 120	12	144	288
121 – 180	15	180	360
181 – 240	17	204	408
241-288	19	228	456
289 – 360	20	240	480
361+	22	264	528

ARTICLE 40 PAID LEAVE BUYBACK

- 40.1 The RFA shall be entitled to buy-back paid leave hours from employees at the straight time rate.
 - 1. The RFA shall determine the total amount of paid leave to be bought back on a department wide basis.
 - 2. Each employee shall determine the maximum amount of paid leave they are

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However, due to unusual circumstances, the Chief or designee may approve excess accumulation, which shall be taken within three (3) months of the following year. Up to an additional three (3) months may be approved in extenuating circumstances. The Chief or designee may assign vacation days to use time accrued that is not in compliance with the provisions of this article. The Employer shall notify all employees of the status of their vacation/holiday/sick leave balances monthly.

Employees who are granted a leave of absence with pay shall continue to accrue vacation leave at their regular prescribed rate during such absence.

- 32.3 Upon termination from South County Fire employment, the employee shall be paid as lump sum settlement the hours of unused vacation/holiday leave up to the maximum hours allowed. Vacation leave accrued and unused in excess of the maximum allowed shall be forfeited unless approved in 32.2 above. Cash payment for unused annual leave shall be made under the following conditions:
 - 1. Upon written resignation with a minimum of two (2) calendar weeks' notice. The Board may waive the notice period.
 - 2. Upon separation by death, retirement, layoff, or dismissal of an employee.
- 32.4 Vacations shall be scheduled by mutual consent of the employee and his/her supervisor.
- 32.5 Vacation requests must be written and approved prior to taking such vacation.

32.6	Vacation	hours shall be	granted in	accordance	with the	following schedule:
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COMPLETED MONTH OF SERVICE	HOURS OF VACATION		MAXIMUM ACCUMULATED HOURS ALLOWED
	MONTH	YEAR	
0-48	8	96	192
49 – 120	12	144	288
121 – 180	15	180	360
181 – 240	17	204	408
241 - 288	19	228	456
289 - 360	20	240	480
361+	22	264	528

32.7 In November of each year, employees may sell back up to 80 accrued, unused vacation hours to South County Fire at their regular rate of pay.

Board Meeting Agenda Bill Agenda Item 11.a.

Meeting Date: 2/6/2024

Department: Fi

Finance

Subject

Establish 2024 Benefit Charge Appeals Deadline and Appeals Board - Chief Financial Officer Chris Bothwell

Prior Board Action:	The Annual Benefit Charge Public Hearing and Adoption of the 2024 Benefit Charge.
Recommended Action:	Adopt Resolution 02062024-02 A Resolution to Establish the 2024 Benefit Charge Appeals Deadline and Appeals Review Board.
Related Items:	Resolution 02062024-02
Staff Contact:	Chief Financial Officer Chris Bothwell
Approval Signature:	Fire Chief Thad Hovis
Legal Review:	No Legal Review Required

<u>Summary</u>

As a condition of having a Benefit Charge, South County Fire is required to establish an annual benefit charge appeals timeline and appeals review board. This items establishes the appeals timeline and review board for benefit charges payable in 2024.

Discussion

Relevant Benefit Charge Policy:

3.3 Establishment of Review Board. Each year, the Governing Board shall adopt a resolution as follows: a. Establishes a Review Board to review appeals regarding the Benefit Charge. b. Establishes the time period for the Review Board to be in existence, but in no event less than fourteen (14) days. c. Appoints three individuals to serve on the Review Board. The members of the Review Board will ordinarily consist of the Fire Chief or Assistant Fire Chief and two other administrative staff members who are knowledgeable about the Benefit Charge. d. Establishes the deadline for appeals to be received by South County Fire in order to be considered by the Review Board. e. The Review Board will, if practicable, allow Appellants to make an oral presentation to the Review Board either in person, by phone or videoconference, upon request by Appellant. The Review Board Oral may, in its discretion, establish reasonable time limits for oral presentations.

The attached resolution satisfies the policy requirements by:

- 1. Setting a deadline of April 1st for appeals to be received by South County Fire in order to be heard by the Review Board.
- 2. Establishing a sixty (60) day window from February 15th through April 15th for the existence of the

Review Board.

3. Appoints the following to the Review Board: Robert Eastman, Assistant Chief, Leslie Hynes, Communications Director, and Chris Bothwell, Chief Financial Officer

Staff will report to the Board if any benefit charge appeals are received by the appeal deadline. This is the final administrative step associated with the 2024 Benefit Charge.

In the coming months staff will begin the process with the Board to bring a ten-year benefit charge renewal to voters in the latter half of 2024. Additionally, the process to establish the 2025 benefit charge, including a review of the category factors, is tentatively scheduled early in 2025 budget development process.

Fiscal Impact

N/A

Recommendation

Adopt Resolution 02062024-02 A Resolution to Establish the 2024 Benefit Charge Appeals Deadline and Appeals Review Board.

ATTACHMENTS:

Description Resolution 02062024-02 Establishing 2024 Benefit Charge

Type Resolution Letter

A RESOLUTION OF THE BOARD OF FIRE COMMISSIONERS OF SOUTH SNOHOMISH FIRE & RESCUE REGIONAL FIRE AUTHORITY ESTABLISHING A REVIEW BOARD FOR BENEFIT CHARGE APPEALS FOR CALENDAR YEAR 2024 RESOLUTION 02062024-02

WHEREAS, on November 3, 2020, the voters of South Snohomish County Fire & Rescue Regional Fire Authority ("South County Fire") authorized the imposition of a benefit charge for a period of six (6) years commencing in 2021;

WHEREAS, the Board adopted Policies and Procedures Regarding Benefit Charge Notices and Appeals ("Benefit Charge Policy") which requires the Governing Board to adopt a resolution to establish the Review Board each year.

NOW, THEREFORE, BE IT RESOLVED by the Board of Fire Commissioners of South County Fire as follows:

1. Establishment of Review Board. The Governing Board hereby establishes a Review Board for calendar year 2024 as follows:

a. The Review Board shall be in existence for the following period of time: February 15th, through April 15th, 2024, which is more than the minimum two-week period required by RCW 52.26.250

b. The following individuals are appointed to serve on the Review Board:

Leslie Hynes

Chris Bothwell

Robert Eastman

c. In order for appeals to be considered by the Review Board, they must be received by South County Fire no later than 5:00 p.m. on April 1, 2024.

PASSED AND ADOPTED BY THE COMMISSION OF SOUTH COUNTY FIRE in open session on the 6th day of February 2024, and duly authenticated by the signatures of the Commissioners voting in favor thereof.

Micah Rowland, Chair	Michael Fearnehough, Vice Chair
Chris Teofilak, Commissioner	David Chan, Commissioner
Jim Kenny, Commissioner	Mark Laurence, Commissioner
Ed Widdis, Commissioner	

Melissa Blankenship, EA Board of Commissioners

Board Meeting Agenda Bill Agenda Item 11.b.

Meeting Date: 2/6/2024 Department: Finance

Subject

2024 General and Excess Liability Insurance Policy Renewal for Action - Chief Financial Officer Chris Bothwell

Prior Board Action: Recommended Action:	Adoption of Comprehensive Financial Management Policies that Include a Risk Policy and Adoption of the 2024 Budget Providing Funding for Insurance. Authorize the Fire Chief to sign both renewal contracts for General and Excess
	Liability policies through February 1, 2025.
Related Items:	General Liability Policy Excess Liability Policy
Staff Contact:	Chief Financial Officer Chris Bothwell
Approval Signature:	Fire Chief Thad Hovis
Legal Review:	No Legal Review Required

<u>Summary</u>

The RFA has two insurance policies that insure the organization for most risks. The policies renew annually and are currently due for renewal. The proposed renewals include a few notable changes, none of which materially change the risk to the organization. The overall policy cost increase is approximately 4.2% and the Adopted Budget is sufficient to fund the renewals.

Discussion

The RFA insures risk for auto, crime, general liability, management liability, equipment and marine, and property (collectively referred to herein as general liability) with commercial insurance. Historically, the RFA has obtained general liability coverage through VFIS, an entity that specializes in insurance for fire agencies nationwide. The current policy was set to expire on February 1, 2024, but following a signal from management to "bind" the policy for another year, the organization's has until February 28th to modify and fund the policy through February 1, 2025 without a lapse in coverage.

Additionally, the RFA has an excess liability policy with the same renewal period and circumstances described in the preceding. The policy is with Arch Insurance Company. Our insurance agent with Nicholson Insurance solicited informal quotes from other providers; the renewal quote from Arch Insurance was the lowest cost option.

The following changes are proposed for the VFIS general liability renewal; no changes were proposed for the excess liability policy.

Flood and Earthquake Sublimit Added | \$25M Sublimit

The previous policy did not have a sublimit for flood or earthquake. The new sublimit is the result of the underwriters determining that the RFA operates in close proximity to a known fault line, increasing the risk to RFA property. It is noted that this determination has also recently affected other public agencies in Western Washington. For context, the total scheduled value (building limit) for all RFA properties is approximately \$50 million.

Flood Deductible Added to Station 10 | 5% Deductible

Station 10 was found to be located in a flood zone. As a result, the renewal policy includes a 5% deductible for flood coverage. The maximum deductible based on the building limit in the policy is just under \$200,000.

Auto Deductible Added | \$2,000 Deductible

The RFA had 33 auto claims in the past 5 years, 13 of which were for less than \$2,000. The insurance payouts resulting from the 13 claims below \$2,000 over the past five years was less than \$15,000. The renewal policy includes a deductible to mitigate the effects of the small claims on the overall policy cost for this renewal and into the future. The additional risk associated with the deductible is manageable.

Property Deductible Added | \$5,000 Deductible

Seven property claims have been made by the RFA in the past five years. Four of the claims were below \$5,000 and totaled less than \$13,000. The renewal policy includes a deductible to mitigate the effects of the small claims on the overall policy cost for this renewal and into the future. Deductibles of \$2,500 and \$5,000 were offered for the renewal; staff is recommending a \$5,000 deductible due to the limited additional risk and annual savings of approximately \$8,500 compared to no deductible. The additional risk associated with this deductible is manageable.

Management Liability Deductible Added | \$25,000 Deductible

A deductible for management liability claims, including defense costs, was added to the policy renewal. The justification for the addition is the frequency of claims, potential severity of losses, and defense costs. The RFA has two open claims for management liability; neither has paid out damages, but defense costs have been incurred. VFIS is not offering a lower deductible for the renewal.

Fiscal Impact

The 2023 general liability policy cost was \$438,000, the 2024 renewal cost is \$450,000 (net of savings from increased property deductible). The increase is approximately three percent (3%) compared to the prior year. The 2023 excess liability policy cost was \$80,000, the 2024 renewal is \$89,000. The increase is approximately eleven percent (11%) compared to the prior year. Overall the cost of both policies is increasing approximately 4.2%, the Adopted 2024 Budget is sufficient to fund this item.

Recommendation

Approve the insurance renewals for general and excess liability authorizing the Fire Chief to sign both renewal contracts and protecting the agency against most risk through February 1, 2025.

ATTACHMENTS:

Description	Туре
General liability insurance proposal 2024	Backup Material
Excess Liability insurance proposal 2024	Backup Material

PROTECT YOUR CREW, YOUR ASSETS, YOUR FUTURE.

SOUTH SNOHOMISH COUNTY FIRE & RESCUE REGIONAL FIRE AUTHORITY

PRESENTED BY:

NICHOLSON & ASSOCIATES INSURANCE LLC 118 W PINE STREET CENTRALIA, WA 98531 360.736.7601

DATE: 01/12/2024

This proposal is valid for 90 days.





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THANK YOU FOR RENEWING

Thank you so much for choosing to renew your insurance with VFIS. Your choice means a lot to us.

Since 1969, we have worked to provide quality support and protection, a focus on safety and training and legendary claims service to our clients. Together, our associates boast over 550+ years of combined emergency services experience, so we pride ourselves on not just serving your industry, but also on living it, respecting it and protecting it.

We hope you've felt the VFIS difference, and that it has inspired your choice to remain a client. As our client you are part of a large and growing group of emergency service organizations, including fire departments, ambulance and rescue squads and 911 centers. We take the responsibility of protecting your most important assets very seriously, and have dedicated our lives to protecting you just as you've dedicated yours to protecting others.

We understand the risks that you face each time you leave for a call, and have listened to your concerns for your family, crew, equipment and your station. It is our hope that because you have our customized insurance options, educational opportunities, training and risk management resources on your side, you can head out for those calls each day feeling more confident, secure and protected.

At VFIS, we look forward to continuing to serve you, and hope to continue to not only meet but exceed your expectations.

Please visit our website at <u>vfis.com</u> to learn more about the services we offer, or give us a call at 800.233.1957 to share stories and ideas or ask questions at any time.

Markel

Troy A. Markel President

WE LIVE IT. WE RESPECT IT. WE PROTECT IT.



THE VFIS ADVANTAGE

Nothing is created equal. You clearly know the best fire truck manufacturer and the best place to get your gear. You wouldn't sacrifice quality for cost on these items, so why skimp on your insurance coverage?

At VFIS, we've seen the front lines and we pioneered insurance specifically for emergency services. We understand the risks you face every time you leave for a call. That's why we not only offer customized insurance options, but education, training and risk management resources to keep your skills on point. Add in our responsiveness, quality service and legendary claims handling and you can see what separates us from the rest.

Don't be fooled by a knock-off. You, your equipment and your crew deserve the best coverage. You dedicate your life to protecting others. We dedicate ours to protecting you.

On top of all of the best-in-class coverages and features ESO's have come to expect from VFIS, we also offer some **unique benefits our competitors just can't match**.

Accident & Sickness

- 200% of the Principal Sum for quadriplegia and paraplegia and 100% for hemiplegia
- Illness Loss of Life Benefit paying for death due to heart attack or stroke within 48 hours of an emergency response or physical training exercise vs. requiring such a death to be "caused by" a covered activity

Risk Management

- 100+ "Manage Your Risk" best practice guidelines available for download
- Self-evaluation program to identify areas for improvement
- Technical assistance in interpreting and applying codes/standards and regulations
- Building replacement cost estimates
- On-site hazard identification and risk control surveys
- Industry cause of loss statistical reviews and individual loss trending studies
- On-site seminars regarding key loss exposures
- Safety focused ride along observation programs
- Provide resources that help with Human Resources

Specialty Benefits

- Minimum 3% guaranteed rate of return on LOSAP funds
- Accidental burn and disfigurement and burial benefits
- Optional 200% line of duty coverage
- Critical illness coverage for heart attack, stroke, kidney failure and cancer
- Benefits paid out at lump sum upon diagnosis not as an expense reimbursement
- 24 hour on-and-off duty benefits



Education, Training & Consulting Services

Our staff has over 300 years of Emergency Services experience and we have industry alliance with CFSI, NVFC, NFPA, IAFC, NFFF, NEMSMA, NAEMSO, VCOS, FDSOA. We have a proud tradition and history of being a leader in providing our emergency services clients with quality training programs and other risk management tools. VFIS provides client access to;

- In person training programs
- Online training programs
- Downloadable training booklets & safety forms
- Safety posters
- A brief overview of the training material we offer can be found in our training resource catalog. <u>ETC-Resource-Catalog-VFIS.pdf</u>

Distance Learning

VFIS University offers quality online education and training courses for emergency responders, many of which are recognized as meeting industry continuing education requirements, and you'll receive a certificate upon completion of each course.

All courses are available online 24/7 so you can work to better prepare for every call, help reduce your risk for injury and loss and increase your skillsets to better support your team and community – all from the convince of your home or work computer.



RISK MANAGEMENT SERVICES

VFIS is more than just a company that you can use to transfer risk. As a valuable service to your organization, VFIS provides Risk Control, Education and Training Services. Our Risk Control team is staffed by active emergency service personnel with more than 200 years of combined emergency service experience.

Employment Practices

It's important to keep up with the latest on employment law liability issues. Through our VFIS HR Help portal, we work to keep our clients up to date and provide timely resources that educate and inspire good employment practices. Through <u>risktools.vfis.com</u> we provide:

- Web-based EPL training that tracks employees' progress and completion
- Tools to evaluate your current HR policies
- Articles highlighting relevant workplace issues
- Checklists to discover areas of exposure
- Lawsuit and court decision summaries
- Free model HR policies and forms for download

Communiqués/Safety Bulletins/Checklists

VFIS has over 100 technical reference bulletins covering fire and EMS operations, vehicle operations, employment practices and ESO administration.

On-site Risk Assessments

VFIS can provide on-site risk control assessments in evaluating the effectiveness of existing procedures for controlling potential loss exposures. These assessments, where requested, will be provided by a Certified Safety Professional with experience in fire and emergency medical services.

Self-Assessment Tools

VFIS provides a web-based self-assessment guide (Mutual Aid by VFIS) which highlights known loss producing exposures and directs users to resources available to assist their organization in addressing them.

Newsletters

VFIS provides quarterly newsletters covering emerging topics of concern to emergency service leaders and personnel.



YOUR INSURANCE PROPOSAL

This proposal is prepared from information supplied to VFIS on the application submitted by your insurance representative.

The lines of business shown in this proposal are offered as a complete portfolio. Purchase of individual lines of business requires underwriting approval. This proposal may or may not contain all terms requested on the application. Proposed coverages are provided by the VFIS insurance policy forms and are subject to the terms, exclusions, conditions and limitations of those policy forms. Actual policies should be reviewed for specific details. Your insurance representative can provide specimen policies upon request.

Your exposure to loss changes over time. Keep your insurance representative informed of any changes, so your coverage can be updated. We strongly recommend frequent reviews of your operations and VFIS coverage with your insurance representative.

The proposed Property and Casualty coverage is underwritten by National Union Fire Insurance Company of Pittsburgh, Pa. (A.M. Best #19445). National Union Fire Insurance Company of Pittsburgh, Pa. is rated A (Excellent) in Financial Size Category XV by A.M. Best Company.

VFIS Claims Management provides the claims management services for VFIS Program insureds exclusively.

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The VFIS Program is administered by Volunteer Firemen's Insurance Services, Inc. CA Insurance Producer License #0B39073. Volunteer Firemen's Insurance Services, Inc., an American International Group, Inc. (AIG) company, is a premier manager and specialist of specialty commercial insurance markets in the U.S. This proposal provides a brief description of proposed insurance coverages for your consideration. It is not a contract of insurance. Refer to the actual insurance policy for a description of coverage, exclusions and conditions. Specimen policies are available for your review. All products and services are written or provided by subsidiaries or affiliates of AIG. Products or services may not be available in all countries, and coverage is subject to actual policy language. Certain property-casualty coverages may be provided by a surplus lines insurer. Surplus lines insurers do not generally participate in state guaranty funds and insureds are therefore not protected by such funds.



PROPOSAL

GENERAL INFORMATION

This Proposal reflects the renewal of policies listed below:

Expiring Policy Nu VFNU-TR-0002294				
First Named Insured:	SOUTH SNOHOMISH COUNTY FIRE & RESCUE REGIONAL FIRE AUTHORIT			
Mailing Address:	12425 MERIDIAN AVE S EVERETT, WA 98208			
Other Named Insured(s):	 CITY OF EDMONDS SNOHOMISH COUNTY FIRE PROTECTION DISTRICT #1 HEALTH CARE COMMITTEE COMMITTEE FOR THE DEFERRED COMPENSATION 457 PLAN AND TRUST AGREEMENT FOR EMPLOYEES OF SNOHOMISH CO FPD NO. 1 SOUTH SNOHOMISH COUNTY FIRE & RESCUE REGIONAL FIRE AUTHORITY DBA SOUTH SNOHOMISH COUNTY FIRE & RESCUE FIRE 1 FOUNDATION SOUTH SNOHOMISH COUNTY FIRE & RESCUE VOLUNTEER FIREFIGHTERS ASSOCIATION 			
Coverage Applies To:	- CITY OF EDMONDS FIRE DEPARTMENT			



PROPERTY

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

Schedule of Locations

<u>Premises</u>	<u>ltem</u>	Address	<u>Occupancy</u>
1	1	12310 MERIDIAN AVE S EVERETT, WA 98208	FIRE STATION #11
2	1	13611 PUGET PARK DR EVERETT, WA 98208	FIRE STATION #13
3	1	16819 13TH AVE W LYNNWOOD,WA 98037	MAINT SHOP
3	2	16819 13TH AVE W LYNNWOOD, WA 98037	FIRE STATION #21
4	1	20510 DAMSON RD LYNNWOOD, WA 98036	FIRE STATION #22
5	1	4323 SERENE WAY LYNNWOOD, WA 98037	FIRE STATION #23
6	1	5902 232ND ST SW MOUNTLAKE TERRACE, WA 98043	FIRE STATION #19
7	1	3525 108TH ST SE EVERETT, WA 98208	FIRE STATION #12
8	1	12425 MERIDIAN AVE S EVERETT, WA 98208	OFFICE
8	2	12425 MERIDIAN AVE S EVERETT, WA 98208	EDUCATION CTR
8	3	12425 MERIDIAN AVE S EVERETT, WA 98208	MAINT/TRAINING BLDG
8	4	12425 MERIDIAN AVE S EVERETT, WA 98208	TRAINING TOWER
8	5	12425 MERIDIAN AVE S EVERETT, WA 98208	MOBILE OFFICE
9	1	3922 156TH ST SW LYNNWOOD, WA 98037	FIRE STATION #10
10	1	21206 POPLAR WAY BRIER, WA 98036	FIRE STATION #18
10	2	21206 POPLAR WAY BRIER, WA 98036	UTILITY POLE W/ 2 TRAFFIC LIGHTS
11	1	8429 196TH ST SW EDMONDS, WA 98026	FIRE STATION #16
12	1	275 6TH AVE N EDMONDS, WA 98026	FIRE STATION #17
13	1	23009 88TH AVE W EDMONDS, WA 98026	FIRE STATION #20
14	1	18800 68TH AVE W LYNNWOOD, WA 98036	FIRE STATION #14
15	1	18800 44TH AVE W LYNNWOOD, WA 98036	FIRE STATION #15
16	1	1020 153RD ST SE MILL CREEK, WA 98012	FIRE STATION #76



Schedule of Limits & Deductibles

Property Deductible: \$1,000

Blanket Contents Limit: \$4,183,750 * below indicates Contents included in Blanket Limit

Premises/ <u>Item</u>	Building <u>Limit</u>	Building <u>Valuation</u>	Contents <u>Limit</u>	Contents <u>Valuation</u>	Earthquake <u>Deductible</u>	Flood <u>Deductible</u>	Wind Hail <u>Deductible</u>
1/1	\$5,304,146	GRC	\$1,270,852 *	RC	5%	\$1,000	N/A
2/1	\$1,745,769	GRC	\$131,470 *	RC	5%	\$1,000	N/A
3/1	\$316,634	GRC	\$54,779 *	RC	5%	\$1,000	N/A
3 / 2	\$5,308,409	GRC	\$136,570 *	RC	5%	\$1,000	N/A
4/1	\$1,036,730	GRC	\$65,732 *	RC	5%	\$1,000	N/A
5/1	\$1,034,394	GRC	\$65,732 *	RC	5%	\$1,000	N/A
6/1	\$2,914,863	GRC	\$219,111 *	RC	5%	\$1,000	N/A
7/1	\$2,820,515	GRC	\$117,985 *	RC	5%	\$1,000	N/A
8/1	\$8,706,207	GRC	\$1,460,925 *	RC	5%	\$1,000	N/A
8/2	\$513,766	GRC	\$19,478 *	RC	5%	\$1,000	N/A
8/3	\$142,562	GRC	\$9,004 *	RC	5%	\$1,000	N/A
8/4	\$1,449,759	GRC	Not Covered	N/A	5%	\$1,000	N/A
8/5	\$29,722	ACV 80%	\$6,083 *	RC	5%	\$1,000	N/A
9/1	\$3,732,484	GRC	\$58,276 *	RC	5%	\$1,000	N/A
10/1	\$2,849,403	GRC	\$58,276 *	RC	5%	5%	N/A
10/2	\$259,751	RC	Not Covered	N/A	5%	5%	N/A
11/1	Not Covered	N/A	\$45,024 *	RC	5%	\$1,000	N/A
12/1	Not Covered	N/A	\$45,024 *	RC	5%	\$1,000	N/A
13/1	Not Covered	N/A	\$45,024 *	RC	5%	\$1,000	N/A
14/1	\$1,163,735	GRC	\$59,218 *	RC	5%	\$1,000	N/A
15/1	\$5,172,941	GRC	\$263,187 *	RC	5%	\$1,000	N/A
16/1	\$1,363,993	GRC	\$52,000 *	RC	5%	\$1,000	N/A

Flood – Sublimit

Flood Sublimit – Annual Aggregate- All Listed Premises: \$25,000,000

Earthquake – Sublimit

Occurrence: \$25,000,000

Aggregate: \$25,000,000



Valuation Basis

VFIS insures property on a guaranteed replacement cost (GRC), replacement cost (RC), actual cash value (ACV) or functional replacement cost (FRC) basis. The Schedule of Limits shows how your property was quoted.

Descriptions

Guaranteed replacement cost pays to replace your property, without deduction for depreciation, even if the replacement cost is greater than the limit on the policy. Here's an example:

	With GRC	Without GRC
Policy limit:	\$100,000	\$100,000
Actual cost to replace:	\$125,000	\$125,000
Policy pays:	\$125,000	\$100,000
You would have to pay:	\$0	\$25,000

Replacement cost pays to replace your property, without deduction for depreciation, but is subject to the limit on the policy.

Actual cash value pays the cost to replace your property, subject to depreciation and subject to the limit on the policy.

Functional replacement cost pays to replace your property with similar property intended to perform the same function, when replacement with identical property is impossible or unnecessary; it's subject to the limit you select.


PROPERTY – COVERAGE HIGHLIGHTS

The following apply unless noted otherwise in this proposal:

Loss of Income	Protects your organization's loss of income if your operations are interrupted because of a covered loss to your buildings or contents.
	Includes increased time due to enforcement of an ordinance or law.
	No dollar limit; covers the actual loss of income you sustain during the period of restoration for up to 24 months.
	Example: Because of serious wind damage to the roof of the fire station, a volunteer fire company is unable to hold the twice-weekly bingo games they count on to fund their operations. This coverage would pay for the lost income until the roof is repaired and the bingo games can resume.
Extra Expense	Protects your organization from extra expense you incur if your operations are interrupted because of a covered loss to your buildings or contents, provided the extra expense is necessary to minimize your down-time and continue operations.
	Includes increased time due to enforcement of an ordinance or law.
	No dollar limit; covers the extra expense (over and above your normal operating expense) incurred during the period of restoration for up to 24 months.
	Example: An ambulance squad suffers a total loss to their main garaging location due to a fire. In order to continue responding to calls, they must lease space from the local municipality for the time it takes to rebuild their garage. This coverage would pay for the extra costs (rent, phone installation, furniture leasing and so forth) needed to do so.
Utility Service Interruption	Loss of Income and extra expense is extended to cover an interruption in utility services to your premises, if utility interruption occurs as a result of a covered cause of loss.
	Subject to a 72 hour waiting period.
Ordinance Coverage	Applies to buildings insured on a guaranteed replacement cost basis or on a replacement cost basis.
	Will pay for the loss of value of the undamaged portion of a building that must be torn down, following a covered loss, because of applicable local, state or federal building codes. If the building is written on a replacement cost basis, the amount paid for such loss is included in your building limit and does not increase it.
	Will pay for the cost to demolish the undamaged portion of the building, clear the site, and repair or rebuild according to code. These costs are covered up to 100% of the amount paid for the initial direct physical loss or damage to the building.
	Examples of costs covered by this extension include updated electrical systems to comply with local building codes, or improved rest room facilities that are accessible to disabled people.



Earthquake	Applies to the full amount of coverage you carry on buildings and contents (no sub-limit, unless otherwise indicated in this proposal).
	Includes volcanic action.
	A special 5% deductible applies to the value of the building and personal property for each item.
Flood	Applies to the full amount of coverage you carry on buildings and contents (no sub-limit, unless otherwise indicated in this proposal).
	A special \$1,000 deductible applies per premises, unless otherwise indicated in this proposal.
Equipment Breakdown	Covers the mechanical breakdown of equipment or the explosion of pressure vessels at your premises. Covered equipment includes such things as refrigeration equipment, air conditioners, cascade units and boilers.
	Covers the mechanical breakdown of certain types of portable equipment (mobile cascade units, mobile generators, portable pumping units, jaws-of- life) away from your premises.
	Covers loss of income or extra expense your organization may suffer if your utilities are interrupted as a result of an accident to covered equipment owned by your landlord or utility company.
	No dollar limit.
Other Perils (not	Damage caused by the back-up of sewers and drains.
covered by many	Damage caused by artificially generated electrical currents.
property policies)	Damage caused by changes in temperature or humidity.
Arson Reward	Limit of \$25,000.
	For the reimbursement of your payment of rewards which provide information related to arson fire.
	No deductible.
Crisis Incident Response Coverage	We will pay up to \$25,000 for any one crisis incident that results in crisis management expenses (to restore your public image) or post-crisis counseling services.
Debris Removal	Covered without limit if the expense is incurred as a result of a covered cause of loss.
Contents	Pays the greater of \$100,000 or your highest contents limit at any location.
Off-Premises	Does not apply to portable equipment.
Newly Acquired Property	Automatically covers newly acquired buildings, buildings under construction, and contents at newly acquired locations.
	The automatic feature lasts for 90 days or the end of the policy period, whichever is later.



Limits are \$2,500,000 for buildings and \$500,000 for contents.



Fine Arts	Limit of \$50,000 when there is a certified appraisal; otherwise the limit is \$25,000 subject to \$1,500 limit per item.
Money & Securities	Covers theft, disappearance or destruction on-premises or off-premises.
	Automatic \$50,000 limit; higher limits are available.
Trees, Shrubs, Plants & Lawns	Covered against loss by fire, lightning, explosion, civil commotion, aircraft, vehicles and vandalism.
	No dollar limit.
Glass Deductible Waiver	Property deductible is waived when loss only involves building glass.
Personal Effects	Applies on-premises only.
	Primary coverage (not excess over a homeowners policy, for example).
	For members, full replacement cost with no dollar limit.
	For non-members, a limit of \$1,500 per person applies.
	No deductible.
Member's Property (other than personal	Limit of \$5,000 (for items such as computers, all-terrain vehicles, snowmobiles, golf carts, personal watercraft, tools and firearms).
effects)	Primary Coverage and not excess over a homeowners policy.
	No deductible.
Member's Real Property Deductible	We will provide up to \$1,000 deductible reimbursement for damage to members residence when responding to an emergency on your behalf.
Reimbursement	No deductible.
Pollution Clean-Up	Applies on-premises only.
	Limit of \$150,000 for remediation expense you incur resulting from fire, lightning, windstorm, hail, explosion, civil commotion, vehicles, aircraft, smoke, vandalism, sprinkler leakage, sinkhole collapse, volcanic action, falling objects, the weight of ice / snow / sleet, or water damage.
	Limit of \$25,000 for all other covered causes of loss.
Sirens & Antennas	Sirens, antennas, towers and similar structures and their associated equipment are automatically covered away from your scheduled premises, if you have building coverage with VFIS.
	No sub-limit applies.
Permanently	Limit of \$125,000.
Installed Property Off-Premises	Applies to outdoor property permanently installed away from your premises.
	Includes traffic control devices, statues, signs, monuments and fire hydrants.



Commandeered Property of Others	Replacement cost coverage for any commandeered property other than autos.
	Includes the owner's loss of use.
	No dollar limit.
	No deductible if commandeered property belongs to volunteer, employee, director, officer or trustee.
Computer Software	Automatic coverage for the cost of restoring or replacing your organization's data and the media on which it is stored.
	Covered causes of loss include computer virus and the breakdown of computer hardware.
	Applies on-premises or off-premises.
	Automatic limit of \$250,000, higher limits are available.
Unintentional Errors	Limit of \$500,000.
and Omissions	Covers for unintentionally omitting real property at the time of application or unintentionally failing to report all real property prior to the beginning of the policy period.
Vehicle Parts	Limit of \$25,000.
	Automatically covers vehicle stock owned by you and stored inside a building or at your location.
Valuable Papers & Records	Pays the costs you incur to restore or replace any such documents following a covered loss.
	No dollar limit.
	Applies on-premises or off-premises.
Accounts Receivable	Pays the costs you incur in restoring your accounts receivable records following a covered loss.
	Also pays amounts you can't collect if your accounts receivable records can't be restored.
	No dollar limit.
	Applies on-premises or off-premises.
Lock and Key Replacement	Limit of \$25,000 to reimburse you for lock and key replacement after theft at your location.
	No deductible.



Recharge Costs	Will pay the cost to recharge fire extinguishing equipment at your premises regardless of whether the discharge was accidental or was the result of a covered cause of loss.
	No dollar limit.
	No deductible.
Limited Coverage for Fungus, Wet Rot,	A standard exclusion applies to loss or damage caused by fungus, wet rot, dry rot or bacteria.
Dry Rot or Bacteria	However, the exclusion doesn't apply if the fungus, wet rot, dry rot or bacteria results from fire or lightning.
	An extension has been added to provide a \$25,000 sub-limit if the fungus, wet rot, dry rot or bacteria arises from flood or from a specified cause of loss, as defined in the policy. This sub-limit is the most that will be paid in any policy term regardless of the number of occurrences.
Deductible Waiver	If a Property claim occurs in conjunction with a claim under a VFIS Auto Physical Damage or Portable Equipment coverage, the various deductibles will not be stacked.
	Only one deductible, the largest, will apply.
Coinsurance	Does not apply to your buildings if they're insured on a guaranteed replacement cost basis.
	Does not apply to your contents if they're insured on a replacement cost basis or on a guaranteed replacement cost basis.
Mechanics Tools	Members tools are included as personal property on a replacement cost basis.



CRIME

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

VFIS offers a broad range of fidelity coverages which are customized to meet the needs of emergency service organizations including the following.

- **Employee Dishonesty** provides reimbursement for the loss of your organization's money or other property resulting from dishonest acts of your volunteers or employees.
- **Computer and Funds Transfer Fraud** will pay for loss the insured sustains arising directly out of the loss of or damage to money, securities, and property other than money and securities. This loss must result directly from the use of any computer to fraudulently cause transfer of that property from inside the premises or banking premises to a person outside those premises, or to a place outside those premises.
- **Fraudulent Impersonation** will pay for loss the insured sustains arising directly from having, in good faith, transferred money, securities or other properties in reliance upon a transfer instruction purportedly issued by an employee, customer or vendor, but which proves to have been fraudulently issued by an imposter.
- Identity Fraud Expense is the compensation of expense sustained that was incurred by the insured or any employee as a result directly from identity fraud.

Your selections are indicated below.

Schedule of Covered Entities – SCHEDULE #1

- FIRE 1 FOUNDATION
- SOUTH SNOHOMISH COUNTY FIRE & RESCUE VOLUNTEER FIREFIGHTERS ASSOCIATION

Computer and Funds Transfer Fraud	<u>Limit</u> \$10,000	<u>Deductible</u> None
Fraudulent Impersonation	<u>Limit</u> \$10,000	<u>Deductible</u> None
Identity Fraud Expense	<u>Limit</u> \$10,000	<u>Deductible</u> None

Covered Entity

- SOUTH SNOHOMISH COUNTY FIRE & RESCUE REGIONAL FIRE AUTHORITY

Public Employee Dishonesty – Blanket Per Employee Includes Treasurers and Tax Collectors		<u>Limit</u>	Deductible	Faithful <u>Performance</u>
		\$250,000	None	Yes
Specific Excess	Number in			Faithful
Position Schedule	Position	<u>Limit</u>		Performance
FINANCE DIRECTOR	1	\$50 <u>,000</u>		Yes
SOUTH SNOHOMISH COUNTY FIRE 8	& RESCUE REGIONAL FIRE	AUTHORITY		



Specific Excess <u>Position Schedule</u> HUMAN RESOURCE SOUTH SNOHOMISH COUNTY FIRE	Number in <u>Position</u> 1 & rescue regional fir	<u>Limit</u> \$50,000 e authority		Faithful <u>Performance</u> Yes
Public Employee Dishonesty – Blanket Per Loss		Limit	Deductible	Faithful Performance
Includes Treasurers and Tax Collectors			Deddctible	Periormance
This limit is in excess of the Per Employee limit.		\$4,750,000	None	Yes
Public Employee Dishonesty –	Numberin			Faithful
Position Schedule	Position	<u>Limit</u>	<u>Deductible</u>	Performance
AUDITING OFFICER	1	\$5,000,000	None	Yes
DISTRICT SECRETARY	1	\$50,000	None	Yes
FIRE CHIEF	1	\$100,000	None	Yes
ASSISTANT FIRE CHIEF	2	\$100,000	None	Yes
FINANCE SPECIALIST	1	\$100,000	None	Yes
FINANCIAL ANALYST	1	\$100,000	None	Yes
Forgery or Alteration		<u>Limit</u>	Deductible	
		\$1,000,000	None	
Computer and Funds Transfer Frau	<u>ıd</u>	<u>Limit</u>	<u>Deductible</u>	
		\$100,000	None	
Fraudulent Impersonation		<u>Limit</u>	Deductible	
		\$100,000	None	
Identity Fraud Expense		<u>Limit</u>	Deductible	
		\$25,000	None	

Covered Entity

- FIRE 1 FOUNDATION

Employee Dishonesty –			Faithful
<u>Blanket</u>	<u>Limit</u>	<u>Deductible</u>	Performance
	\$50,000	None	No

Covered Entity

- SOUTH SNOHOMISH COUNTY FIRE & RESCUE VOLUNTEER FIREFIGHTERS ASSOCIATION

Employee Dishonesty –			Faithful
<u>Blanket</u>	<u>Limit</u>	<u>Deductible</u>	Performance
	\$50,000	None	No



PORTABLE EQUIPMENT

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

Blanket Portable Equipment Coverage

<u>Covered For</u>	Limit	<u>Deductible</u>
All causes of physical loss unless	Guaranteed Replacement Cost	\$500
excluded		

If Portable Equipment coverage is provided on a blanket basis, coverage is provided for all portable firefighting, ambulance and rescue related equipment owned or furnished for your regular use. Note that boats over 100 horsepower are not covered under blanket; they must be scheduled.

Scheduled Portable Equipment Coverage

Deductible: \$500

Description of Equipment	Serial Number	<u>Limit</u>
06 NORTHWIND 30' RESCUE BOAT	NWP461010506	\$250,000
17 YAMAHA 300 HP MOTOR	6CEX-1044574	\$30,000
17 YAMAHA 300 HP MOTOR	6CFX-1013009	\$30,000

Scheduled Portable Equipment coverage is provided for equipment specifically listed in the schedule above. Coverage can be scheduled for portable firefighting, ambulance and rescue related equipment and for watercraft over 100 horsepower owned by you or furnished to you for your regular use. Coverage is provided on a *replacement cost* basis up to the limit shown in the schedule.



PORTABLE EQUIPMENT – COVERAGE HIGHLIGHTS

The following apply unless noted otherwise in this proposal:

Personal Effects	Applies on and off premises while on authorized duty. Primary coverage (not excess over a homeowners policy, for example). Full replacement cost with no dollar limit. No deductible.			
Non-owned Portable Equipment	Coverage for portable equipment of others temporarily in your possession. Automatic \$50,000 limit.			
Unmanned Aircraft (Drones) Deductible Waiver	 Pays to repair or replace your lost or damaged unmanned aircraft. Coverage does not apply when the unmanned aircraft is: rented, leased or loaned to others without an operator who is your employee or volunteer used in any professional or organized racing, demolition or stunting activity. This includes practicing for such activity. \$500 deductible applies. Pays up to \$35,000 in any one occurrence. 			
Deductible waiver	If a Portable Equipment claim occurs in conjunction with a claim under a VFIS Auto Physical Damage or Property coverage, the various deductibles will not be stacked. Only one deductible, the largest, will apply. The deductible will be waived after three consecutive years with no portable equipment losses.			
Coverage to Replace Obsolete Chargers	We will pay for new compatible mobile or stationary chargers when associated covered portable equipment is damaged and replaced.			
Theft of Portable Equipment by Member	At your request we will pay up to \$5,000 for portable equipment taken by a volunteer or employee no longer affiliated with your organization provided the equipment is reported as stolen. The most we will pay in one year is \$10,000.			
Trailers Used to Transport Covered PE	Physical damage coverage is provided automatically if the primary use of the trailer is to provide mobility to other covered portable equipment. Example: A portable generator is installed on a small trailer that can be pulled to an emergency scene by a number of vehicles; both the generator and its trailer would be covered under Blanket Portable Equipment.			
Blanket Coverage	Applies to:1. All boats up to 100 horsepower, and2. All jet skis and waverunners regardless of horsepower.			
Scheduled Coverage	Required for boats in excess of 100 horsepower.			
Reporting	No need to determine equipment values if you select blanket coverage. VFIS will rate the coverage based on the number and type of vehicles you use.			



	If you have properly reported all such vehicles, your portable equipment is covered up to its full replacement cost.
Temporary Storage for Portable Equipment	Provides coverage for your incurred costs to obtain temporary storage for portable equipment due to a covered loss or as a result of a motor vehicle accident. Coverage is provided for costs incurred up to 60 days, but not more than \$5,000.
Accident-Impaired Patient Transport Equipment Reimbursement	We will reimburse up to \$10,000 each policy period for amounts paid to replace patient transport equipment that had its warranty voided following a motor vehicle accident, even though it did not sustain observable physical damage.



AUTO

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

Coverage	<u>Symbols</u>	Limits
Bodily Injury / Property Damage Combined Single Limit	1	\$1,000,000
"No Fault" or Statutory Personal Injury Protection		Not Included
Medical Payments	7	\$10,000
Uninsured Motorists	10	\$1,000,000
Underinsured Motorists Insurance	10	\$1,000,000
Hired & Borrowed Vehicles		Included
Commandeered Vehicles		Included
Volunteers/Employees as Insureds Under Non-Owned Autos		Included (Primary)
Temporary Substitute Vehicles		Included
Fellow Member Liability		Included
Incidental Garage Liability		Included
Physical Damage Comprehensive	7,8	see Schedule of Vehicles
Physical Damage Collision	7,8	see Schedule of Vehicles
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Schedule of Vehicles

<u>Year</u>	Make & Model	VIN	<u>PE</u>	<u>ACV</u>	Agreed <u>Value</u>	Comp. <u>Ded.</u>	Coll. <u>Ded.</u>
1925	REO ANTIQUE	0582	ОТН		\$10,000	\$2,000	\$2,000
1992	DODGE SERVICE	1B7KE26C4NS680942	OTH		N/A	N/A	N/A
2001	EMERGENCY-1 AERIAL	4EN3ABA8111003138	AD		\$550,000	\$2,000	\$2,000
2001	H&W PUMPER	4S7AT33991C039627	PR		\$275,000	\$2,000	\$2,000
2005	FORD FIRST RESPONDER	1FMDU72K95ZA66946	FR		\$40,000	\$2,000	\$2,000
2005	DODGE CARAVAN	2D8GP44L85R529474	OTH	х	N/A	\$2,000	\$2,000
2005	CHEVY FIRST RESPONDER	1GNEK13Z55J245157	FR		\$40,000	\$2,000	\$2,000
2005	CHEVY FIRST RESPONDER	1GNEK13Z75J244592	FR		\$40,000	\$2,000	\$2,000
1994	CHEVY AIR CASCADE	AGBKP32K8R3311793	AC		\$10,823	\$2,000	\$2,000
2005	CHEVY FIRST RESPONDER	1GNEK13Z15J251554	FR		\$40,000	\$2,000	\$2,000
2006	TRLBL TRAILER	5NHUTBT296T405828	ОТН		\$6,346	\$2,000	\$2,000
2006	TRLBL TRAILER	5NHUTBT256T405986	OTH		\$6,346	\$2,000	\$2,000
2007	CHEVY COMMAND	3GNGK26K77G161861	ОТН		\$40,000	\$2,000	\$2,000
2007	CHEVY COLORADO (CHIEF'S VEH)	1GCCS19E578148054	OTH	х	N/A	\$2,000	\$2,000
2007	CHEVY COLORADO (CHIEF'S VEH)	1GCCS19EX78149247	ОТН	х	N/A	\$2,000	\$2,000
2007	CHEVY COMMAND VEH	1GNFK13017J215050	ОТН		\$50,000	\$2,000	\$2,000
2008	CHEVY UPLANDER	1GBDV13WX8D211305	ОТН	х	N/A	\$2,000	\$2,000
	1925 1992 2001 2005 2005 2005 2005 2005 2005 200	1925REO ANTIQUE1992DODGE SERVICE2001EMERGENCY-1 AERIAL2001H&W PUMPER2005FORD FIRST RESPONDER2005DODGE CARAVAN2005CHEVY FIRST RESPONDER2005CHEVY FIRST RESPONDER2005CHEVY FIRST RESPONDER2005CHEVY FIRST RESPONDER2005CHEVY FIRST RESPONDER2005CHEVY FIRST RESPONDER2006TRLBL TRAILER2006TRLBL TRAILER2007CHEVY COLORADO (CHIEF'S VEH)2007CHEVY COLORADO (CHIEF'S VEH)2007CHEVY COMMAND VEH	1925 REO ANTIQUE 0582 1992 DODGE SERVICE 1B7KE26C4NS680942 2001 EMERGENCY-1 AERIAL 4EN3ABA8111003138 2001 H&W PUMPER 4S7AT33991C039627 2005 FORD FIRST RESPONDER 1FMDU72K95ZA66946 2005 DODGE CARAVAN 2D8GP44L85R529474 2005 CHEVY FIRST RESPONDER 1GNEK13Z55J245157 2005 CHEVY FIRST RESPONDER 1GNEK13Z75J244592 1994 CHEVY FIRST RESPONDER 1GNEK13Z75J244592 1994 CHEVY FIRST RESPONDER 1GNEK13Z15J251554 2005 CHEVY FIRST RESPONDER 1GNEK13Z15J251554 2006 TRLBL TRAILER SNHUTBT296T405828 2006 TRLBL TRAILER SNHUTBT256T405986 2007 CHEVY COLORADO (CHIEF'S VEH) 1GCCS19E578148054 2007 CHEVY COLORADO (CHIEF'S VEH) 1GNFK13017J215050	1925REO ANTIQUE0582OTH1992DODGE SERVICE1B7KE26C4NS680942OTH2001EMERGENCY-1 AERIAL4EN3ABA8111003138AD2001H&W PUMPER4S7AT33991C039627PR2005FORD FIRST RESPONDER1FMDU72K95ZA66946FR2005DODGE CARAVAN2D8GP44L85R529474OTH2005CHEVY FIRST RESPONDER1GNEK13Z55J245157FR2005CHEVY FIRST RESPONDER1GNEK13Z75J244592FR2005CHEVY FIRST RESPONDER1GNEK13Z15J251554FR2005CHEVY FIRST RESPONDER1GNEK13Z15J251554FR2005CHEVY FIRST RESPONDER1GNEK13Z15J251554FR2006TRLBL TRAILERSNHUTBT296T405828OTH2006TRLBL TRAILERSNHUTBT26T405986OTH2007CHEVY COLORADO (CHIEF'S VEH)1GCCS19E578148054OTH2007CHEVY COLORADO (CHIEF'S VEH)1GNFK13017J215050OTH	1925REO ANTIQUE0582OTH1992DODGE SERVICE1B7KE26C4NS680942OTH2001EMERGENCY-1 AERIAL4EN3ABA8111003138AD2001H&W PUMPER4S7AT33991C039627PR2005FORD FIRST RESPONDER1FMDU72K95ZA66946FR2005DODGE CARAVAN2D8GP44L85R529474OTHX2005CHEVY FIRST RESPONDER1GNEK13Z55J245157FR2005CHEVY FIRST RESPONDER1GNEK13Z75J244592FR2005CHEVY FIRST RESPONDER1GNEK13Z15J251554FR2005CHEVY FIRST RESPONDER1GNEK13Z15J251554FR2006TRLBL TRAILERSNHUTBT296T405828OTH2007CHEVY COLORADO (CHIEF'S VEH)1GCCS19E578148054OTH2007CHEVY COLORADO (CHIEF'S VEH)1GNEK13017J215050OTH2007CHEVY COLORADO (CHIEF'S VEH)1GNFK13017J215050OTH	YearMake & ModelVINPEACVValue1925REO ANTIQUE0582OTH\$10,0001992DODGE SERVICE1B7KE26C4NS680942OTHN/A2001EMERGENCY-1 AERIAL4EN3ABA8111003138AD\$550,0002001H&W PUMPER4S7AT33991C039627PR\$275,0002005FORD FIRST RESPONDER1FMDU72K95ZA66946FR\$40,0002005DODGE CARAVAN2D8GP44L85R529474OTHXN/A2005CHEVY FIRST RESPONDER1GNEK13Z55J245157FR\$40,0002005CHEVY FIRST RESPONDER1GNEK13Z75J244592FR\$40,0002005CHEVY FIRST RESPONDER1GNEK13Z15J251554FR\$40,0002005CHEVY FIRST RESPONDER1GNEK13Z15J251554FR\$40,0002006TRLBL TRAILERSNHUTBT296T405828OTH\$6,3462007CHEVY COMMAND3GNGK26K77G161861OTH\$40,0002007CHEVY COLORADO (CHIEF'S VEH)1GCCS19ES78148054OTHXN/A2007CHEVY COLORADO (CHIEF'S VEH)1GNFK13017J215050OTHXN/A2007CHEVY COLORADO (CHIEF'S VEH)1GNFK13017J215050OTHXN/A2007CHEVY COLORADO (CHIEF'S VEH)1GNFK13017J215050OTHXN/A	YearMake & ModelVINPEACVValueDed.1925REO ANTIQUE0582OTH\$10,000\$2,0001992DODGE SERVICE1B7KE26C4NS680942OTHN/AN/A2001EMERGENCY-1 AERIAL4EN3ABA8111003138AD\$550,000\$2,0002001H&W PUMPER457AT33991C039627PR\$275,000\$2,0002005FORD FIRST RESPONDER1FMDU72K95ZA66946FR\$40,000\$2,0002005DODGE CARAVAN2D8GP44L85R529474OTHXN/A\$2,0002005CHEVY FIRST RESPONDER1GNEK13275J245157FR\$40,000\$2,0002005CHEVY FIRST RESPONDER1GNEK13275J24592FR\$40,000\$2,0001994CHEVY AIR CASCADEAGBKP32K8R3311793AC\$10,823\$2,0002005CHEVY FIRST RESPONDER1GNEK13215J251554FR\$40,000\$2,0002006TRLBL TRAILERSNHUTBT296T405828OTH\$6,346\$2,0002007CHEVY COLORADO (CHIEF'S VEH)1GCCS19ES78148054OTHXN/A\$2,0002007CHEVY COLORADO (CHIEF'S VEH)1GCCS19EX78149247OTHXN/A\$2,0002007CHEVY COLORADO (CHIEF'S VEH)1GNFK13017J215050OTHXN/A\$2,0002007CHEVY COLORADO (CHIEF'S VEH)1GNFK13017J215050OTHXN/A\$2,0002007CHEVY COLORADO (CHIEF'S VEH)1GNFK13017J215050OTHXN/A\$2,000

Vehicle <u>No.</u>	<u>Year</u>	Make & Model	VIN	<u>PE</u>	<u>ACV</u>	Agreed <u>Value</u>	Comp. <u>Ded.</u>	Coll. <u>Ded.</u>
18	2007	BRAUN AMB ALS	1FDXE45PX6DB33892	ALS		\$230,000	\$2,000	\$2,000
19	2007	SPARTAN PUMPER LDH	4F7AT2F936C056016	PLDH		\$450,000	\$2,000	\$2,000
20	2007	SPARTAN PUMPER LDH	4S7AT2F956C056017	PLDH		\$450,000	\$2,000	\$2,000
21	2009	SPARTAN AERIAL	4S7AX2F949C070371	AD		\$800,000	\$2,000	\$2,000
22	2009	CHEVY COMMAND	1GNGK46K89R254631	OTH		\$47,500	\$2,000	\$2,000
23	2008	SPARTAN PUMPER	4S7AT2F998C070036	PR		\$450,000	\$2,000	\$2,000
24	2008	SPARTAN PUMPER	4S7AT2F908C070037	PR		\$450,000	\$2,000	\$2,000
25	2010	Ford Hazmat	1FDAW5HR6AEA09059	HM		\$35,000	\$2,000	\$2,000
26	1998	DARLEY PUMPER	4S7AT419XWC021122	PR		\$150,000	\$2,000	\$2,000
27	1998	DARLEY PUMPER	4S7AT4198WC021121	PR		\$150,000	\$2,000	\$2,000
28	2006	SPARTAN PUMPER	4S7AT2F996C053881	PR		\$375,000	\$2,000	\$2,000
29	2005	CHEVY COMMAND	1GNEK13Z75R220701	OTH		\$25,000	\$2,000	\$2,000
30	2006	FORD COMMAND	1FTSW21508EA62932	OTH		\$32,500	\$2,000	\$2,000
31	2007	FORD COMMAND	1FMCU73158KA30357	OTH		\$18,000	\$2,000	\$2,000
32	2007	CHEVY COMMAND	3GNGK26K87G304591	OTH		\$45,000	\$2,000	\$2,000
33	2008	SPARTAN PUMPER LDH	4S7AT2F9X9C070533	PLDH		\$450,000	\$2,000	\$2,000
34	2009	BRAUN AMB ALS	1FDXE45P89DA63703	ALS		\$230,000	\$2,000	\$2,000
35	2009	SPARTAN RESCUE HVY	4S7AT2D9X9C071345	RTH		\$450,000	\$2,000	\$2,000
36	2009	SPARTAN RESCUE HVY	4S7AT2D959C072158	RTH		\$560,000	\$2,000	\$2,000
37	2007	CARRY-ALL TRAILER	4YMUL08147T092838	OTH		\$5,000	\$2,000	\$2,000
38	2005	FORD COMMAND	1FMPU16595LA77690	OTH		\$10,000	\$2,000	\$2,000
39	2015	CHEVY COMMAND	1GNSK5EC2FR275785	OTH		\$65,000	\$2,000	\$2,000
40	2016	FORD COMMAND	1FM5K8ARXGGB55597	OTH		\$55,000	\$2,000	\$2,000
41	2016	FORD COMMAND	1FM5K8AR3GGB55599	OTH		\$55,000	\$2,000	\$2,000
42	2016	FORD COMMAND	1FM5KA8R1GGB55598	OTH		\$55,000	\$2,000	\$2,000
43	2016	FORD FIRST RESPONDER	1FTBF2B67GEB54822	FR		\$35,000	\$2,000	\$2,000
44	2017	SPARTAN PUMPER LDH	4S7AT2D98HC081046	PLDH		\$632,500	\$2,000	\$2,000
45	2017	SPARTAN PUMPER LDH	4S7AT2D98HC081047	PLDH		\$632,500	\$2,000	\$2,000
46	2017	FORD COMMAND	1FAHP2H81HG111539	OTH		\$40,000	\$2,000	\$2,000
47	2017	CHEVY FIRST RESPONDER	1GNSKDEC9HR232298	FR		\$61,000	\$2,000	\$2,000
48	2017	FORD COMMAND	1FM5K8ARXHGC27559	OTH		\$55,000	\$2,000	\$2,000
49	2006	FORD COMMAND	1FMPU165X6LA73651	OTH		\$45,000	\$2,000	\$2,000
50	2007	SPARTAN PUMPER LDH	4S7AT2C996C055845	PLDH		\$550,000	\$2,000	\$2,000
51	2007	FORD COMMAND	1FMFU16587LA84189	OTH		\$45,000	\$2,000	\$2,000
52	2006	FORD COMMAND	1FMFU16567LA87138	OTH		\$45,000	\$2,000	\$2,000
53	2009	BRAUN AMB BLS	1HTMRAZL89H135156	BLS		\$250,000	\$2,000	\$2,000
54	2010	SPARTAN PUMPER LDH	4S7AT2C979C071160	PLDH		\$550,000	\$2,000	\$2,000

Vehicle <u>No.</u>	<u>Year</u>	Make & Model	VIN	<u>PE</u>	Agreed <u>ACV Value</u>	Comp. <u>Ded.</u>	Coll. <u>Ded.</u>
55	2015	FORD FIRST RESPONDER	1FMCU9GXXFUC06125	FR	\$32,500	\$2,000	\$2,000
56	2015	FORD FIRST RESPONDER	1FMCU9GX1FUC06126	FR	\$32,500	\$2,000	\$2,000
57	2015	FORD FIRST RESPONDER	1FMCU9GX3FUC06127	FR	\$32,500	\$2,000	\$2,000
58	2015	FORD COMMAND	1FAHP2H84FG157248	OTH	\$30,000	\$2,000	\$2,000
59	2016	FORD COMMAND	1FAHP2H81GG111992	OTH	\$30,000	\$2,000	\$2,000
60	2001	FORD FIRST RESPONDER	1FMCU02171KC24181	FR	\$20,000	\$2,000	\$2,000
61	2001	SPARTAN PUMPER	4S7AT41931C037736	PR	\$250,000	\$2,000	\$2,000
62	2018	FORD COMMAND	1FTFW1E57JKC15965	OTH	\$40,000	\$2,000	\$2,000
63	2017	FORD AMB ALS	1FDXE4FS7HDC57740	ALS	\$230,000	\$2,000	\$2,000
64	2018	CHEVY COMMAND	1GNSKDEC8JR251494	OTH	\$50,000	\$2,000	\$2,000
65	2018	CHEVY COMMAND	1GNSKDEC3JR251712	OTH	\$50,000	\$2,000	\$2,000
66	2017	FORD AMB ALS	1FDXE4FS9HDC57741	ALS	\$230,000	\$2,000	\$2,000
67	2018	FORD AMB ALS	1FDXE4FSXJDC11065	ALS	\$230,000	\$2,000	\$2,000
68	2017	FORD AMB ALS	1FDXE4DS7HDC56295	ALS	\$230,000	\$2,000	\$2,000
69	2017	FORD AMB ALS	1FDXE4FSPHDC56296	ALS	\$230,000	\$2,000	\$2,000
70	2017	FORD AMB ALS	1FDXE4FS0HDC57739	ALS	\$230,000	\$2,000	\$2,000
71	2018	EAGLE DUMP TRAILER	184BU1026JC025309	OTH	\$6,000	\$2,000	\$2,000
72	2018	FORD AMB ALS	1FDXE4FS1JDC11066	ALS	\$230,000	\$2,000	\$2,000
73	2017	CHEVY COMMAND	1GNSKDEC3HR308775	OTH	\$50,000	\$2,000	\$2,000
74	2017	CHEVY COMMAND	1GNSKDEC4HR309563	OTH	\$50,000	\$2,000	\$2,000
75	2018	FORD AMB ALS	1FDXE4FS3JDC11067	ALS	\$175,000	\$2,000	\$2,000
76	2018	PIERCE ENFORCER AERIAL	4P1BCAGF4JA018522	AD	\$1,200,000	\$2,000	\$2,000
77	2018	FORD AMB ALS	1FDXE4FS5JDC11068	ALS	\$175,000	\$2,000	\$2,000
78	2019	TOYOTA COMMAND	2T3RWRFV9KW003376	OTH	\$33,000	\$2,000	\$2,000
79	2003	NORTHSTAR AMB ALS	1FDXE45F43HB46522	ALS	\$230,000	\$2,000	\$2,000
80	2019	NORTHSTAR AMB ALS	1FDXE4FS2KDC33417	ALS	\$230,000	\$2,000	\$2,000
81	2019	NORTHSTAR AMB ALS	1FDXE4FS7KDC28455	ALS	\$230,000	\$2,000	\$2,000
82	2019	PIERCE PUMPER LDH	4P1BAAFF0KA020194	PLDH	\$700,000	\$2,000	\$2,000
83	2019	PIERCE PUMPER LDH	4P1BAAFF0KA020195	PLDH	\$700,000	\$2,000	\$2,000
84	2003	FORD AMB ALS	1FDXE45F23HB46521	ALS	\$230,000	\$2,000	\$2,000
85	2020	Toyota command	2T3RWRFV7LW061911	OTH	\$33,500	\$2,000	\$2,000
86	2020	TOYOTA COMMAND	2T3RWRFV6LW062810	OTH	\$33,500	\$2,000	\$2,000
87	2020	TOYOTA COMMAND	2T3RWRFV7LW062296	OTH	\$33,500	\$2,000	\$2,000
88	2020	TOYOTA COMMAND	2T3RWRFV6LW061141	OTH	\$33,500	\$2,000	\$2,000
89	2020	PIERCE ENFORCER PUMPER LDH	4P1BAAFF3LA021261	PLDH	\$695,000	\$2,000	\$2,000
90	2020	PIERCE ENFORCER PUMPER LDH	4P1BAAFF5LA021262	PLDH	\$695,000	\$2,000	\$2,000
91	2019	NORTHSTAR AMB ALS	1FDXE4FS4KDC33418	ALS	\$230,000	\$2,000	\$2,000

Vehicle <u>No.</u>	Year	Make & Model	VIN	<u>PE</u>	ACV	Agreed <u>Value</u>	Comp. <u>Ded.</u>	Coll. <u>Ded.</u>
92	2019	NORTHSTAR AMB ALS	1FDXE4FS6KDC33419	ALS		\$230,000	\$2,000	\$2,000
93	2020	FORD COMMAND	1FM5K8AW9LGB37172	OTH		\$60,000	\$2,000	\$2,000
94	2020	CHEVY EXPRESS VAN	1GAZGNFP5L1262124	ОТН	Х	N/A	\$2,000	\$2,000
95	2020	FORD COMMAND	1FM5K8AW9LGB37173	OTH		\$60,000	\$2,000	\$2,000
96	2021	NORTHSTAR AMB ALS	1FDXE4FN6MDC12602	ALS		\$230,000	\$2,000	\$2,000
97	2021	NORTH STAR AMB ALS	1FDXE4FN8MDC12603	ALS		\$230,000	\$2,000	\$2,000
98	2021	NORTH STAR AMB ALS	1FDXE4FN7MDC38755	ALS		\$230,000	\$2,000	\$2,000
99	2021	PIERCE ENFORCER PUMPER LDH	4P1BAAFF1MA022698	PLDH		\$750,000	\$2,000	\$2,000
100	2021	CHEVY COMMAND	1GBSKLED9MR466256	OTH		\$87,000	\$2,000	\$2,000
101	2021	BRAUN AMB ALS	1FDXE4FNXMDC12604	ALS		\$230,000	\$2,000	\$2,000
102	2022	FORD SERVICE	NM0LS7T26N1524555	OTH	Х	N/A	\$2,000	\$2,000
103	2022	FORD AMB ALS	1FDXE4FN9NDC35521	ALS		\$258,000	\$2,000	\$2,000
104	2022	FORD AMB ALS	1FDXE4FNXNDC35852	ALS		\$258,000	\$2,000	\$2,000
105	2022	FORD AMB ALS	1FDXE4FN1NDC35853	ALS		\$258,000	\$2,000	\$2,000
106	2022	PIERCE AERIAL	4P1BCAGF3NA024415	AD		\$1,576,413	\$2,000	\$2,000
107	2023	FORD SERVICE	1FTBW1XG2PKA85373	OTH	Х	N/A	\$2,000	\$2,000
108	2023	FORD AMB ALS	1FDXE4FN7PP39119	ALS		\$284,000	\$2,000	\$2,000
109	2023	FORD AMB ALS	1FDXE4FN3PDD39120	ALS		\$284,000	\$2,000	\$2,000
110	2023	#233 FORD FIRST RESPONDER	1FM5K8AB2PGA61328	FR		\$70,000	\$2,000	\$2,000
111	2024	SPARTAN PUMPER LDH	4S9BCEUB6RB559780	PLDH		\$1,000,000	\$2,000	\$2,000



Schedule of Vehicles – Insured's Identifiers

Only vehicles with an insured's identifier are shown below.

Vehicle	Voor	Maka 9 Madal	VIN	Insured's Identifier (How YOU refer to this vehicle)
<u>No.</u>	<u>Year</u>			Example: Chief's Vehicle
50	2007	SPARTAN PUMPER LDH	4S7AT2C996C055845	E14
51	2007	FORD COMMAND	1FMFU16587LA84189	BC15
52	2006	FORD COMMAND	1FMFU16567LA87138	BC15A
53	2009	BRAUN AMB BLS	1HTMRAZL89H135156	TR21LT
54	2010	SPARTAN PUMPER LDH	4S7AT2C979C071160	E15
55	2015	FORD FIRST RESPONDER	1FMCU9GXXFUC06125	FIA
56	2015	FORD FIRST RESPONDER	1FMCU9GX1FUC06126	FIB
57	2015	FORD FIRST RESPONDER	1FMCU9GX3FUC06127	FIC
58	2015	FORD COMMAND	1FAHP2H84FG157248	СН15
59	2016	FORD COMMAND	1FAHP2H81GG111992	FM
61	2001	SPARTAN PUMPER	4S7AT41931C037736	E15A
91	2019	NORTHSTAR AMB ALS	1FDXE4FS4KDC33418	00108
92	2019	NORTHSTAR AMB ALS	1FDXE4FS6KDC33419	00109



AUTO LIABILITY – COVERAGE HIGHLIGHTS

The following apply unless noted otherwise in this proposal:

Non-Owned Automobile	Covers your liability for vehicles hired, borrowed, or otherwise used on your behalf on an <i>excess basis</i> .				
	Covers your liability for commandeered vehicles used on your behalf on a <i>primary basis</i> .				
Volunteers/Employees as Insureds Under Non-	Volunteers/employees are covered while operating their own personal vehicle on behalf of the emergency service organization.				
Owned Automobiles	Coverage is on a primary basis.				
	Example: A firefighter responds in his personal vehicle on his department's behalf. Upon rounding a curve, he sees a disabled vehicle partially blocking the road. He swerves and accidentally strikes the motorist who was trying to flag down the firefighter. Non-owned vehicle liability would be provided to the firefighter on a primary basis up to the policy limit; not excess over the firefighter's personal auto policy.				
Additional Insured- Automatic	Any person or organization for which you have agreed in writing in a contract to be added as an additional insured.				
Expected or Intended Injury	Included for Bodily Injury or Property Damage when resulting from actions taken to protect persons or property.				
Temporary Substitute Vehicle	Coverage is provided when a replacement vehicle is loaned to you while a covered vehicle is temporarily out of service.				
	Coverage is on a primary basis.				
	Example: A department is temporarily loaned an ambulance while their covered ambulance is being serviced. The loaner is involved in an intersection accident injuring civilians. Liability coverage would be provided to the department on a primary basis up to the policy limit.				
Owner of Commandeered Auto	The owner of a commandeered auto in your temporary care, custody or control that is being used as part of an emergency operation is an insured.				
as an Insured	Coverage is on a <i>primary basis</i> .				
Uninsured Motorist/ Underinsured Motorist	Covers your organization for bodily injury and/or property damage sustained by an eligible party caused by a negligent uninsured/underinsured motorist or hit- and-run motorist, based on your state laws.				
Fellow Member Liability	Covers your volunteers and employees should they accidentally injure a co- volunteer or co-employee arising out of the use of a covered vehicle.				
	Note that the protection applies to the <i>individual</i> against whom the claim is made, whether or not a claim is made against you (the insured organization). Example: A fire truck is responding to an emergency call with lights and sirens activated. The vehicle operator fails to see a civilian vehicle resulting in a collision, injuring several passenger firefighters. Fellow member auto liability coverage would be provided to the fire truck driver up to the limit of the policy for claims arising from the injured passenger firefighters.				
Incidental Garage	Provides liability arising from autos used in connection with an insured's garage				
Liability	operations.				
	Coverage is primary.				
	Provides coverage for your organization if you service or store vehicles owned by others.				



AUTO PHYSICAL DAMAGE – COVERAGE HIGHLIGHTS

Agreed Value

Physical damage coverage on emergency vehicles is provided on an *Agreed Value* basis. In the event of a loss, you will receive the **lesser of**:

- 1. The cost to repair the covered vehicle; or
- 2. The cost to replace the part with a part of like kind and quality, without deduction for depreciation; or
- 3. The **cost to replace the entire vehicle with a comparable new vehicle,** manufactured to current specifications set by the NFPA, the U.S. Department of Transportation, or similar organization; or
- 4. The **agreed value** shown in the policy.

Note: If the estimated repair costs for a damaged vehicle covered on an *Agreed Value* basis exceed 60% of the *Agreed Value*, and you choose not to accept payment under paragraph 1. or 2. (above), VFIS will pay the lesser of paragraph 3. or 4. (above). Under this arrangement, VFIS has the rights to all recovery and salvage.

Furthermore, for repairs or replaced parts under paragraph 1. or 2. (above), VFIS will pay up to an additional 25% of the amount of the loss to cover the costs you incur in bringing the repaired or replaced parts into compliance with the latest safety standards. If recertification is required, we will also pay those costs.

Example: A fire department has a 2010 Mack pumper with an Agreed Value of \$150,000. While responding during an ice storm they lose control and slide into a tree. Damages are appraised at \$120,000. The replacement cost of the truck at the time of the loss is \$300,000. Since the Agreed Value selected by the insured is \$150,000 and 60% of the Agreed Value is \$90,000, the insured has the option to either repair the vehicle, taking the \$90,000 settlement, or be reimbursed the Agreed Value of \$150,000 with VFIS having the rights to the salvage.

We use this method for emergency vehicles and, at the insured's option, for Chief's vehicles insured on agreed value and private passenger vehicles less than five years old.

Actual Cash Value

Settles the claim based on the current market value of the damaged vehicle or part (old for old).

We use this method for most private passenger vehicles, service vehicles, some trailers and other non-emergency vehicles.

Stated Amount

Settles the claim by paying the lesser of:

1. The current market value of the damaged vehicle or part (old for old).

or

2. The amount stated in the policy.

We do not offer stated amount coverage because it is less advantageous to your organization than other methods.



AUTO PHYSICAL DAMAGE – COVERAGE HIGHLIGHTS – continued

Deductible Waiver	If an Automobile Physical Damage claim occurs in conjunction with a claim under a VFIS Portable Equipment or Property coverage, the various deductibles will not be stacked.				
	Only one deductible, the largest, will apply.				
	Additionally, regardless of the number of covered autos suffering a physical damage loss while engaged in a single firefighting, ambulance and/or rescue emergency, only one deductible, the largest, shall apply to the entire event.				
	Example: A fire department's rescue truck is responding with lights and siren when it is struck by another vehicle in an intersection and flipped over on its side. The rescue truck sustains \$20,000 of damages and the equipment inside the vehicle is broken and strewn across the roadway. The Waiver of Deductible clauses in the Automobile Physical Damage coverage and the Portable Equipment coverage provide that only one deductible, the largest, would be applied to the loss settlement.				
	The auto physical damage deductible will be waived after three consecutive years with no Auto Physical Damage claims. Maximum benefit of \$1,000.				
Collision	Damages from overturn or collision with another object.				
Comprehensive	Damages from causes other than collision or overturn.				
Freezing	Coverage for permanently attached special equipment for loss caused by freezing, unless caused by failure to maintain the equipment.				
	Includes, but is not limited to, pumps, gauges and tanks.				
	No freezing coverage for loss to vehicle engines.				
Volunteers' or Employees' Personal	Covers damage to a member's personally owned vehicle: 1. while enroute to, during, or returning from an emergency or other				
Automobiles	activity on behalf of your organization, and				
	2. resulting from a covered cause of loss.				
	Reimburses the members deductible up to \$2,500 if insurance is carried or actual cash value if no insurance is carried. Member is required to maintain minimum state liability coverage.				
Airbag Coverage	Covers loss caused by accidental discharge of an airbag.				
Hired, Borrowed or Commandeered	Coverage for hired, borrowed or commandeered vehicles on an actual cash value basis.				
Vehicles	Comprehensive deductible - \$50.				
	Collision deductible - \$100.				
	Coverage is primary.				
Temporary Substitute Vehicles	Coverage for fire trucks and ambulances with loss to be settled based on the valuation method of the owner's policy, up to \$1,000,000. Subject to the insured's deductible.				
Customized Vehicle	Applies to vehicles, such as chief's cars, insured on an actual cash value basis.				
Extension	Cost to replace custom features such as gold leaf lettering, light bars, sirens and radios on a <i>replacement cost basis</i> .				



Extended to equipment owned by the organization that's permanently installed in non-owned autos.



AUTO PHYSICAL DAMAGE – COVERAGE HIGHLIGHTS – continued

Towing and Labor	Coverage is provided for vehicles carrying comprehensive coverage. Labor must be performed at the disablement location. No mileage limit. Includes the cost to tow the disabled auto to multiple facilities as necessary, prior to delivery to the final repair facility. \$5,000 limit applies.
Recertification	Included in claims settlement for covered losses. No limit applies.
Removal of Apparatus from Environmentally Sensitive Areas	Following a covered loss, the cost of uprighting, retrieving or towing the vehicle is part of the claim adjustment expense. No sub-limit applies.
Rental Reimbursement coverage for Fire Truck and Ambulances	If no spare or reserve units are available, we provide automatic coverage for rental reimbursement expenses for firefighting rescue (class 7909) and ambulance vehicles (class 7919). Limit of \$300 any one day for up to 40 days.
Rental Reimbursement for member's personally owned vehicles	Coverage provided when loss occurs while enroute, during, returning from an emergency or while at the direction and knowledge of an officer of the insured. Limit of \$30 per day for up to 30 days.
Full Glass Coverage	No glass deductible for vehicles with comprehensive coverage.
Garagekeepers Insurance	 \$50,000 coverage for vehicles while left with an insured's garage operation. Comprehensive deductible - \$250. Collision deductible - \$500. Coverage is primary. Provides coverage for your organization if you service or store vehicles owned by others.



GENERAL LIABILITY / PROFESSIONAL HEALTH CARE LIABILITY

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

This coverage contains the following four sections:

- **Coverage A. Bodily Injury and Property Damage Liability** protects you when claims are made against you because of injury to others or damage to their property, unless caused by an auto.
- **Coverage B. Personal and Advertising Injury Liability** protects you when claims are made against you because of offenses such as false arrest, wrongful eviction or slander.
- **Coverage C. Professional Health Care Liability** protects you when claims are made against you as a result of your handling of patients, or providing, or failing to provide, medical services.
- **Coverage D. Medical Expense** protects you when claims are made against you as a result of injuries suffered by the public (not your volunteers or employees) because of your premises or operations. These expenses are payable even if the injury occurred through no fault of your own.

Coverages	<u>Limits</u>
Coverages A. and C. Each Occurrence or Medical Incident	\$1,000,000
Coverage B. Personal and Advertising Injury (each offense)	\$1,000,000
Coverage A. Fire Damage Legal Liability (any one fire)	\$1,000,000
Coverage D. Medical Expense (any one person)	\$10,000
Coverage Aggregates	
General Aggregate (the total payable in any policy term)	\$3,000,000
Products / Completed Operations Aggregate (the total payable in any policy term)	\$3,000,000

Optional Coverages (apply only if checked)

Employer's (Stop Gap) Liability

- Provides General Liability and Auto Liability coverage to you (the insured organization) if a volunteer or employee alleges they were injured on the job and are entitled to sue the organization and seek damages beyond the benefits available under the applicable Workers' Compensation statute.
- Needed when the insured's Workers' Compensation policy provided for your volunteers and/or employees does not contain Part Two – Employer's Liability.

Owned Watercraft Liability (boats exceeding 100 horsepower)



GENERAL LIABILITY – COVERAGE HIGHLIGHTS

The following apply unless noted otherwise in this proposal:

Volunteers and Employees as Insureds	Covers all volunteers (whether or not they are members of your organization) and employees are covered while acting on behalf of your organization.
Insuleus	Other insureds include your officers, directors, commissioners or trustees.
	Also included are the owners of any property you commandeer.
	VFIS coverage is primary for all of the above insureds, not excess of any personal insurance that may apply.
	Your medical director (if any) is an insured for actions taken on your behalf, with these stipulations:
	 Coverage doesn't apply to liability arising from any physician's providing or failing to provide on-line medical direction or medical command via a telecommunications device, and
	Hands-on treatment of a patient by a physician is excess of any medical malpractice insurance carried by the physician.
Blanket Additional Insureds	Automatically covers any person or organization required by contract to be an additional insured, but only for their liability arising out of your premises or operations.
	The contract must be in effect before the injury or damage occurs.
Fellow Member Liability	Covers your volunteers and employees should they accidentally injure a co- volunteer or co-employee while working on your behalf.
	Note that the protection applies to the individual against whom the claim is made, whether or not a claim is made against you (the insured organization).
"Good Samaritan" Liability	Covers your volunteer members and employees for liability arising from actions on their own to render services at the scene of an emergency requiring immediate action.
	Applies to professional health care or any other services.
	To qualify as a "Good Samaritan," the individual must act independently of your organization or any other organization.
Unlimited Defense Costs	The cost to defend you against covered claims is the responsibility of the company and will not erode your liability limits.
Intentional Acts	Provides liability protection if, in an attempt to save lives or protect property, your
	volunteers or employees intentionally cause bodily injury or property damage.
	Example (bodily injury): A distraught relative of a heart attack victim must be restrained in order for you to administer care to the patient, and in the process the relative is injured.
	Example (property damage): In order to gain access to a small fire in one apartment unit, a firefighter breaks down a door to a different unit that is not in imminent danger.



GENERAL LIABILITY – COVERAGE HIGHLIGHTS – continued

Pollution Liability	 Covers you for bodily injury or property damage arising out of a pollution incident resulting from any of the following: emergency operations away from your premises, training activities, or water runoff from the cleaning of equipment. Covers you for bodily injury or property damage arising out of an asbestos incident resulting from either of the following: emergency operations away from your premises, or training activities away from your premises, or training activities away from your premises. Covers you for Pollution Liability for your Above Ground Storage tanks. Coverage applies on a named peril basis. You must notify us of the incident as soon as practicable and not more than 14 days after the incident ends.
Liquor Liability	Covers you for bodily injury or property damage arising out of the serving or selling of alcoholic beverages. If alcoholic beverages are sold, VFIS requires that you obtain the proper license or permit, comply with our liquor loss control recommendation, and pay the applicable premium charge.
Contractual Liability	Covers you for the liability you agreed to assume of another party, either orally or in writing. The claim must be otherwise covered (not excluded). Example: Farmer Brown agrees to allow a fire department to use his pasture to hold a flea market, as long as any injuries to the public are agreed to be the responsibility of the fire department and not of Farmer Brown.
Watercraft Liability	 Automatic coverage for injury or damage arising from your use of the following: 1. non-owned boats, 2. owned boats that are not powered by motors, 3. owned boats that are powered by motors of not more than 100 horsepower, and 4. jet skis and waverunners regardless of horsepower.
Unmanned Aircraft (Drones)	Covers you for unmanned aircraft owned, operated, rented or loaned to you. Unmanned aircraft means an aircraft weighing 15 pounds or less that is not designed, manufactured or modified after manufacture to be controlled directly by a person from within or on the aircraft. Unmanned aircraft includes equipment used with the unmanned aircraft, provided such equipment is attached to or essential for its operation.
Fire Damage Legal Liability	Covers you for liability for fire damage to buildings your organization may rent or otherwise occupy with the permission of the owner. A similar provision covers your liability for other than fire damage to buildings or contents rented or loaned to you for not more than 30 consecutive days.
Damage to Property of Persons Receiving Services	Covers you for liability for a personal property loss suffered by a member of the public receiving services from you, provided the loss is caused by theft, physical damage or disappearance. Subject to a \$100 deductible each occurrence. Example: A patient transported by ambulance to the hospital notices shortly after arrival that his wallet and Rolex watch are missing; he files a claim against the ambulance squadalleging theft of the property.



Expanded Aggregate Limit

The General Aggregate Limit shown in the schedule applies separately to:

- 1. each named insured (unless you have selected a \$10,000,000 aggregate limit), and
- 2. each location you own or rent.



MANAGEMENT LIABILITY

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

	<u>Limits</u>
Each Offense or Wrongful Act	\$1,000,000
Aggregate (the total payable in any policy term)	\$3,000,000
Defense Expense for Injunctive Relief	\$100,000
Deductible (applicable to loss and loss adjustment expenses)	\$25,000

Claims made" basis

- This means that coverage is provided only for claims that are reported during the policy period, regardless of when the incident giving rise to a claim occurred. VFIS covers claims arising from incidents that occurred prior to the initial policy period as long as you had no reason to suspect that a claim might be presented as a result of the incident.
- If you are aware of any such incidents, be sure to report them to your agent immediately.

A signed and dated application is required before coverage can be bound.

U "Occurrence" basis

Cultury Link Hits

- This means that coverage is provided only for claims arising out of incidents that occur during the policy period, regardless of when the claim is eventually reported.
- You should not purchase occurrence coverage unless:
 - You are currently insured on an occurrence basis, or
 - You are currently insured on a claims made basis and you have decided to purchase a supplemental extended reporting period from your current carrier.

Cyber Liability and Privacy Crisis Management Expense

- **Cyber Liability** protects you when claims are made against you for monetary damages arising out of an electronic information security event.
- **Privacy Crisis Management Expense** reimburses for expenses you incur as a result of a privacy crisis management event first discovered during the policy period. This first party coverage is intended to provide professional expertise in the identification and mitigation of a privacy breach while satisfying all Federal and State statutory requirements.
- **Cyber Extortion Expense** reimburses for expenses you incur as a result of a cyber extortion threat first made against you during the policy period.

Cyber Liability			
Each Event	Limit:	\$1,000,000	Each Electronic Information Security Event
Retroactive	e Date:	None	
Privacy Crisis Mar	nagement Expense		
Each Event	Limit:	\$500,000	Each Privacy Event
Retroactive	e Date:	None	
Deductible	:	\$0	Each Privacy Event
Cyber Extortion E	xpense		
Each Event	Limit:	\$20,000	Each Cyber Extortion Threat
Deductible	:	\$0	Each Cyber Extortion Threat
Privacy Crisis Mar	nagement Expense		
and Cyber Extorti	ion Expense		
Aggregate	Limit:	\$500,000	Aggregate



MANAGEMENT LIABILITY – COVERAGE HIGHLIGHTS

Management Liability coverage protects you against claims for monetary damages arising out of:

Employment-related practices, such as wrongful termination, failure to promote or sexual harassment.

Example: A paid firefighter is terminated in July of 1999, and she is unable to find other similar employment until January of 2001. At a trial held later that year, she is successful in proving that she was wrongfully terminated and is awarded lost wages for the eighteen months she was unemployed. The organization's liability for these wages would be covered; liability for back wages, overtime or similar damages required by law or regulation are the obligation of the organization and would not be covered. This coverage would provide you with the cost of your legal defense, and pay an award up to the limit of liability.

Errors in the **administration of employee benefit plans,** such as Accident and Sickness coverage, Group Life or Workers' Compensation.

Example: A paramedic covered under an Accident & Sickness policy gives instructions to the squad's insurance administrator to name his daughter as his beneficiary. Following his death from an on-the-job traffic accident, his daughter learns that she is not entitled to any benefits under the policy because the change of beneficiary card was misplaced and never processed. She brings suit to recover the money she would have received had the change of beneficiary been handled properly. This coverage would provide you with the cost of your legal defense, and pay an award up to the limit of liability.

Other wrongful acts not specifically excluded.

Example: A taxpayer group brings suit against their fire district and its commissioners, alleging the improper spending of public funds. They argue that the commissioners have wasted their tax money by purchasing a state-of-the-art aerial device for \$750,000 even though there are no structures in the district more than two stories tall. This coverage would provide you and your commissioners with the cost of your legal defense, and pay an award up to the limit of liability.

Example: Bids are solicited from outside contractors to build a new ambulance garage. The lowest bid is not accepted, even though it was made by a fully qualified contractor of good reputation. The contractor sues the ambulance district, arguing that his bid was rejected for no good reason and alleging favoritism in the awarding of the contracts. This coverage would provide you with the cost of your legal defense, and pay an award up to the limit of liability.

MANAGEMENT LIABILITY - COVERAGE HIGHLIGHTS

The following apply unless noted otherwise in this proposal:

Defense Expense for Injunctive Relief	A plaintiff may sue your organization not for money but to require action of some type. They're seeking injunctive relief; they want your organization to do something or to stop doing something.
	This automatic coverage will reimburse your organization up to \$100,000 for reasonable legal fees incurred in your defense.
	Example: A person who was denied volunteer membership by you brings legal action to be admitted as a member.
	Example: A resident seeks an injunction to stop the fire department's installation of a siren directly behind her house.
Outside Directorship Liability	Automatically covers your volunteers or employees who choose to serve on the board of directors of an outside organization as long as that organization:
	1. is not-for-profit, and
	2. is related to the emergency services.
	Coverage is excess of any insurance.



MANAGEMENT LIABILITY - COVERAGE HIGHLIGHTS - continued

Volunteers and Employees as	Covers all volunteers (whether or not they are members of your organization) and employees while acting on behalf of your organization.	
Insureds	Other insureds include your officers, directors, commissioners or trustees.	
	Also included is your medical director (if any).	
	VFIS coverage is primary for all of the above insureds, not excess of any personal insurance that may apply.	
Estates, Heirs, and Legal Representatives	Included as insureds.	
Spousal Liability	Included, but only for acts within the course and scope of your operations.	
Unlimited Defense Costs	The cost to defend you against covered claims is the responsibility of the company and will not erode your liability limits.	
Fair Labor Standards Act Suit Defense Coverage	Limit of \$100,000 each claim incurred provided for the defense of any claim for violation of the Fair Labor Standards Act. This coverage is provided on a reimbursement basis.	
Blanket Additional Insureds	Automatically covers any person or organization that may be liable for your employment practices, your administration of employee benefit plans or other wrongful acts, but only to the extent of that liability.	
Unintentional Release of HIPAA Information	Limit of \$100,000 provided for the payment of fines and penalties assessed upon the insured for HIPAA violations.	
Expanded Aggregate Limit	The Aggregate Limit shown in the schedule applies separately to each named insured (unless you have selected a \$10,000,000 aggregate limit).	



MANAGEMENT LIABILITY – COVERAGE HIGHLIGHTS

- Cyber Liability and Privacy Crisis Management

The following apply unless noted otherwise in this proposal:

Cyber Liability	Coverage applies to each electronic information security event which includes:
	 Transmission of malware from your computer system to a third party; The inability of an authorized user to access your web site or your computer system because of a denial of service attack;
	A personal identity event or corporate privacy event caused by information that is obtained or released directly from your computer system.
	As used in this definition, a denial of service attack means an intentional attack directly on your computer system that prevents or slows down access to your web site or your computer network. However, a denial of service attack which affects the internet at large and is not directed at your computer system is not an electronic information security event.
Personal Identity	What is a personal identity event or corporate privacy event?
Event or Corporate Privacy Event	 Unauthorized disclosure of or failure to protect identifiable or confidential corporate information from misappropriation;
	 The failure to disclose or warn of an actual or potential disclosure of misappropriation of personally identifiable or confidential corporate information;
	 Violation of any federal or state privacy statute pertaining to the disclosure or misappropriation of personally identifiable or confidential corporate information.
Privacy Crisis Management	Pays on behalf applicable reasonable and necessary fees because of a privacy event which includes:
Expense Coverage	 To conduct a computer forensic analysis to determine the cause and extent of the privacy event;
	Provide a crisis management review and advice by an approved independent crisis management or legal firm;
	 Notification to affected parties for printing, advertising, mailing of materials or other costs;
	Travel expenses by directors and employees to mitigate damages;
	Call center services for credit monitoring as well as identity theft education and assistance for affected individuals.
	Privacy crisis management expenses shall not include:
	 Compensation, fees, benefits or overhead of any insured or "employee" of any insured;
	Costs or expenses that would have been incurred in the absence of the "privacy event;"
	 Costs or expenses associated with upgrading, maintaining, improving, repairir or remediating any "computer system," procedures, services or property as a result of a "privacy event."



MANAGEMENT LIABILITY - COVERAGE HIGHLIGHTS

- Cyber Liability and Privacy Crisis Management - continued

Privacy Event	What is a privacy event?
	 Unauthorized disclosure by you of personally identifiable or confidential corporate information or your failure to protect personally identifiable or confidential corporate information from misappropriation;
	 Failure to disclose or warn of an actual or potential disclosure or misappropriation of personally identifiable or confidential corporate information;
	 Violation of any federal or state privacy statute pertaining to the disclosure or misappropriation of personally identifiable or confidential corporate information.
Cyber Extortion Expense	Reimburses you for expenses paid in response to a cyber extortion threat.
Cyber Extortion	What is a cyber extortion threat?
Threat	A cyber extortion threat is a demand for monetary payment based on a credible threat directly involving <u>your</u> computer system (not the internet at large) to:
	1. Launch a denial of service attack;
	Steal, release or publish personally identifiable information or confidential corporate information;
	3. Alter, damage or destroy electronic data;
	 Cause you to transfer, pay or deliver any funds or property without your authorization.
Coverage Territory	For cyber liability, privacy crisis management expense and cyber extortion expense coverage, the coverage territory means worldwide, but the event and suit must take place in the U.S., Puerto Rico or Canada.



EXCESS LIABILITY

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

Excess Liability coverage protects you with the following:

- 1. It provides excess coverage over your primary liability insurance stated on a schedule of underlying insurance.
- 2. It will automatically take the place of primary liability policies whose aggregate limits have been exhausted.

	Limits
Each Occurrence	\$10,000,000
Annual Aggregate	\$20,000,000
Self-Insured Retention	None
Abuse or Molestation Each Occurrence	\$5,000,000
Abuse or Molestation Aggregate	\$5,000,000
Cyber Liability Each Occurrence	\$1,000,000
Cyber Liability Aggregate	\$2,000,000

Excess over the following underlying coverages:

- 🛛 Auto
- General Liability and Professional Liability
- Management Liability

Liquor Liability	Follows form with underlying coverages.
Pollution Liability	Follows form with underlying coverages.
Management Liability	Follows form with underlying coverages.
Employer's Liability	Follows form with underlying coverages.
Unlimited Defense Costs	The cost to defend you against covered claims is the responsibility of the company and will not erode your liability limits.
Expanded Aggregate Limit	The aggregate limit shown in the schedule applies separately to each location.
Unmanned Aircraft (Drones)	Coverage is included for unmanned aircraft that is owned, operated, rented or loaned to you.
	\$1,000,000 each occurrence/aggregate sublimit applies.

PROPOSAL NOTES

<u>Property</u>

Note: The following optional deductible is being provided:

Optional Property Deductible of \$2,500 is a revised premium of \$74,382 Optional Property Deductible of \$5,000 is a revised premium of \$71,505

<u>Auto</u>

Note: We have included rental reimbursement coverage for the following vehicles:

Limit Per Day Number Of Days \$50 30 Vehicle Number(s) 94

Note: The Medical Payments limit of \$10,000 applies to the following vehicle(s):

Vehicle Number(s)

All Covered Autos

<u>General</u>

Note: This proposal is based solely on the insurance exposures of the organization(s) shown opposite the heading "Coverage Applies To". All of the coverages described here and any policies that we issue will apply only to injury or damage arising out of the firefighting, rescue, ambulance or incidental operations of the emergency service organization(s) listed opposite "Coverage Applies To".



PREMIUM SUMMARY

SOUTH SNOHOMISH COUNTY FIRE & RESCUE REGIONAL FIRE AUTHORITY (WA) C18252

	<u>Premium</u>
Property	\$80,135
Crime	\$1,233
Portable Equipment	\$8,170
Auto	\$136,935
General Liability	\$59,353
Management Liability	\$96,874
Excess Liability	\$76,559
Total Estimated Annual Premium	\$459,259

PLUS MORE VALUE!

Risk Management Included

- Employment practices
- Manage your risk <u>resources</u>, check lists
- Risk Management Consultants
- On-site assessments/self-assessments
- Education, Training & Consulting...... Included
 - Classroom seminars, training, resources vfis.com
 - Distance learning VFIS University
 - Consulting Available

Volunteer Firemen's Insurance Services, Inc.®

VFIS®, VFIS® with design and Volunteer Firemen's Insurance Services, Inc.® are all registered service marks of the same PA Corporation.



OTHER VFIS PRODUCTS AVAILABLE

Accident & Sickness Coverage - provides "on duty" coverage for members, auxiliary members, junior members, members in training, officers, deputized by-standers, trustees and board members, and volunteers asked by the organization to help with non-emergency events. Coverage listed below is provided when a member performs any normal duty of the department, whether it is an emergency or not. Insurance coverage underwritten by National Union Fire Insurance Company of Pittsburgh, PA.

- Death Benefit
- Lump Sum Living Benefit
- Disability Income Benefit
- Medical Benefit

Critical Illness Insurance Program - a lump sum cash benefit is available to emergency service personnel, when diagnosed with a heart attack, stroke or life threatening cancer. Underwritten by ACE American Insurance Company, Philadelphia, PA. Coverage includes:

- 24-hour, On and Off Duty Coverage
- Lump Sum Living Benefit (for qualifying illnesses)

Group Term Life Insurance - available for all members which includes active, retired, volunteers, career or auxiliary members. Underwritten by AIG, American General. Coverage includes:

- 24-hour, On and Off Duty Coverage
- Accidental Death and Dismemberment
- Guaranteed Issue Life Insurance for Any Age

Length of Service Award Program (LOSAP) - an incentive program to effectively retain existing volunteers, increase their level of participation and recruit new members. Life insurance underwritten by AIG Life Insurance Company and American Life Assurance Company of New York (Maine and New York). Group annuity contracts underwritten by Hartford Life Insurance Company. Coverage provided:

- 24-hour, On and Off Duty Death Benefit
- Monthly Income During Retirement Years
- Disability Benefit



VFIS ORDER FORM

SOUTH SNOHOMISH COUNTY FIRE & RESCUE REGIONAL FIRE AUTHORITY (WA) C18252

Coverage	Effective/ Expiration Dates	Accept Initial to accept coverage	Decline Initial to decline coverage	Premium Quoted
Property				
Crime				
Portable Equipment				
Auto				
General Liability				
Management Liability				
Excess Liability				
Total				

Payment Plans

Please indicate your choice of premium payment options. There are no installment fees. Payment plans do not include any applicable taxes, fees, and surcharges. They will be included with your initial invoice. Payment plans options do not apply to future endorsements. You will receive an invoice based on the payment plan selected. ***Please Note – Any breakdown of premium values listed on this Order Form should not be used for billing purposes. On Installment plans, payment amounts will vary due to rou nding on installment schedules. Please wait for the invoice to bill the insured. Remittance payment must match the invoice.***

- [] Annual Default unless otherwise eligible and selected below
- [] Two-Pay \$2,500 account minimum
- [] Four-Pay \$3,500 account minimum
-] Ten-Pay \$10,000 account minimum

Signature of Insurance Representative

Agency Name/Address

ſ

Producer/Service Rep.

Before you return this form, you must:

1. Provide the INSURED'S Federal ID#:

82-2238883

- 2. Identify all mortgagees, loss payees and (for Auto only) additional insureds/lessors (provide address).
- 3. Choose \$1,000,000 underlying limits when there is Excess Liability.

This is not a binder, nor should it be used as one. This form is solely for the purpose of ordering property and casualty insurance coverages for which VFIS has provided a valid quote.

Signature of Insured

Comments/Notes:

Internal Use Only:	C18252	WA	Qt Eff	Dt: 02/01/2024	Doc ID:	20b1fcd60bc74036	8dbc46e328d43c0f
	Property:	25536510000000	Crime:	25536510000000	PE:	25536510000000	Auto:25536510000000
	GL:	25536510000000	ML:	25536510000000	Excess:	25536510000000	

Date

Date



CLAIMS-MADE MANAGEMENT LIABILITY SUPPLEMENTAL APPLICATION

This application is only required when Claims Made Management Liability coverage is new.

- 1. Legal name of applicant: SOUTH SNOHOMISH COUNTY FIRE & RESCUE REGIONAL FIRE AUTHORITY
- 2. Address:12425 MERIDIAN AVE S, EVERETT, WA 98208
- 3. Desired effective date of coverage:
- 4. Limits of liability requested (cannot be greater than the General Liability limit):
 - □ \$300,000 each offense or wrongful act / \$1,000,000 aggregate
 - \$500,000/\$1,000,000
 - **\$**1,000,000/\$2,000,000
 - ⊠ \$1,000,000/\$3,000,000
 - \$1,000,000 / \$10,000,000 (aggregate limit does not apply to each named insured with this option)
- 5. Does the applicant have knowledge of any incidents which would cause a reasonable person to believe that a claim or suit might result? \Box Yes \Box No

If yes, please give complete details, including date: _

6. Name of person designated to receive any and all notices from the company or agent concerning this insurance:

COVERAGE CANNOT BECOME EFFECTIVE PRIOR TO THE DATE THIS SIGNED APPLICATION IS APPROVED BY THE COMPANY.

THE APPLICANT ACCEPTS NOTICE THAT ANY POLICY WHICH MAY BE ISSUED AND ANY RENEWALS THEREOF WILL APPLY ON A "CLAIMS MADE" BASIS.

The applicant agrees that in the event they become aware of any fact which would serve to alter any answer previously given to on e or more of the foregoing questions, they will so advise the agent. The applicant further agrees that based on such revised information, the agent may revise or withdraw any quotation previously given.

The undersigned, being authorized by and acting on behalf of the applicant, declares that to the best of his / her knowledge and after having made proper inquiry, the responses to the foregoing are true and that no facts have been suppressed or any material facts misstated. The applicant further agrees that this application shall be the basis of any policy issued. The application is valid for 90 days from the date it is signed.

Agent's Signature:	Applicant's Signature	
Address:	Title	
City/State/Zip:	Date	


ARCH INSURANCE COMPANY

(A Missouri Corporation)

Home Office Address: 2345 Grand Blvd Suite 900 Kansas City, MO 64108 Administrative Address: Harborside 3 210 Hudson Street, Suite 300 Jersey City, NJ 07311-1107 Tel: Tel: (866) 413-5550

EXCESS THIRD PARTY LIABILITY POLICY

DECLARATIONS

Policy Number: UXP1037022-03

Renewal Of: UXP1037022-02

Policy Period: EFFECTIVE DATE: February 01, 2023 EXPIRATION DATE: February 01, 2024 at 12:01 A.M. Standard Time at the Address of the Named Insured.

Item1. Named Insured:South Snohomish County Fire & Rescue Regional Fire AuthorityMailing Address:12425 Meridian Avenue S
Everett, WA 98208

Producer Code:	30
Producer Name:	Amwins Insurance Brokerage of California, LLC
Mailing Address:	21550 Oxnard Street Suite 1100 Woodland Hills, CA 91367

Item 2. Limits of Insurance:

(a) Each Occurrence Limit	\$5,000,000
(b) Products-Completed Operations Aggregate Limit	\$5,000,000
(c) General Aggregate Limit (Other than Products-Completed Operations)	\$5,000,000

- Item 3. Limits of Liability of Underlying Insurance: (See Schedule A Schedule of Underlying Insurance)
- Item 4. Policy Provisions, Forms and Endorsements Attached to this Policy at inception: (See Schedule of Forms and Endorsements)

Item 5. Premium:

(a) Policy Premium(b) Premium for Certified Acts of Terrorism			(see rate) Premium is Flat
Total Premium Payable:		\$79,560.00	
Flat	Auditable 🗌	Minimum Premi	um

Item 6. Rate: Flat

THESE DECLARATIONS, TOGETHER WITH EXCESS THIRD PARTY LIABILITY POLICY, SCHEDULE A – SCHEDULE OF UNDERLYING INSURANCE AND ENDORSEMENTS, IF ANY, ARE ISSUED AS PART OF, AND IN COMPLETION OF THE ABOVE NUMBERED POLICY.



Arch Insurance Company (A Missouri Corporation)

EXCESS THIRD PARTY LIABILITY POLICY SCHEDULE A – SCHEDULE OF UNDERLYING INSURANCE (EXCESS)

NAMED INSURED: South Snohomish County Fire & Rescue Regional Fire Authority POLICY NUMBER: UXP1037022-03 POLICY PERIOD: EFFECTIVE DATE: February 1, 2023 EXPIRATION DATE: February 1, 2024

3.a. CONTROLLING UNDERLYING INSURANCE

Insurer:	National Union Fire Insurance Company of Pittsburgh, Pa.
Policy Number:	VFNU-TR-0002294-03/000
Term:	02/01/2023 to 02/01/2024

Applicable Limits of Liability

\$10,000,000 Each Occurrence \$20,000,000 Products-Completed Operations Aggregate Limit (where applicable) \$20,000,000 Aggregate Limit

Excess of Primary limits as indicated in the VFIS Policy

3.b. OTHER UNDERLYING INSURANCE



ARCH INSURANCE COMPANY

(A Missouri Corporation)

EXCESS THIRD PARTY LIABILITY POLICY SCHEDULE OF ENDORSEMENTS

NAMED INSURED: South Snohomish County Fire & Rescue Regional Fire Authority

POLICY NUMBER: UXP1037022-03

POLICY TERM: February 1, 2023 TO February 1, 2024

ENDORSEMENTS ATTACHED TO AND FORMING A PART OF THIS POLICY:

END'T NO.	FORM NUMBER	TITLE
	05 ML0002 00 12 14	SIGNATURE PAGE (ARCH INSURANCE)
	00 ML0065 00 06 07	U.S. TREASURY DEPARTMENT S OFFICE OF FOREIGN ASSETS CONTROL (OFAC)
	05 ML0014 00 03 03	CLAIMS HANDLING PROCEDURES (Arch Ins. Co.)
	00 ML0243 00 07 13	EXCESS/UMBRELLA POLICY UNDERLYING INSURANCE NOTICE
1	00 EXT0014 00 09 11	LEAD HAZARD EXCLUSION
2	00 EXT0128 00 09 11	SILICA EXCLUSION
3	00 EXT0151 00 09 11	FUNGI AND BACTERIA HAZARD EXCLUSION
4	00 EXT0266 00 05 14	EXCLUSION ACCESS OR DISCLOSURE OF CONFIDENTIAL INFORMATION AND DATA-RELATED LIABILITY
5	00 EXT0027 00 09 11	ANTI-STACKING ENDORSEMENT
6	00 EXT0166 48 11 11	WASHINGTON AMENDATORY ENDORSEMENT
7	00 EXT0076 00 07 04	POLLUTION FOLLOW FORM ENDORSEMENT
8	00 EXT0092 48 11 11	COMMUNICABLE DISEASE EXCLUSION WASHINGTON
9	00 EXT0111 00 07 04	INCIDENTAL MEDICAL MALPRACTICE EXCLUSION
10	00 EXT0119 00 09 11	CRISIS MANAGEMENT LOSS AND EXPENSE INSURANCE EXCLUSION
11	00 EXT0064 00 07 04	CANCELLATION - AMENDMENT OF NOTICE (90 DAYS)
12	00 EXT0160 00 07 04	EXCLUSION OF DESIGNATED UNDERLYING INSURANCE COVERAGE
13	00 EXT0147 00 07 04	CROSS SUITS EXCLUSION (NAMED INSURED)
14	00 EXT0195 48 01 21	WASHINGTON EXCLUSION OF TERRORISM (THRESHOLD)

EXCESS THIRD PARTY LIABILITY POLICY

Various provisions in this policy restrict coverage. Read the entire policy carefully to determine rights, duties and what is and is not covered.

Throughout this policy the words "you" and "your" refer to the Named Insured shown in the Declarations, and any other person or organization qualifying as a Named Insured under this policy or under **controlling underlying insurance**. The words "we", "us" and "our" refer to the company stated in the Declarations providing this insurance.

This is excess insurance and only applies to those coverages for which **underlying insurance** is shown in Items 3.a. and 3.b. of Schedule A – Schedule of Underlying Insurance of this policy.

If any provision of the **controlling underlying insurance** conflicts with any provision of our insurance, then the provision of our insurance will apply. However, if our provision would result in broader coverage than is provided by **controlling underlying insurance**, then the provision of the **controlling underlying insurance** will apply. This insurance will not provide broader coverage than that provided by the **controlling underlying insurance**. This policy will not recognize reduction or exhaustion of the underlying limit of liability, retained limit, or self-insured retention by any claim, suit, demand or any payment of **loss**, cost or expense excluded by this policy or any endorsements to this policy.

Other words and phrases that appear in bold have special meaning. Refer to Section V. DEFINITIONS.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, IN RELIANCE UPON THE STATEMENTS IN THE DECLARATIONS MADE A PART HEREOF AND SUBJECT TO ALL OF THE TERMS OF THIS POLICY, WE AGREE WITH YOU AS FOLLOWS:

I. INSURING AGREEMENTS

We will pay on behalf of the **insured**, except as otherwise stated in this policy, those amounts of **loss** for which coverage is provided under the definitions, terms, conditions, limitations and exclusions of the **controlling underlying insurance** in effect at the inception of this policy and which exceeds the total Limits of Liability of **underlying insurance** as stated in Items 3.a. and 3.b. of Schedule A – Schedule of Underlying Insurance of this policy. The amount we will pay for **loss** is limited as provided under Section **II. LIMITS OF INSURANCE**.

If any policy of **underlying insurance** grants any coverage subject to a sub-limit of liability, this policy shall not offer such coverage. However, this policy shall recognize any reduction or exhaustion of limits by any payment under such coverage for **loss** covered by the **underlying insurance**.

II. LIMITS OF INSURANCE

- **a.** The Limits of Insurance shown in Item 2. of the Declarations and the rules below determine the most we will pay for all **loss** regardless of the number of:
 - 1. Insureds;
 - 2. Claims made or suits brought; or
 - **3.** Persons or organizations making claims or bringing suits.
- **b.** Subject to Paragraphs **II.a.**, **II.c.** and **II.d.**, the Each Occurrence Limit stated in Item 2.(a) of the Declarations is the most we will pay for the sum of all **loss** arising out of any one **occurrence**.

If the applicable aggregate limit of insurance has been reduced by payment of **loss** to an amount that is less than the limit for Each Occurrence stated in Item 2.(a) of the Declarations, the remaining aggregate limit of insurance is the most that will be available for payment of **loss** arising out of any other **occurrence**.

- c. Subject to Paragraphs II.a. and II.b. above, the Products-Completed Operations Aggregate Limit stated in Item 2.(b) of the Declarations is the most we will pay for all loss within the products-completed operations hazard, regardless of whether the aggregate limit for each coverage provided by the controlling underlying insurance applies separately.
- d. Subject to Paragraphs II.a. and II.b. above, the limit stated in Item 2.(c) of the Declarations for the General Aggregate Limit is the most we will pay for all loss, except for loss within the products-completed operations hazard, that are subject to an aggregate limit provided by controlling underlying insurance. The General Aggregate Limit applies to all loss, regardless of whether the aggregate limit for each coverage provided by the controlling underlying insurance applies separately. However, the General Aggregate Limit does not apply to loss within the products-completed operations hazard and loss that is not subject to an aggregate limit in the controlling underlying insurance.
- e. If any underlying insurance does not provide separate aggregate limits for loss within the products-completed operations hazard and loss not within the products-completed operations hazard, the limit stated in Item 2.(c) of the Declarations for the General Aggregate Limit is the most we will pay for all loss, including loss within the products-completed operations hazard. Under such circumstances, any limit appearing in Item 2.(b) of the Declarations does not apply.
- f. Subject to Paragraphs II.a., II.b., II.c., II.d. and II.e. above, if the Limits of Liability of Underlying Insurance stated in Item 3. of the Declarations are reduced or exhausted solely by payment of loss (including any defense expenses that reduce the limit of liability of the underlying insurance) to which this policy applies, such insurance provided by this policy will apply in excess of the reduced underlying insurance or, if all underlying insurance is exhausted, will apply as underlying insurance subject to the same definitions, terms, conditions, limitations and exclusions of the controlling underlying insurance, except as otherwise limited by the definitions, terms, conditions, limitations of this policy.
- g. The Limits of Insurance of this policy apply separately to each consecutive annual period and to any remaining period of less than 12 months, starting with the beginning of the **policy period** shown in the Declarations, unless the **policy period** is extended after issuance for an additional period of less than 12 months. In that case, the additional period will be deemed part of the last preceding period for purposes of determining the Limits of Insurance.
- **h.** If defense expenses are included within the limit of liability of any **underlying insurance**, then any such defense expense we incur, in accordance with Section **III. DEFENSE**, shall reduce the Limit of Insurance of this policy.

If defense expenses of none of the **underlying insurance** reduce the limit of liability provided by those policies, then any such defense expense we incur, in accordance with Section **III. DEFENSE**, shall not reduce the Limit of Insurance of this policy.

III. DEFENSE

a. We will not be required to assume charge of the investigation or defense of any claim or any suit against an **insured**.

- **b.** We will have the right, but not the duty, to be associated with the **insured** or the underlying insurers or both in the investigation of any claim or defense of any suit which in our opinion may create liability on us for payment under this policy.
- c. If the total Limits of Liability of underlying insurance as stated in Items 3.a. and 3.b. of Schedule A Schedule of Underlying Insurance of this policy are exhausted solely by payment of loss (including any defense expenses that reduce the limit of liability of the underlying insurance), we shall have the right but not the duty to investigate and settle any claim or assume the defense of any suit which in our opinion may give rise to payment under this policy. We may, however, withdraw from the defense of any suit or tender the continued defense to you if our applicable Limits of Insurance stated in Item 2 of the Declarations is exhausted by payment of loss (including any defense expenses that reduce the Limit of Insurance in accordance with Section II. LIMITS OF INSURANCE, Paragraph h. above).

If we exercise our rights under Paragraphs **III.b.** or **III.c.** above, we will do so at our own expense, subject to Section **II. LIMITS OF INSURANCE**, Paragraph **h.** above.

IV. EXCLUSIONS

It is agreed that this policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim, suit, demand or any payment of **loss**, cost or expense excluded by this policy. The exclusions contained herein and any exclusions contained in endorsements to this policy apply regardless of whether any cause, event, material or product contributed concurrently or in any sequence to the injury or damage.

It is further agreed that regardless of whether or not coverage is afforded by the **controlling underlying insurance**, this policy does not apply to any:

a. Pollution

- 1. Claim, suit, demand or **loss** that alleges injury or damage that, in any way, in whole or in part, arises out of, relates to or results from the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of **pollutants** at any time.
- 2. Claim, suit, demand, **loss**, cost or expense that, in any way, in whole or in part, arises out of, relates to or results from any:
 - (a) Request, demand, order or statutory or regulatory requirement, or any other action authorized or required by law, that any **insured** or others investigate, abate, test for, monitor, clean up, remove, contain, treat, detoxify, neutralize, remediate or dispose of, or in any way respond to, or assess the effects of **pollutants** as well as any **loss**, costs, fees, expenses, penalties, judgments, fines, or sanctions arising out of, relating thereto or resulting therefrom; or
 - (b) Claim or suit by or on behalf of a governmental authority for damages arising out of, relating to or resulting from the investigation of, abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of **pollutants**.

As used in this exclusion, "**pollutants**" means any solid, liquid, gaseous, or thermal irritant or contaminant including smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes material to be recycled, reconditioned or reclaimed.

b. Asbestos

Claim, suit, demand or **loss** that alleges injury or damage that, in any way, in whole or in part, arises out of, relates to or results from the **asbestos hazard**.

This exclusion includes, but is not limited to, compliance with any request, demand, order, or statutory or regulatory requirement, or any other action authorized or required by law, or any other claim, suit, demand, **loss**, cost, or expense arising out of, relating to or resulting from the investigation of, abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of **asbestos**, as well as any loss, costs, fees, expenses, penalties, judgments, fines, or sanctions arising out of, relating thereto or resulting therefrom;

As used in this exclusion, "asbestos hazard" means:

- 1. Actual, alleged or threatened exposure to, consumption of, ingestion of, inhalation of, absorption of, existence of or presence of, **asbestos** in any manner or form whatsoever, either directly or indirectly; or
- 2. The actual or alleged failure to warn, advise or instruct related to **asbestos** in any manner or form whatsoever; or
- **3.** The actual or alleged failure to prevent exposure to **asbestos** in any manner or form whatsoever; or
- **4.** The actual or alleged presence of **asbestos** in any manner or form whatsoever, in any place whatsoever, whether or not within a building or structure, including its contents.

As used in this exclusion, "**asbestos**" means any substance, regardless of its form or state, containing asbestos.

c. Nuclear

- 1. Claim, suit, demand or **loss** with respect to which an **insured** under the policy is also an insured under a nuclear energy liability policy issued by the Nuclear Energy Liability Association, Mutual Atomic Energy Liability Underwriters or Nuclear Insurance Association of Canada, or would be an insured under any such policy but for its termination upon exhaustion of its limit of liability.
- 2. Claim, suit, demand or loss that, in any way, in whole or in part, arises out of, relates to, or results from the hazardous properties of nuclear material and with respect to which (1) any person or organization is required to maintain financial protection pursuant to the Atomic Energy Act of 1954, or any law amendatory thereof, or (2) the insured is or, had this policy not been issued, would be entitled to indemnity from the United States of America, or any agency thereof, under any agreement entered into by the United States of America, or any agency thereof, with any person or organization.
- 3. Medical Coverage, or under any Supplementary Payments provision relating to first aid, to expenses incurred with respect to bodily injury resulting from the hazardous properties of nuclear material, and arising out of the operation of a nuclear facility by any person or organization.
- 4. To any bodily injury or **property damage** resulting from the **hazardous properties** of **nuclear material**, if:

- (a) the nuclear material (1) is at any nuclear facility owned by, or operated by, or on behalf of, an insured or (2) has been discharged or dispersed therefrom;
- (b) the nuclear material is contained in spent fuel or waste at any time possessed, handled, used, processed, stored, transported or disposed of by or on behalf of an insured; or
- (c) the bodily injury or property damage that, in any way, in whole or in part, arises out of, relates to, or results from the furnishing by an insured of services, materials, parts, or equipment in connection with the planning, construction, maintenance, operation or use of any nuclear facility, but if such facility is located within the United States of America, its territories or possessions or Canada, this Exclusion (c) applies only to property damage to such nuclear facility and any property thereat.

As used in this exclusion:

"hazardous properties" includes radioactive, toxic or explosive properties;

"nuclear material" means "source material", "special nuclear material" or "by-product material";

"source material", "special nuclear material", and "by-product material" have the meanings given them in the Atomic Energy Act of 1954 or in any law amendatory thereof;

"spent fuel" means any fuel element or fuel component, solid or liquid, which has been used or exposed to radiation in a nuclear reactor;

"waste" means any waste material (a) containing by-product material and (b) resulting from the operation by any person or organization of any nuclear facility included within the definition of nuclear facility under paragraph I or 2 thereof;

"nuclear facility" means:

- 1. any nuclear reactor;
- any equipment or device designed or used for (a) separating the isotopes of uranium or plutonium, (b) processing or utilizing spent fuel, or (c) handling, processing or packaging waste;
- **3.** any equipment or device designed or used for the processing, fabricating or alloying of **special nuclear material** if at any time the total amount of such material in the custody of the insured at the premises where such equipment or device is located consists of or contains more than 25 grams of plutonium or uranium 233 or any combination thereof, or more than 250 grams of uranium 235; or
- 4. any structure, basin, excavation, premises or place prepared or used for the storage or disposal of **waste**;

and includes the site on which any of the foregoing is located, all operations conducted on such site and all premises used for such operations;

"nuclear reactor" means any apparatus designed or used to sustain nuclear fission in a self-supporting chain reaction or to contain a critical mass of fissionable material;

"property damage" includes all forms of radioactive contamination of property.

V. DEFINITIONS

Except as otherwise defined in this policy or in any endorsement to this policy, the definition of terms and phrases contained in this policy and any endorsements to this policy will be the same as those terms and phases are defined in the **controlling underlying insurance**.

- **a. "Controlling underlying insurance"** means the policy or policies listed in Item 3.a. of Schedule A Schedule of Underlying Insurance of this policy.
- **b.** "**Insured**" means:
 - 1. you; and
 - 2. any person or organization qualifying as an **insured** under **controlling underlying insurance**, but only to the extent that:
 - (a) coverage is provided by this policy; and
 - (b) coverage is provided by **controlling underlying insurance**, or would have been provided but for the exhaustion of such policy's limit of liability.
- **c. "Loss"** means amounts paid to settle a claim or suit, or satisfy a judgment, for which the **insured** is legally liable. The amounts that are payable by us are subject to deductions for subrogation, salvages, and any other recoveries made or that are available to an **insured**.
- d. "Occurrence" has the same meaning as defined in the controlling underlying insurance.
- e. "Policy period" means the period beginning with the Effective Date shown in the Declarations and ending on the Expiration Date shown in the Declarations, unless canceled as provided in Condition g. of this policy.
- f. "Products-completed operations hazard" has the same meaning as defined in the controlling underlying insurance.
- **g. "Underlying insurance"** means all policies and the Limits of Liability listed in Items 3.a. and 3.b. of Schedule A Schedule of Underlying Insurance of this policy.

VI. CONDITIONS

a. Notice of Occurrence or Claim

Whenever you have information from which you may reasonably conclude that an **occurrence** or claim appears likely to involve this policy, written notice shall be given to us or any of our authorized agents as soon as practicable.

b. Notice of Suit

If suit is brought which appears likely to involve this policy or seeks damages in an amount that would exceed 50% of the limits of the **underlying insurance**, immediate written notice shall be given to us along with copies of the suit papers.

c. Duties After Notice of Occurrence, Claim or Suit Is Given

You and any other involved **insured** must:

- 1. Immediately send us copies of any demands, notices, summonses or legal papers received in connection with the **occurrence**, claim or suit;
- 2. Authorize us to obtain records and other information;
- **3.** Cooperate with us in the investigation or settlement of the claim, and, if applicable, defense against the suit;
- 4. Assist us, upon our request, in the enforcement of any right against any person or organization which may be liable to the **insured** because of injury or damage to which this insurance may also apply; and
- 5. No **insured** will, except at the **insured's** own cost, voluntarily make a payment, assume any obligation, or incur any expense, other than for first aid, without our consent.

d. Maintenance of Underlying Insurance

The **underlying insurance** shall remain in full force and effect throughout the **policy period** except for reduction or exhaustion of the aggregate limit due to payment of claims, settlements, or judgments (including any defense expenses that reduce the limit of liability of the **underlying insurance**). This insurance will not take the place of any **underlying insurance** in the event of denial or rejection of a claim, or if any **underlying insurance** is cancelled or not renewed, or for any other reason except for reduction or exhaustion due to payment of claims, settlements, or judgments.

Failure to maintain any **underlying insurance** will not invalidate this insurance. However, this insurance will apply as if the **underlying insurance** were in full force and effect.

Renewals or replacements of any **underlying insurance** will not be materially changed without our agreement.

e. Bankruptcy, Insolvency or Other Financial Impairment

In the event of the bankruptcy, insolvency or other financial impairment of any underlying insurer, or of the **insured** if the **underlying insurance** is comprised in whole or in part of self-insurance, we shall be liable only to the same extent we would have been had such bankruptcy, insolvency or other financial impairment not occurred. This insurance will not take the place of any **underlying insurance** in the event of bankruptcy, insolvency or other financial impairment. This insurance will apply as if the **underlying insurance** were in full force and effect.

f. Other Insurance

If other insurance applies to **loss** that is also covered by this policy, this policy shall apply excess of the other insurance. Nothing herein will be construed to make this policy subject to the terms, conditions and limitations of such other insurance. However, this provision will not apply if such other insurance is written to be excess of this policy.

Other insurance includes any type of self-insurance or other mechanism by which an **insured** arranges for the funding of legal liabilities.

If our Limits of Insurance stated in Item 2. of the Declarations are part of the total Limits of Insurance stated in Item 2., then the limits of our liability shall be that proportion of all **loss** which our Limits of Insurance bear to the total Limits of Insurance in Item 2. and which is in excess of the total Limits of Liability of **underlying insurance** as stated in Items 3.a. and 3.b. of Schedule A – Schedule of Underlying Insurance of this policy.

g. Cancellation

This policy may be canceled by you either by mailing or delivering advance written notice to us stating when cancellation shall be effective. This policy may be canceled by us by mailing to you at the address shown in Item 1. of the Declarations, written notice stating when, not less than thirty (30) days thereafter, ten (10) days thereafter if cancellation is for nonpayment of the premium, such cancellation shall be effective. The mailing of notice is sufficient notice and the effective date of cancellation stated in the notice will become the end of the policy period. Delivery of written notice either by you or by us shall be equivalent to mailing. If you cancel, earned premium will be computed in accordance with the customary short-rate table and procedure, but we will always be entitled to receive or keep the Minimum Premium amount stated in Item 5. of the Declarations. If we cancel, earned premium will be computed pro rata.

Premium adjustment may be made at the time cancellation is effected or as soon afterwards as is practicable. Our check or our representative's check mailed or delivered will be sufficient tender of any refund due you.

Cancellation will be effective on the date stated in the notice even though we have not made the refund of the unearned premium.

h. First Named Insured

The person or organization first named in Item 1. of the Declarations is authorized to act for all **insureds**.

If this policy insures more than one person or organization, cancellation must be effected by the first Named Insured and notice of cancellation by us will be made to the first Named Insured and shall be considered as notice to all. Payment of any unearned premium to the first Named Insured shall be for the account of all.

The first Named Insured is responsible for the premium. If the first Named Insured cannot or refuses to pay any or all of the premium, all of you are jointly and severally responsible to pay us the premium due.

i. Appeals

In the event that you or any underlying insurer elects not to appeal a judgment in excess of the limits of liability of **underlying insurance**, we may elect to appeal at our expense. Our Limit of Insurance shall not be increased because of the appeal.

j. Legal Action Against Us

No person or organization has a right under this policy to:

- 1. Join us as a party or otherwise bring us into a suit asking damages from an **insured**;
- 2. Sue us, unless all the terms of this policy have been fully complied with.

A person or organization may sue us to recover on an agreed settlement or on a final judgment against an **insured**; but we will not be liable for **loss** that is not payable under the terms of this policy or that is in excess of the Limit of Insurance. An agreed settlement means a settlement and release of liability signed by us, the **insured** and the claimant or the claimant's legal representative.

k. Loss Payable

Liability under this policy shall not apply unless and until the underlying insurer(s) has paid or has been held liable to pay for the full amount of their Limits of Liability as shown on Schedule A – Schedule of Underlying Insurance. In the event of a settlement for less than the full amount of the limits of liability of the **underlying insurance**, the **insured** shall be responsible for any difference between the Limits of Liability available in the **underlying insurance** before this insurance and the limits of liability available in the **underlying insurance** before this insurance becomes applicable with respect to any claim, suit, demand or **loss** covered by this policy. However, this provision does not apply to any payment for liability by the underlying insurer(s) that is less than the Limits of Liability as shown on Schedule A – Schedule of Underlying Insurance as a result of the reduction or exhaustion of the aggregate limits of the **underlying insurance**.

XArch | Insurance

Signature Page

IN WITNESS WHEREOF, Arch Insurance Company has caused this policy to be executed and attested.

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Brian D. First President

Reg. A. SM

Regan Shulman Secretary

U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS

No coverage is provided by this Policyholder Notice nor can it be construed to replace any provisions of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided.

This Notice provides information concerning possible impact on your insurance coverage due to directives issued by OFAC. **Please read this Notice carefully**.

The Office of Foreign Assets Control (OFAC) administers and enforces sanctions policy, based on Presidential declarations of "national emergency". OFAC has identified and listed numerous:

- Foreign agents;
- Front organizations;
- Terrorists;
- Terrorist organizations; and
- Narcotics traffickers;

as "Specially Designated Nationals and Blocked Persons". This list can be located on the United States Treasury's web site – http://www.treas.gov/ofac.

In accordance with OFAC regulations, if it is determined that you or any other insured, or any person or entity claiming the benefits of this insurance has violated U.S. sanctions law or is a Specially Designated National and Blocked Person, as identified by OFAC, this insurance will be considered a blocked or frozen contract and all provisions of this insurance are immediately subject to OFAC. When an insurance policy is considered to be such a blocked or frozen contract, no payments nor premium refunds may be made without authorization from OFAC. Other limitations on the premiums and payments also apply.

Claims Handling Procedures

An important value of your insurance coverage is the ability of the insurance company to respond when you have a claim. Arch Insurance Company is committed to providing its insureds with effective claim services.

Notices of each incident, claim or suit must be sent immediately to:

Arch Insurance Company Claims 1299 Farnam Street, Suite 500 Omaha, NE 68102 P.O. Box 542033 Omaha, NE 68154 Phone 877 688-ARCH (2724) FAX 866 266-3630 Email Claims@Archinsurance.com

You will be contacted by a representative of the company's Claim Department. This representative will confirm receipt of the loss notice directly to you, provide a company claim number for all future correspondence, refer to legal counsel if necessary, and discuss further handling of the claim.

Excess/Umbrella Policy Underlying Insurance Notice

This excess/umbrella policy has been issued prior to our receipt of the scheduled underlying insurance policy(s). This policy has been issued based upon the underlying insurance policy information furnished to us during the underwriting process for this policy. By issuing this policy, we do not waive our rights to seek appropriate legal remedies based upon any discrepancies between the underlying insurance policy information furnished to us during the underwriting process and the actual policy provisions of any underlying policy furnished to us after the issuance of our binder.

LEAD HAZARD EXCLUSION

This endorsement modifies insurance provided under the **EXCESS THIRD PARTY LIABILITY POLICY**.

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to any claim, suit, demand or **loss** that alleges injury or damage that, in any way, in whole or in part, arises out of, relates to or results from the "lead hazard".

This exclusion includes, but is not limited to, compliance with any request, demand, order, or statutory or regulatory requirement, or any other action authorized or required by law, or any other claim, suit, demand, **loss**, cost, or expense arising out of, relating to or resulting from the investigation of, abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of lead, as well as any **loss**, costs, fees, expenses, penalties, judgments, fines, or sanctions arising out of, relating thereto or resulting therefrom.

As used in this exclusion, "lead hazard" means:

- 1. Actual, alleged or threatened exposure to, consumption of, ingestion of, inhalation of, absorption of, existence of or presence of, lead in any manner or form whatsoever, either directly or indirectly;
- 2. The actual or alleged failure to warn, advise or instruct related to lead in any manner or form whatsoever;
- 3. The actual or alleged failure to prevent exposure to lead in any manner or form whatsoever; or
- 4. The actual or alleged presence of lead in any manner or form whatsoever, in any place whatsoever, whether or not within a building or structure, including its contents.

This policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim, suit, demand or payment of **loss**, cost or expense excluded by this endorsement.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 1

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

SILICA EXCLUSION

This endorsement modifies insurance provided under the **EXCESS THIRD PARTY LIABILITY POLICY**.

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to any claim, suit, demand or **loss** that alleges injury or damage that, in any way, in whole or in part, arises out of, relates to or results from:

- 1. the actual, alleged or threatened exposure to, consumption of, ingestion of, inhalation of, or absorption of "silica", either directly or indirectly;
- 2. the actual, alleged or threatened exposure to, consumption of, ingestion of, inhalation of, absorption of, existence of or presence of, "silica dust" either directly or indirectly;
- 3. the actual or alleged failure to warn, advise or instruct related to "silica" in any manner or form whatsoever; or
- 4. the actual or alleged failure to prevent exposure to "silica".

This exclusion includes, but is not limited to, compliance with any request, demand, order, or statutory or regulatory requirement, or any other action authorized or required by law, or any other claim, suit, demand, **loss**, cost, or expense arising out of, relating to or resulting from the investigation of, abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of "silica", as well as any **loss**, costs, fees, expenses, penalties, judgments, fines, or sanctions arising out of, relating thereto or resulting therefrom.

As used in this exclusion:

- 1. "silica" means any substance containing silicon dioxide (SiO₂), including, but not limited to, crystalline or non-crystalline silica, silica particles, silica compounds, "silica dust" or synthetic silica, including but not limited to precipitated silica, silica gel, fumed silica or silica-flour.
- 2. "silica dust" means dust containing "silica" alone or mixed with any other dust or fiber(s).

This policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim, suit, demand or payment of **loss**, cost or expense excluded by this endorsement.

All other terms and conditions of this Policy remain unchanged.

Endorsement Number: 2

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

FUNGI AND BACTERIA HAZARD EXCLUSION

This endorsement modifies insurance provided under the **EXCESS THIRD PARTY LIABILITY POLICY**.

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to any claim, suit, demand or **loss** that alleges injury or damage that, in any way, in whole or in part, arises out of, relates to or results from the "fungi or bacteria hazard".

This exclusion includes, but is not limited to, compliance with any request, demand, order, or statutory or regulatory requirement, or any other action authorized or required by law, or any other claim, suit, demand, **loss**, cost, or expense arising out of, relating to or resulting from the investigation of, abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of "fungi or bacteria", as well as any **loss**, costs, fees, expenses, penalties, judgments, fines, or sanctions arising out of, relating thereto or resulting therefrom.

This exclusion does not apply to any "fungi or bacteria" that are on or are contained in food or beverages.

As used in this exclusion, "fungi or bacteria hazard" means:

- 1. Actual, alleged or threatened exposure to, consumption of, ingestion of, inhalation of, absorption of, existence of or presence of, "fungi or bacteria" in any manner or form whatsoever;
- 2. The actual or alleged failure to warn, advise or instruct related to "fungi or bacteria" in any manner or form whatsoever;
- 3. The actual or alleged failure to prevent exposure to "fungi or bacteria" in any manner or form whatsoever; or
- 4. The actual or alleged presence of "fungi or bacteria" in any manner or form whatsoever, in any place whatsoever, whether or not within a building or structure, including its contents.

As used in this exclusion, "fungi or bacteria" include, without limitation, mold, mildew, yeast, spores, mycotoxins, endotoxins, or other pathogens, as well as any particulates or byproducts of any of the foregoing, either directly or indirectly.

This policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim, suit, demand or payment of **loss**, cost or expense excluded by this endorsement.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 3

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

EXCLUSION – ACCESS OR DISCLOSURE OF CONFIDENTIAL INFORMATION AND DATA-RELATED LIABILITY

This endorsement modifies insurance provided under the EXCESS THIRD PARTY LIABILITY POLICY.

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to any claim, suit, demand or **loss** that alleges "bodily injury", "property damage" or "personal and advertising injury" that in any way, in whole or in part, arises out of, relates to or results from:

- (1) Any access to or disclosure of any person's or organization's confidential or personal information, including patents, trade secrets, processing methods, customer lists, financial information, credit card information, health information or any other type of nonpublic information; or
- (2) The loss of use of, damage to, corruption of, inability to access, or inability to manipulate "electronic data".

This exclusion applies even if damages are claimed for notification costs, credit monitoring expenses, forensic expenses, public relations expenses or any other loss, cost or expense incurred by you or others arising out of that which is described in Paragraph (1) or (2) above.

However, unless Paragraph (1) applies, this exclusion does not apply to damages because of "bodily injury" provided such coverage is afforded in the **controlling underlying insurance**.

As used in this exclusion, "electronic data" means information, facts or programs stored as or on, created or used on, or transmitted to or from computer software, including systems and applications software, hard or floppy disks, CD-ROMS, tapes, drives, cells, data processing devices or any other media which are used with electronically controlled equipment.

As used in this exclusion, the definitions of "bodily injury", "property damage" and "personal and advertising injury" are as defined in the **controlling underlying insurance**.

This policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim, suit, demand or payment of **loss**, cost or expense excluded by this endorsement.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 4

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

ANTI-STACKING ENDORSEMENT

This endorsement modifies insurance provided under the EXCESS THIRD PARTY LIABILITY POLICY.

It is agreed that if any **occurrence**, accident, **loss**, suit or claim covered under this policy is also covered in whole or part under any other Umbrella or Excess Liability insurance policy or policies issued to any **insured** by us, (or any of our related or affiliated companies), including but not limited to prior policies issued to you by us (or any of our related or affiliated companies), the most we will pay under all such policies covering the **occurrence**, accident, **loss**, suit or claim is the single highest available applicable limit of liability of one of the policies which cover the **occurrence**, accident, **loss**, suit or claim. This provision does not apply to policies written by us (or any of our related or affiliated companies) as insurance that applies excess of this policy.

If the **controlling underlying insurance** or any **underlying insurance** contains a similar anti-stacking endorsement, and in the event the **controlling underlying insurance** insurer or any **underlying insurance** insurer invokes their anti-stacking endorsement which results in the depletion or exhaustion of their insurance aggregate limit, this policy will not apply below the Limits of Liability of Underlying Insurance listed in Items 3.a and 3.b of Schedule A – Schedule of Underlying Insurance as a result of said depletion or exhaustion, but will apply in the same manner it would have applied had such aggregate limit not been depleted or exhausted.

You must notify us as soon as practicable when the **controlling underlying insurance** or any **underlying insurance** has been depleted or exhausted.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 5

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

WASHINGTON AMENDATORY ENDORSEMENT

This endorsement modifies insurance provided under the **Excess Third Party Liability Policy**.

I. The first paragraph of Section **IV. EXCLUSIONS** is hereby deleted in its entirety and replaced by the following:

It is agreed that this policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim or suit or any payment of **loss**, cost or expense excluded by this policy. We will not pay for **loss** caused by any of the excluded events described below. **Loss** will be considered to have been caused by an excluded event if the occurrence of that event:

- 1. Directly and solely results in **loss**; or
- 2. Initiates a sequence of events that results in **loss**, regardless of the nature of any intermediate or final event in that sequence.
- II. Paragraph **h. First Named Insured** of Section **VI. CONDITIONS** is deleted in its entirety and replaced by the following:

h. First Named Insured

The person or organization first named in Item 1. of the Declarations is authorized to act for all **insureds**.

If this policy insures more than one person or organization, cancellation must be effected by the first Named Insured. Payment of any unearned premium to the first Named Insured shall be for the account of all.

The first Named Insured is responsible for the premium. If the first Named Insured cannot or refuses to pay any or all of the premium, all of you are jointly and severally responsible to pay us the premium due.

III. Paragraph **g. Cancellation** of Section **VI. CONDITIONS** is deleted in its entirety and replaced by the following:

Cancellation and Nonrenewal

Cancellation

You may cancel this policy by notifying us or the insurance producer in one of the following ways:

- 1. Written notice by mail, fax or email;
- 2. Surrender of the policy or binder; or
- 3. Verbal notice.

Upon receipt of such notice, we will cancel this policy or any binder issued as evidence of coverage, effective on the later of the following:

- 1. The date on which notice is received or the policy or binder is surrendered; or
- 2. The date of cancellation requested by you.

This policy may be cancelled by us by delivering or mailing to you and to the broker or agent, at the last mailing addresses known to us, written notice of cancellation, stating the reason for cancellation at least ten (10) days before the effective date of cancellation for nonpayment of premium and forty-five (45) days before the effective date of cancellation for all other reasons. The effective date of cancellation shall become the end of the **policy period**. Delivery of such notice shall be equivalent to mailing. Proof of mailing shall be considered sufficient proof of notice.

If this policy is cancelled, we will send you any premium refund due. If we cancel, the refund will be pro-rata. If you cancel, the refund will be computed in accordance with the customary short-rate table and procedure, but we will always be entitled to receive or keep the Minimum Premium amount stated in Item 5. of the Declarations. The cancellation will be effective even if we have not made or offered a refund.

Nonrenewal

Should we decide to nonrenew this policy, we shall mail or deliver written notice to you and the agent or broker, at the last mailing addresses known to us, at least forty-five (45) days before the end of the **policy period**. The notice shall include the reason for nonrenewal.

Otherwise, we will renew this policy unless:

- 1. You fail to pay the renewal premium after we have expressed our willingness to renew, including a statement of the renewal premium, to you and your agent or broker, at least twenty (20) days before the end of the **policy period**;
- 2. Other coverage acceptable to you has been procured prior to the end of the **policy period**; or
- 3. The policy clearly states that it is not renewable and is for a specific line, subclassification, or type of coverage that is not offered on a renewable basis.
- IV. Section **VI. CONDITIONS** is amended by the addition of the following:

Changes

This policy contains all the agreements between you and us concerning the insurance afforded. You are authorized to make changes in the terms of this policy with our consent. This policy's terms can be amended or waived only by endorsement issued by us and made a part of this policy.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 6

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

POLLUTION FOLLOW FORM ENDORSEMENT

It is agreed that Exclusion **a. Pollution** under Section **IV. EXCLUSIONS** contained in this policy continues to apply except to the extent coverage is provided by the **controlling underlying insurance**.

This policy will not recognize reduction or exhaustion of the **underlying insurance** by payment of **loss**, cost or expense excluded by this endorsement.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 7

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

COMMUNICABLE DISEASE EXCLUSION – WASHINGTON

This endorsement modifies insurance provided under the EXCESS THIRD PARTY LIABILITY POLICY.

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to any claim, suit, demand or **loss** that alleges "bodily injury", "property damage" or "personal and advertising injury" that, in any way, in whole or in part, arises out of, relates to or results from the actual or alleged transmission of any communicable disease which is transmitted through sexual contact by any **insured** or by any person for whose acts any **insured** is legally liable. This exclusion applies even if the claim, suit, demand or **loss** against any **insured** allege negligence or other wrongdoing in the:

- a. Supervising, hiring, employing, training or monitoring of others that may be infected with and spread a communicable disease;
- b. Testing for a communicable disease;
- c. Failure to prevent the spread of the disease; or
- d. Failure to report the disease to authorities.

As used in this exclusion, the definitions of "bodily injury", "property damage" and "personal and advertising injury" are as defined in the **controlling underlying insurance**.

This policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim, suit, demand or payment of **loss**, cost or expense excluded by this endorsement.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 8

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY. INCIDENTAL MEDICAL MALPRACTICE EXCLUSION

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to any claim, suit, demand or **loss** that alleges injury or damage that, in any way, in whole or in part, arises out of, relates to or results from any "wrongful act" of the **insured** or of any other person for whom the **insured** is legally liable in the rendering of or failure to render any "health care professional services" if you are not engaged in the business or occupation of providing "health care professional services".

For the purposes of this endorsement, the following definitions apply:

- 1. "Health care professional services" means:
 - a. Medical, surgical, dental, x-ray, nursing, mental, or other similar health care professional services or treatments;
 - b. Providing or dispensing of food, beverages, medications or medical supplies or appliances in connection with services described in Paragraph a. above;
 - c. Handling or treatment of dead bodies, including autopsies, organ donation or harvesting, or other procedures;
 - d. The work of your formal accreditation, standards review or equivalent professional board or committee, done for any **insured** while:
 - (1) Evaluating the professional qualifications or clinical performance of any provider of health care professional services; or
 - (2) Promoting and maintaining the quality of health care professional services being provided; or
 - e. The execution of, or failure to execute, a decision or directive of your formal accreditation standards review or equivalent professional board or committee.
- 2. "Wrongful act" means:
 - a. Any breach of responsibility, obligation or duty;
 - b. Any negligent act, error or omission; or
 - c. Any other allegation claimed against any **insured** arising out of, relating to or resulting from the rendering of or failure to render "health care professional services".

This policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim or suit or payment of **loss**, cost or expense excluded by this endorsement.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 9

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

CRISIS MANAGEMENT LOSS AND EXPENSE INSURANCE EXCLUSION

This endorsement modifies insurance provided under the EXCESS THIRD PARTY LIABILITY POLICY.

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to and shall not be subject to the "crisis management loss or expense" coverage afforded by Policy Number VFNU-TR-0002294-03/000, issued by National Union Fire Insurance Company of Pittsburgh, Pa., however defined in such policy. It is further agreed that this policy does not apply to any claim, suit, demand or **loss** that alleges "crisis management loss or expense" that, in any way, in whole or in part, arises out of, relates to or results from any coverage afforded by the policy designated above.

This policy will not recognize reduction or exhaustion of the underlying limit of insurance or self-insured retention by payment of **loss**, costs, expenses, fees, settlements or judgments because of "crisis management loss or expense" when such payment of **loss**, costs, expenses, fees, settlements or judgments are as a result of any coverage afforded by the policy designated above.

As used in this exclusion, the definition of "crisis management loss or expense" means fees, expenses, and amounts paid by an **insured** or another party on behalf of the **insured** to maintain or restore public confidence in the **insured** and which are covered in the policy designated above regardless of the actual term used in such policy.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 10

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

Endorsement Effective Date: February 01, 2023

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CANCELLATION – AMENDMENT OF NOTICE (90 Days)

It is agreed that the number of days advance written notice of cancellation, for reasons other than nonpayment of premium, stated in the first paragraph of **VI. CONDITION g. Cancellation** is amended to ninety (90) days. If we cancel for reason of nonpayment of premium, the number of days notice stated in the first paragraph of **VI. CONDITION g. Cancellation** remains unchanged.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 11

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

EXCLUSION OF DESIGNATED UNDERLYING INSURANCE COVERAGE

This insurance modifies insurance provided under the following:

EXCESS THIRD PARTY LIABILITY POLICY

SCHEDULE

"Excluded Designated Coverage(s)":

Policy, Coverage or Endorsement Title	Policy Number	Form Number
EMERGENCY SERVICE ORGANIZATION MANAGEMENT	VFNU-TR-0002294- 03/000	VML101 01-20

It is agreed that regardless of whether or not coverage is afforded by the **underlying insurance**, this policy does not apply to and shall not be subject to the coverage afforded by the "Excluded Designated Coverage(s)". It is further agreed that this policy does not apply to any claim, suit, demand or **loss** that alleges "bodily injury", "property damage" or "personal and advertising injury" that, in any way, in whole or in part, arises out of, relates to or results from any coverage afforded by the "Excluded Designated Coverage(s)".

This policy will not recognize reduction or exhaustion of the underlying limit of insurance or self-insured retention by payment of **loss**, costs, expenses, fees, settlements or judgments because of "bodily injury," "property damage," or "personal and advertising injury" when such payment of **loss**, costs, expenses, fees, settlements or judgments are as a result of any coverage afforded by the "Excluded Designated Coverage(s)".

As used in this exclusion, the definitions of "bodily injury", "property damage" and "personal and advertising injury" are as defined in the **controlling underlying insurance**.

The following definition applies to this endorsement:

"Excluded Designated Coverage(s)" means the specified policy(ies), coverage(s) or endorsement(s) listed by Policy, Coverage or Endorsement Title, and Policy Number and Form Number in the **SCHEDULE** above.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 12

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

CROSS SUITS EXCLUSION (NAMED INSURED)

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to any claim, suit, demand or **loss** that alleges "bodily injury", "property damage" or "personal and advertising injury" that, in any way, in whole or in part, arises out of, relates to or results from any claim or demand made, suit brought, or **loss** alleged by one Named Insured against another Named Insured.

As used in this exclusion, the definitions of "bodily injury", "property damage" and "personal and advertising injury" are as defined in the **controlling underlying insurance**.

This policy will not recognize reduction or exhaustion of the **underlying insurance** by any claim or suit or payment of **loss**, cost or expense excluded by this endorsement.

All other terms and conditions of this policy remain unchanged.

Endorsement Number: 13

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

WASHINGTON EXCLUSION OF TERRORISM (THRESHOLD)

This endorsement modifies insurance provided under this policy.

- A. The following definitions are added and apply under this endorsement whenever the term terrorism, the phrase any injury or damage, or the phrase certified act of terrorism are enclosed in quotation marks:
 - **1.** "Terrorism" means activities against persons, organizations or property of any nature:
 - **a.** That involve the following or preparation for the following:
 - (1) use or threat of force or violence; or
 - (2) commission or threat of a dangerous act; or
 - (3) commission or threat of an act that interferes with or disrupts an electronic, communication, information, or mechanical system; and
 - b. When:
 - (1) the effect is to intimidate or coerce a government or a civilian population or any segment thereof, or to disrupt any segment of the economy; and/or
 - (2) it appears that the intent is to intimidate or coerce a government or a civilian population, or to further a philosophical, political, ideological, religious, social or economic objective or to express (or express opposition to) a philosophical, political, ideological, religious, social or economic objective.
 - 2. "Any injury or damage" means any injury or damage covered under this policy to which this endorsement is applicable, and includes but is not limited to "bodily injury", "property damage", "personal and advertising injury", "injury" or "environmental damage" as defined in the **controlling underlying insurance** or in this policy.
 - **3.** "Certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security and the Attorney General of the United States, to be an "act of terrorism" pursuant to the federal Terrorism Risk Insurance Act of 2002 and any amendments thereto.
- **B.** The following exclusion is added:

EXCLUSION OF TERRORISM

It is agreed that regardless of whether or not coverage is afforded in the **controlling underlying insurance**, this policy does not apply to any claim, suit, demand or **loss** that alleges "any injury or damage" that, in any way, in whole or in part, arises out of, relates to or results from "terrorism", including action in hindering or defending against an actual or expected incident of "terrorism". This exclusion also applies when one or more of the following are attributed to an incident of "terrorism":

- 1. The "terrorism" is carried out by means of the dispersal or application of radioactive material, or through the use of a nuclear weapon or device that involves or produces a nuclear reaction, nuclear radiation or radioactive contamination; or
- 2. Radioactive material is released, and it appears that one purpose of the "terrorism" was to release such material; or
- **3.** The "terrorism" involves the use, release, or escape of nuclear materials, or that directly or indirectly results in nuclear reaction, nuclear radiation or radioactive contamination; or
- **4.** The "terrorism" is carried out by means of the dispersal or application of pathogenic or poisonous biological or chemical materials; or
- 5. Pathogenic or poisonous biological or chemical materials are released, and it appears that one purpose of the "terrorism" was to release such materials.

Other than "terrorism" described in paragraphs **B.1.** through **B.5.** above, this exclusion does not apply to "terrorism" that is not a "certified act of terrorism" solely due to the fact the event did not meet the threshold of \$5,000,000 as provided in the definition of "act of terrorism" pursuant to the federal Terrorism Risk Insurance Act of 2002 and any amendments thereto and would otherwise meet the requirements in the definition of "act of terrorism".

Further, this exclusion also applies to any claim, suit, demand or loss that alleges "any injury or damage" that is afforded by Commercial Automobile Insurance or Professional Liability Insurance regardless of whether or not coverage is afforded in the controlling underlying insurance.

C. Coverage provided by this endorsement for "any injury or damage" arising out of "terrorism" that did not meet the threshold of \$5,000,000 described above, other than "terrorism" excluded in B. above, is afforded only to the same extent that coverage is afforded in the controlling underlying insurance for "any injury or damage". This insurance will not provide broader coverage than that provided by the controlling underlying insurance. If there is a reduction or exhaustion of the underlying insurance as a result of a sub-limit of liability applicable to "terrorism" which sub-limit of liability is less than the total Limits of Liability of the Underlying Insurance as stated in Schedule A – Schedule of Underlying Insurance, any difference between the total Limits of Liability of the Underlying Insurance and Sub-Limit of Liability applicable to "terrorism" available in the underlying insurance shall be paid by the insured before coverage under this endorsement becomes applicable.

Further, coverage provided by this endorsement will not recognize reduction or exhaustion of the **underlying insurance** by any claim or suit or any payment of **loss**, cost or expense whether:

- **1.** Excluded by this endorsement; or
- 2. As a result of the application of the aggregate limit(s) of the **underlying insurance**.

All other terms and conditions of this Policy remain unchanged.

Endorsement Number: 14

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: UXP1037022-03

Named Insured: South Snohomish County Fire & Rescue Regional Fire Authority

Board Meeting Agenda Bill Agenda Item 11.c.

Meeting Date: 2/6/2024

Department:

City Clerk

Subject

Public Comment Policy and Protocol for Discussion and Potential Action - Chair Micah Rowland

Prior Board Action:	None.
Recommended Action:	For Discussion and possible action.
Related Items:	None.
Staff Contact:	Executive Assistant Melissa Blankenship
Approval Signature:	Chair Micah Rowland
Legal Review:	Legal Review Completed

<u>Summary</u>

This item is to continue previous discussion regarding public comment policies.

Discussion

While South County Fire respects the public's right to express their First Amendment rights, there have been several reported incidents of profanity, speaking on non-substantive topics, hate speech and issues of public commentors who do not follow policy and disrupt meetings during the public comment portion of meetings.

Chair Rowland is asking the Board to address ways in which we can improve procedures and practices to address these incidents in the future.

Fiscal Impact

Recommendation