

NYMIR - NY Municipal Insurance Reciprocal

Report Period: 1/1/2012 To: 10/11/2018

Loss Run Valued as of

TSKAN ____ Town of Skaneateles

| | Risk Management Company, Inc. | | CLAIM STAT | 50000058494464604400000000000000000000000000000 | 53 4 5 50 73 70 40 4 10 10 10 10 10 10 10 10 10 10 10 10 10 | | D VI CAN Y INTO A VI | |
|----------------------|-----------------------------------|--|--------------------|---|---|------------------------|----------------------|-------------------|
| CLAIM NUMBER | CAUSE OF LOSS CLAIMANT | LOCATION DAMAGES/INJURIES POB Injury/Other Description | LOB Type Of Lo | DATE ENTERED | PAID TO DATE | OUTSTANDING RESERVE | RECOVERIES | TOTAL INCURRED |
| TSKAN-2011-002-001 | Slip and Fall in Stairs | | CLOSED | 8/15/2011 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Fred Scholl | e e | CGL GL | 8/16/2011 Expense 1/18/2013 | \$3,905.28 | \$0.00 | | \$3,905.28 |
| | | | Subtotal for the o | daim | \$3,905.28 | \$0.00 | | \$3,905.28 |
| | Water Damage/Flooding on Premises | | CLOSED | 8/9/2011 Indemnity | \$0,00 | \$0.00 | | \$0.00 |
| | Wirths Automotive | | CGL GL | 5/22/2012 Expense 12/17/2012 | \$0,00 | \$0.00 | | \$0.00 |
| | | | Subtotal for the o | laim | \$0.00 | \$0.00 | | \$0.00 |
| | Windstorm | Rink & Recreation | CLOSED | 1/17/2012 Indemnity | \$15,174.00 | \$0,00 | | \$15,174.00 |
| | Town of Skaneateles | i. | CPR PA | 2/3/2012 Expense 2/29/2012 | \$767.21 | \$0.00 | | \$767.21 |
| | | | Subtotal for the c | laim | \$15,941.21 | \$0.00 | | \$15,941.21 |
| SKAN-2012-002-001 | Water Damage/Flooding on Premises | | CLOSED | 4/27/2012 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Virginia Muggleton | | CGL GL | 5/7/2012 Expense 5/31/2012 | \$0.00 | \$0.00 | | \$0.00 |
| | | | Subtotal for the o | laim | \$0.00 | \$0.00 | | \$0.00 |
| SKAN-2012-003-001 | Struck by Vehicle On Premises | | CLOSED | 12/26/2012 Indemnity | \$0,00 | \$0.00 | | \$0.00 |
| | Clacys Leon, Jr. | Foot/Toes | CGL GL | 12/27/2012 Expense 3/29/2013 | \$0.00 | \$0.00 | | \$0.00 |
| | | | Subtotal for the c | laim | \$0.00 | \$0.00 | | \$0.00 |
| SKAN-2013-001-001 | Snow Removal | | CLOSED | 1/29/2013 Indemnity | \$0,00 | \$0.00 | | \$0.00 |
| | Benjamin Passetti | | CAP AL | 1/31/2013 Expense 5/13/2013 | \$0.00 | \$0.00 | | \$0.00 |
| 10/12/2018 9:30:39 / | AM | | WRM40 | 4 | | | | Page 1 of 4 |



NYMIR - NY Municipal Insurance Reciprocal Report Period: 1/1/2012 To: 10/11/2018



Loss Run Valued as of Prepared by Wright Risk Management Company, Inc. TSKAN Town of Skaneateles

| CLAIM NUMBER | CAUSE OF LOSS CLAIMANT | LOCATION DAMAGES/INJURIES POB Injury/Other Description | CLAIM STATU LOB Type Of Loss | DATE ENTERED | PAID TO DATE | OUTSTANDING RESERVE | RECOVERIES | TOTAL INCURRED |
|--------------------|--|--|------------------------------------|----------------------------------|--------------|------------------------|------------|-------------------|
| | | | Subtotal for the cl | aim | \$0.00 | \$0.00 | | \$0.00 |
| TSKAN-2013-002-001 | Road Design | | CLOSED | 4/24/2013 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Patrick Hallinan | | CGL GL | 4/26/2013 Expense 8/26/2013 | \$0.00 | \$0.00 | | \$0.00 |
| | | | Subtotal for the cl | aim | \$0.00 | \$0.00 | | \$0.00 |
| | Road Design | | CLOSED | 4/24/2013 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Michael Stern | Skull/Forehead | CGL GL | 4/26/2013 Expense | \$0.00 | \$0.00 | | \$0.00 |
| | | e e e e e e e e e e e e e e e e e e e | Subtotal for the cla | aim | \$0.00 | \$0.00 | | \$0.00 |
| ISKAN-2013-003-001 | Fall on Premises | | CLOSED | 5/2/2013 Indemnity | \$5,000.00 | \$0.00 | | \$5,000.00 |
| | Brogan Baldwin | Lower Leg | GL CGL | 5/7/2013 Expense 7/19/2013 | \$1,611.74 | \$0.00 | | \$1,611.74 |
| | | | Subtotal for the cla | aim | \$6,611.74 | \$0.00 | | \$6,611.74 |
| TSKAN-2013-004-001 | Insured Struck Adverse Vehicle Backing | | CLOSED | 11/6/2013 Indemnity | \$6,606.11 | \$0.00 | | \$6,606.11 |
| | John Chambers | | CAP AL | 11/7/2013 Expense* | \$311.00 | \$0.00 | | \$311.00 |
| | | • | Subtotal for the cla | aim | \$6,917.11 | \$0.00 | | \$6,917,11 |
| | Insured Struck Parked Vehicle | | CLOSED | 11/20/2014 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Town of Skaneateles | | | 11/24/2014 Expense 11/24/2014 | \$0.00 | \$0.00 | | \$0.00 |
| | | | Subtotal for the cla | | \$0.00 | \$0.00 | | \$0.00 |



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Loss Run Valued as of Prepared by Wright Risk Management Company, Inc.

Town of Skaneateles TSKAN

| CLAIM NUMBER | CAUSE OF LOSS CLAIMANT | LOCATION DAMAGES/INJURIES POB Injury/Other Description | CLAIM STAT LOB Type Of Lo | DATE ENTERED | PAID TO DATE | OUTSTANDING RESERVE | RECOVERIES | TOTAL INCURRED |
|----------------------|-------------------------------|--|---------------------------------|---------------------------|--------------|------------------------|------------|-------------------|
| TSKAN-2014-001-002 | Insured Struck Parked Vehicle | | CLOSED | 11/20/2014 Indemnity | \$1,555.57 | \$0.90 | | \$1,555.57 |
| | Ivan Vannorstrand | | CAP | 11/24/2014 Expense | \$105.00 | \$0.00 | | \$105.00 |
| | | | AL | 12/10/2014 | | | | |
| | | | Subtotal for the | claim | \$1,660.57 | \$0.00 | | \$1,660.57 |
| TSKAN-2015-001-001 | Fall on Premises | | CLOSED | 4/10/2015 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Mary Leonard | | CGL/ | 4/15/2015 Expense | \$0.00 | \$0.00 | | \$0.00 |
| | | Skull/Forehead | GL | 5/13/2015 | | | | |
| | | | Subtotal for the | claim | \$0,00 | \$0.00 | | \$0.08 |
| | Slip and Fall on Premises | | CLOSED | 5/6/2015 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Sharon Paddock | | CGL | 7/16/2015 Expense | \$1,796.00 | \$0.00 | | \$1,796.00 |
| | | Facial | GL | 8/28/2018 | | | | |
| | | | Subtotal for the | claim | \$1,796.00 | \$0.00 | | \$1,796.00 |
| TSKAN-2015-003-001 | Road Maintenance | | CLOSED | 6/13/2015 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Jeffrey Stringham | | CGL | 9/17/2015 Expense | \$0.00 | \$0.00 | | \$0.00 |
| | | Other/Unspecified | GL | 7/25/2016 | | | | |
| | | | Subtotal for the | claim | \$0.00 | \$0.00 | | \$0.00 |
| TSKAN-2015-004-001 | Request for Injunctive Relief | | CLOSED | 12/28/2015 Indemnity | \$0.00 | \$0.00 | | \$0.00 |
| | Stephen McGlynn | | MPO | 12/28/2015 Expense | \$0.00 | \$0.00 | | \$0.00 |
| | | | PO | 2/1/2016 | | | | |
| | | | Subtotal for the | claim | \$0,00 | \$0.00 | | \$0.00 |
| rskan-2016-001-001 | Road Design | | CLOSED | 1/7/2016 Indemnity | \$0.00 | \$0,00 | | \$0.00 |
| | Scott Haffer | | CGL | 1/25/2016 Expense | \$0.00 | \$0.00 | | \$0.00 |
| | | | GL | 6/24/2016 | | | | |
| 10/12/2018 9:30:39 / | AM | | WRM40 | 14 | | | | Page 3 of 4 |



NYMIR - NY Municipal Insurance Reciprocal

Report Period: 1/1/2012 To: 10/11/2018



\$23,929,42

\$0.00

\$0.00

\$0.00

\$154,857.25

\$211,368.24

Loss Run Valued as of Prepared by Wright Risk Management Company, Inc. TSKAN Town of Skaneateles

| CLAIM NUMBER | CAUSE OF LOSS CLAIMANT | LOCATION DAMAGES/INJURIES POB Injury/Other Description | CLAIM STAT LOB Type Of Los | DATE ENTERED | PAID TO DATE | OUTSTANDING RESERVE | RECOVERIES | TOTAL INCURRED |
|--------------------|-----------------------------------|--|----------------------------------|---------------------------------|--------------|------------------------|------------|-------------------|
| | | | Subtotal for the c | laim | \$0.00 | \$0.00 | | \$0,00 |
| TSKAN-2016-002-001 | Water Damage/Flooding on Premises | | CLOSED | 6/15/2016 Indemnity | \$16,710.87 | \$0.00 | | \$16,710.87 |
| | John Delano | | CGL GL | 6/23/2016 Expense 3/30/2017 | \$1,291.06 | \$0.00 | | \$1,291.06 |
| | | | Subtotal for the c | laim | \$18,001.93 | \$0.00 | | \$18,001.93 |
| TSKAN-2016-003-001 | Fall At Camp | | CLOSED | 7/19/2016 Indemnity | \$1,528.15 | \$0.00 | | \$1,528.15 |
| | Lily Traub | Teeth | CGL GL | 7/29/2016 Expense 12/21/2016 | \$0.00 | \$0.00 | | \$0.00 |
| | | | Subtotal for the c | laim | \$1,528.15 | \$0.00 | | \$1,528.15 |
| TSKAN-2016-004-001 | Struck by Falling/Flying Object | Rink & Recreation | CLOSED | 7/22/2016 Indemnity | \$149.00 | \$0.00 | | \$149.00 |
| | Nicholas Rottger | | CPR PA | 7/29/2016 Expense 8/2/2016 | \$0,00 | \$0.00 | | \$0.00 |
| | | | Subtotal for the c | laim | \$149.00 | \$0.00 | | \$149.00 |
| | | | Subtotal for all | CLOSED | \$56,510.99 | \$0,00 | | \$56,510.99 |

\$130,927.83

\$211,368,24

Total for the Subscriber:

Subtotals for all previous closed claims:



Loss History

Page 1 of 2

Loss Valuation Date: 10/10/2018

The policy information below has been updated within the past 30 days.

Account Summary

North Area - NY

Insured: TOWN OF SKANEATELES

24 JORDAN STREET SKANEATELES, NY 13152Agency: EASTERN SHORE ASSOCIATES

PO BOX 480

FULTON, NY 130690480

Code: 4810085

| Line Of Business | Prefix | Policy Number | Policy Term | Number of Claims | Net Paid Losses | Current Reserves | Paid + Reserves | Allocated Expenses | Total |
|--------------------------|--------|---|-------------------------|---------------------|-----------------|---------------------|--------------------|-----------------------|---------|
| | | | | | | | | | |
| Commercial Inland Marine | СІМ | 9544746 | 01/01/2016 - 01/01/2017 | 0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| | | *************************************** | 01/01/2015 - 01/01/2016 | 0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| | | | 01/01/2014 - 01/01/2015 |] | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 |
| | | | 01/01/2013 - 01/01/2014 | 0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| ALL YEARS | | | | 1 | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 |
| IM TOTAL | | | | 1 | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 |
| GRAND TOTAL | W-2-4 | | | 1 | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 |

This report is intended for informational purposes only, is subject to changes, and shall not be construed as an admission of liability. Reserve information is revealed only as a recognition of a potential exposure and does not necessarily represent the value of a claim or a decision that the claim should or will be paid.

All financial information is updated on the 5th business day of each month. We are currently updating our loss run reporting to provide you with a better experience. During this time, not all claims information will be available on the loss run report. Claims detail is available on the Agents' Portal using the claims inquiry feature.

NOTE: If a policy was previously written with Safeco Insurance, the policy's complete loss history will not be available on this report. To obtain the claims history while a policy was written with Safeco, you must access the Loss Runs tool on www.safeconow.com.





Loss History

Loss Valuation Date: 10/10/2018

The policy information below has been updated within the past 30 days.

Account Detail

North Area - NY

Insured: TOWN OF SKANEATELES

24 JORDAN STREET SKANEATELES, NY 13152Agency: EASTERN SHORE ASSOCIATES

PO BOX 480

FULTON, NY 130690480

Code: 4810085

| Claim Number | Loss Date | Date Received | Location/ Bldg/Veh Number | Actual Paid Losses | Recovery Amount | Net Paid Losses | Current Reserves | Paid + Reserves | Allocated Expenses | Total | Claim Status |
|--|--|---------------|---|-----------------------|--------------------|--------------------|---------------------|--------------------|-----------------------|--|--|
| Claimant | Name or Cover | age Туре | Risk State | | | | Description | of Loss | | | |
| | | | | | | | | | | me dina suma manga di kacamatan mangan diku manga di kalaba dan Mang | ~~~ |
| Policy Nun | nber: IM 9 | 544746 | *************************************** | | Policy | Term: | 01/01/2016 - 0 | 01/01/2017 | | | |
| TOTAL | | | | Sol | \$0 | \$0 | \$0 | S0 | 50 | \$0 | |
| Policy Nun | Policy Number: IM 9544746 | | | | | | | | | | |
| TOTAL | | | | \$0 | \$0 | \$0 | \$0 | \$0 | 50 | \$0 | |
| Policy Num | iber: IM 9: | 544746 | | | Policy | Term: | 01/01/2014 - 0 |)1/01/2015 | | | |
| 005459610 | 09/29/2014 | 10/27/2014 | 1 | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 | C |
| TOWN OF SKA | TOWN OF SKANEATELES INSURED HELPING NYS WITH GRINDING WHEN A NYS TRUCK STOPPED IN FRONT OF INSURED'S 2013 INT'L CAUISM THEGRINDER BEHIND TH | | | | | | | | | CAUISNG | |
| TOTAL | | | | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 | |
| Policy Number: IM 9544746 Policy Term: 01/01/2013 - 01/01/2014 | | | | | | | | | | | |
| TOTAL | | | | \$0 | \$0 | \$0 | \$0 | \$0 | 80 | \$0 | 900 000 000 000 000 000 000 000 000 000 |
| GRAND TO | TAL | | | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 | \$0 | \$5,515 | The final contraction of the con |

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