

**Preferred Governmental Insurance Trust  
Coverage Agreement Endorsement**

**Endorsement No.:** 1

**Member:** Satellite Beach, City of

**Effective Date:** 10/01/2016

**Agreement No.:** WC2FL1 0052503 15-03

**Coverage Period:** 10/01/2015 to 10/01/2017

---

Second annual installment is \$70,322, which will be invoiced based on current installment plan.

The Coverage Agreement is updated to utilize the 2016 NCCI Experience Mod, which is .72 in lieu of the 2015 NCCI Experience Mod of .82 per the revised rating worksheet.

Updated Payrolls:

The Coverage Agreement is updated to include the amended payrolls per the revised rating worksheet attached.

---

**Subject otherwise to the terms, conditions and exclusions of the coverage agreement.**

Issued: 08/19/2016

Authorized by: \_\_\_\_\_

  
\_\_\_\_\_