



CSU Builder's Risk Program July 1, 2014 – July 1, 2015

Insurer:

Illinois Union Insurance Company (ACE)

Policy No:

I20799754 010

Named Cover Entity:

The Trustees of the California State University (CSU)

Coverage Description:

“All Risk” Builder’s Risk Insurance, including Property Damage, Property in Transit, Off-Site Storage, Expediting Expense, Flood (including tidal waves), Terrorism*, and Earthquake**

* Terrorism Risk Insurance Program Reauthorization Act, 2007

** CSU maintains a self-fund for losses in excess of the deductible caused by earthquakes as defined in CA Public Contracts Code, section 7105 (b) (2).

Additional Insured(s):

All owners, all contractors and subcontractors of every tier, tenants of the Insured Project, and any other individual or entity specified in such contract, are recognized as Additional Insured hereunder to the extent required by any contract or subcontract for the Insured Project, and then only as their respective interests may appear.

Coverage Description:

“ACE Builders Risk XTRA Coverage Form” covering direct physical loss to Insured Project(s) while in the course of construction, reconstruction or renovation.

Covers CSU construction projects whose:

1. Construction begins within the Policy Period,
2. Project Enrollment form is completed and approved by underwriting, and
3. Notice to Proceed is issued by the CSU to the General Contractor;

Until completion up to 42 months from start date of construction.

Limit:

\$50,000.000 Per Occurrence

Sub-limit:

| | |
|---------------|--|
| \$25,000,000 | Wood-Frame Construction |
| \$1,000,000 | Temporary Structures |
| \$1,000,000 | Property in Transit |
| \$1,000,000 | Property in Temporary Storage or Staging Areas |
| 25% of Loss / | Debris Removal |
| \$1,000,000 | |
| Maximum | |

While we believe this Summary of Insurance fairly represents the terms, conditions and exclusions found in your insurance policies, in the event of any differences between the policies themselves and this summary, the policy provision will direct any resolution. This summary is not intended to replace or supersede any of your insurance contracts.

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| | |
|----------------------------|--|
| \$250,000 | Protection of Property |
| \$250,000 | Protection Service Charge |
| \$25,000 | Fire Protection Systems |
| \$10,000 | Valuable Papers & Records |
| \$100,000 | Installed Trees & Shrubs |
| \$100,000 | Expediting Expense |
| \$50,000 | Loss Data Preparation Costs |
| \$10,000,000 / 365 days | Loss of Rents (optional for additional premium) |
| \$10,000,000 | Flood (each Occurrence and Aggregate) |
| \$1,000,000 | Pollutant Clean-up (each Occurrence and Aggregate) |
| 105% | New Construction Escalation Clause |

Deductible:

| | |
|-----------|-----------------------------------|
| \$25,000 | per Occurrence |
| \$100,000 | per Occurrence - Flood |
| \$50,000 | per Occurrence – Water Damage |
| \$100,000 | per Occurrence - Earth Movement** |
| 30 days | Loss of Rents |

Exclusions (included but not limited to):

1. Earth Movement**
2. Pollution / Contamination
3. Electronic Data / Cyber Risk
4. Mold / Fungus
5. Nuclear, Biological, Chemical

**** Excluded by carrier, self-funded by CSU**

Loss Valuation:

Replacement Cost if replaced, otherwise
Actual Cash Value

Comments / Conditions:

1. Projects to be reported quarterly
2. Projects that are reported during the policy term are held covered for up to 42 months from project start date
3. Projects whose initial reported value is less than \$5,000,000 are not required to be reported upon completion
4. Projects whose initial value is \$5,000,000 or more shall report final contract values and term during the next quarterly reporting period following project completion

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Claims Reporting:

Alliant Insurance Services, Inc.
100 Pine Street, 11th Floor
San Francisco, CA 94111-5101

Bob Frey, Claims Manager
Email: rfrey@alliant.com
Phone: 415-403-1445
Cell: 415-518-8490
Fax: 415-402-1466

Martin Fox-Foster, Claims Specialist
Email: mfox-foster@alliant.com
Phone: 415-403-1417
Fax: 415-402-1466

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