

**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  
INSURANCE POLICY – INFORMATION PAGE**

**INSURER:**  
NGM INSURANCE COMPANY  
4601 TOUCHTON ROAD EAST  
SUITE 3400  
JACKSONVILLE, FL 32245-6000

**POLICY NO:** WCT0015W  
**RENEWAL OF:** WCT0015W  
**NCCI Company No:** 16322  
**Account No:** CACT0015W

**ITEM 1. NAMED INSURED AND MAILING ADDRESS:**  
KACO ELECTRIC, INC.  
42 KING ST  
MONSON MA 01057-9640

**AGENCY NAME AND ADDRESS:**  
REJEAN J REMILLARD INS AGY INC  
1040 SPRINGFIELD ST  
FEEDING HILLS, MA 01030  
**AGENCY PHONE NO.:** (413) 789-3070  
**AGENCY NO.:** 200080

**LEGAL ENTITY:** CORPORATION

**OTHER WORKPLACES NOT SHOWN ABOVE:** (See Workers Compensation Location Schedule)

**ITEM 2. POLICY PERIOD:** From: 04-07-2018 To: 04-07-2019  
Effective 12:01 A.M. Standard Time at the Insured's mailing address.

**ITEM 3. COVERAGE:**

A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of the states listed here:  
**MA**

B. Employers' Liability Insurance: Part Two of the policy applies to work in each state listed in Item 3.A. The limits of liability under Part Two are:

Bodily Injury by Accident:	\$	1,000,000	each accident
Bodily Injury by Disease:	\$	1,000,000	policy limit
Bodily Injury by Disease:	\$	1,000,000	each employee

C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here:  
all states except: **ND, OH, WA, WY**  
and states designated in ITEM 3A of the information page.

D. This Policy includes these Endorsements and Schedules:  
See Schedule of Forms and Endorsements.

**ITEM 4. PREMIUM:** The premium for this Policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All information required on the Workers Compensation Classification Schedule is subject to verification and change by audit. Please see Classification Schedule.

		Total Estimated	
Minimum Premium: \$	300	Annual Premium: \$	2,689
Audit Period: <b>ANNUAL</b>			

Date: 02-27-2018

Countersigned by \_\_\_\_\_