Bollinger Specialty Group Student Accident Insurance Renewal Proposal Designed Especially for

Turner Unified School District #202

Bollinger Contact:

Laura Kajor

Proposal Type:

Renewal

Phone Number:

(973) 921-8038

Proposal #:

045138

Carrier:

Zurich

Policy #:

MCB0207496

Effective Date:

3/1/2021

Plan Year:

2021-2022

Broker Name:

Expiration Date: 2/28/2022

Broker Commission:

	4-2-Wall Co. 10	4 Mill Brids 4-Discourage
Student Coverage Excluding Interscholas	8 [Bell 7 4 % [4 4 1 (-) 2 (6-4 - 6)

Coverage

Plan Options

Maximum Benefit

Benefit Period

Payment Basis

Deductible

Ded. Type

All Students

Plan 1 - See Attached

for Benefit Summary

\$10,000

1 Year

Excess

Athlatia Carraras	o Indicalización All I	ntaraabalaatia	Sports & Football
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Coverage

Plan Options

Maximum Benefit

Benefit Period

Payment Basis

Deductible

Ded. Type

All Athletes

Plan 1 - See Attached for Benefit Summary

\$25,000

1 Year

Excess

\$0

Annual Premium*: \$16,813.00

We thank you for the opportunity to provide a proposal for your insurance needs. Please feel free
to call your sales representative if you have any questions about this proposal

Accepted:

To renew coverage, this form must be signed and returned prior to the effective date. Please mail this form to the address listed below or email to Laura Kajor@rpsins.com.

*Please note premium is contingent upon review of enrollment at the time of renewal.

This quote letter provides a summary of the coverage to be provided and is not intended to substitute for or duplicate policy provisions. It is subject to the provisions of the policy of insurance to be issued by Zurich American Insurance Company. You will need to contact us for exact policy language, as well as for any limitations and restrictions that may be applicable. The policy is the only contract between the Policyholder and us. It contains the actual terms, conditions and limits of the coverage to be provided. If there is any conflict between this quote and the policy, the policy will govern in all cases. Acceptance of this quote is contingent upon and subject to the actual terms and conditions of the policy as issued.



Zurich American Insurance Company Plan Coverage Summary - Plan 1

and the second s		
100% U&C		
100% U&C 60-visit limit		
100% U&C		

The Master Policy contains all of the provisions, limitations, exclusions and qualifications of the insurance benefits. If any discrepancy exists between this summary and the Master Policy, the Master Policy will govern and control the payment of claims.

Bollinger Specialty Group Student Accident Contact and Enrollment Information Form

Turner Unified School District #202

	Contact Into	rmation	
Т	his form must be signed and returned	d with your signed acceptance.	
School Contact Name Address City, State, Zip Phone # Email Address City		Broker Contact Name Address City, State, Zip Phone # Email Address	
Plea	Enrollment Information necessary. Thank you for	is correct. Indicate changes where	
Enrollment by School			
School Name Turner Unified School District #202	Enrollment 4,079	Indicate Changes 3970	
Total District Enrollment:	4,079	3970	
Enrollment Totals			
K-8	2801		
9-12	11109		
# of Athletes			
*Only for accounts that cover interscholastic sports and/or football	846		
Accepted: Assisten	Wordling	Title: Supervisor of Busines. Services	Date: 2/23/2/