

Downtown Ithaca Local Development Corporation



BOARD OF DIRECTORS MEETING

TUESDAY, FEBRUARY 14, 2023, 10:00 – 11:30 a.m.

VIA ZOOM

AGENDA

1. Welcome/Call to Order
2. Voting Items
 - a. Minutes of the January 17, 2023 Board Meeting
 - b. Insurance Policy
3. Updates & Discussion
 - a. ASM GM candidate next steps
 - b. Bylaws
 - c. Art
4. Capital Project
5. Executive Director's Report
6. New Business
7. Questions about Written Reports
8. Meeting Adjourned

Downtown Ithaca Local Development Corporation

BOARD OF DIRECTORS MEETING
TUESDAY, JANUARY 17, 2023, 10:00 a.m.
VIA ZOOM



MINUTES

Board Member	Organization	Present
Jennifer Tavares	Tompkins Chamber of Commerce	Yes
Gary Ferguson	Downtown Ithaca Alliance	No
Tom Knipe	City of Ithaca	Yes
Peggy Coleman	Ithaca Tompkins County CVB	Yes
Cathy Hart	Ithaca Marriott Downtown	Yes
Teri Tarshus	Baywood Hotels	Yes
Kelli Cartmill	Hilton Garden Inn	Yes
Greg Conard	Hotel Ithaca	Yes
Nick Helmholdt	Tompkins County	Yes
Guests:		
Suzanne Smith Jablonski	Downtown Ithaca LDC	Yes
Sara Hayes	Hayes Strategy	Yes
Lisa Conarton	Ithaca Tompkins County CVB	Yes
Bella Glidden	CVB Intern	Yes

WELCOME/CALL TO ORDER

VOTING ITEMS

2023 LDC Board of Directors

K. Cartmill moved and N. Helmholdt seconded a motion to approve the 2023 officers, directors, and committees:

2023 Officers and Directors: Jennifer Tavares, President; Teri Tarshus, Vice President; Gary Ferguson, Secretary; Tom Knipe, Treasurer; Kelli Cartmill; Peggy Coleman; Greg Conard; Cathy Hart; Nick Helmholdt

Executive Committee and Finance/Audit Committee: Jennifer Tavares; Teri Tarshus; Gary Ferguson; Tom Knipe

Fiscal Oversight Committee: Suzanne Smith Jablonski, Executive Director, as LDC representative

11/25/2023 Board of Directors Meeting minutes

C. Hart moved and K. Cartmill seconded a motion to approve the minutes. Approved unanimously.

CAPITAL PROJECT REPORT

S. Hayes presented a board report including progress photos, construction milestones, procurement update, budget projection and grants update.

UPDATES AND DISCUSSION

Artwork

Building upon visioning work conducted at the previous building committee meeting, the board discussed options for artwork in the conference center. Considerations included potential themes and community priorities to highlight; plans for exterior artwork removed during garage construction; budgeted vs. needed resources; and overall project processes.

Budget & Staffing

T. Knipe and S. Smith Jablonski reported on recent work to update and examine budget projections. The finance committee will review and present to the LDC board for further examination, but initial indications are promising. Projections support a move for the executive director to become full-time.

VOTE: C. Hart moved and T. Knipe seconded a motion to approve the executive director to increase weekly hours to 25 hours per week at this time, and to move to a full-time schedule in Q2 2023, in tandem with a review of the 2024 budget. Approved unanimously.

Bylaws

S. Smith Jablonski reported that she, G. Ferguson, and T. Tarshus conducted a preliminary review of the bylaws. Further discussion with the LDC board will take place when they three can be present.

LDC Executive Director Report

S. Smith Jablonski reported that the 2023-24 calendar/tickler is in development, with more information needed from ASM. LDC board members have January 31 on their calendar for a potential meeting regarding the General Manager position. Smith Jablonski is reviewing an insurance quote and coverage needs with Tompkins Insurance.

Meeting Adjourned

G. Conard moved and P. Coleman seconded a motion to adjourn. Approved unanimously.

Enclosed you will find **an admitted** Businessowners quote for Downtown Ithaca Local Development. The quote number is NBP023F1109.

- Section I-** Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.
- Section II-** Summarizes the locations, building information, property coverages, warranties, and the corresponding classifications with the exposures and rates.
- Section III-** Provides the Liability Limits of Insurance
- Section IV-** Lists the required coverage forms, notices, endorsements and exclusions.
- Section V-** Offers optional coverages that are available to the applicant but are not currently included in the quote.
- Section VI-** Provides the Direct Bill Payment Description.

In addition we have included some materials that will assist in the evaluation of this offer of coverage.

- A Commercial Umbrella quote that provides higher limits of Liability. It is attached as a separate quote under #CUP023F2547. This quote is optional and not required to be bound along with the primary quote. If coverage is desired, we would issue a separate policy.
- A pre-filled application that includes the information you have already provided.
- Endorsement TRIADN NY Policyholder Disclosure Notice of Terrorism Insurance Coverage for your review.
- A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

The carrier will send you an invoice based on the terms reflected in this quote.
Payment is due to the carrier.

Payment options available to you are:

1. Send the invoice remittance slip with payment to the lockbox address on their invoice
2. Pay online at www.usli.com/ezpay.
3. Pay by phone (automated system available 24/7) at 866-632-2003

Your invoice will include a unique number that will allow you to register your policy at www.usli.com/ezpay. By registering your policy, you will have access to additional information as well as the option to set-up recurring payments. Recurring payments are a great way to minimize the possibility of your policy being cancelled or not renewed because payment was not received.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide



TOMPKINS INSURANCE
P.O. Box 6707
Wyomissing, PA 19610

jleigey@tompkinsfinancial.com

feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to quote this account!

Sincerely,
Jodie Leigey
TOMPKINS INSURANCE

NBP023F1109

Quote is valid until 4/11/2023

To: **Downtown Ithaca Local Development**

From: Jodie Leigey

jleigey@tompkinsfinancial.com

Please bind effective: _____

Insured email address: ssmithjablonski@downtownithacaldc.org

Insured phone number: 607-339-1971

Confirm optional coverages:

- Do not include any optional coverages.
 - Include the following optional coverages from Section VI
(Taxes & Fees may apply to optional premium if purchased)
 - Option 1 - (add: \$225.00) - Non-Owned & Hired Automobile Liability - Specialty Product
 - Option 2 - (add: \$38.00) - Power Outage Business Personal Property
 - Option 3 - (add: \$12.00) - Interruption Of Computer Operations
 - Option 4 - (add: \$100.00) - Fiduciary Liability - Non-Profit Directors & Officers
 - Option 5 - (subtract: \$100.00) - Defense Within the Limits
 - Option 6 - (add: *\$4.00) - Terrorism Coverage
- *See Terrorism Section for Exact Pricing and Terms

This policy is eligible to be Direct Billed.
Note: a \$5.00 installment fee will apply to each installment after the first - please select one of the following:

- Direct Bill both this New Business and future Renewals**
(If checked - Select a Payment Plan):
 - SINGLE PAYMENT
 - TWO PAYMENTS - Premium must be over \$400
 - THREE PAYMENTS - Premium must be over \$675
 - FOUR PAYMENTS - Premium must be over \$1,000

See the last page of this quote for Payment Plan Descriptions

- Do not Direct Bill this New Business but do Direct Bill future Renewals
- Do not Direct Bill this policy

NOTE: If the Direct Bill Option is selected, the Company will invoice the insured. Do not bill or collect the down payment. All taxes, surcharges and fees (except installment fees) will be billed in full with the first installment.

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

BUSINESSOWNERS POLICY INFORMATION

Carrier:	Mount Vernon Fire Insurance Company
Status:	Admitted
A.M. Best Rating:	A++ (Superior) - XII

COVERAGE PART	PREMIUM
Businessowners	\$468.00

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

Directors & Officers Liability/Employment Practices Liability Coverage	\$704.00
PLEASE REFER TO THE EXCESS LIABILITY QUOTE #CUP023F2547 IF HIGHER LIMITS OF LIABILITY ARE DESIRED.	
TOTAL PREMIUM DUE TO CARRIER	\$1,172.00
ADDITIONAL COSTS	
Broker Fee	\$0.00
New York NY Fire Fee (1.250%) (Fire only)	\$1.54
TOTAL AMOUNT DUE	\$1,173.54

This account is subject to the following - Sections A, B and C:

A. Prior To Bind Requirements:

Responses to the Prior to Bind questions below are not needed if the completed and signed application is submitted at the time of binding.

"x" indicates Prior to Bind requirement for Coverage Part

Liab = Liability; Prop = Property; Liq = Liquor; Cr = Crime; IM = Inland Marine;
 Prof = Directors and Officers and/or Employment Practices Liability as quoted

Prof	Eligibility Question (applies to all locations)	Response
x	Is the fully completed Specialty Non Profit Package Application, SNPP, included with the bind request? *Application must be dated no more than 45 days prior of the effective date of coverage and signed by one of the following: officer, member of the board of directors, managing member or executive director with authority to bind Applicant to the representations therein	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

B. Items Required Within 21 days of the inception of coverage:

- No Items Required Within 21 Days

C. Underwriting Notes:

- Risk may be eligible for a reduction in premium if the applicant has been in business for more than 3 years at the current location.
- Equipment Breakdown Coverage is required if Electronic Data Coverage is purchased.
- This quote does not contemplate special events. We must be notified if the applicant will host, sponsor or organize any special events so we can properly add the exposure to the quote.
- If Fiduciary is desired, complete the fiduciary questions on the application.
- DO-207 NY may be deleted upon confirmation that General Liability Insurance is in place.

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

II. COVERED LOCATION(S) AND CORRESPONDING CLASSIFICATIONS

Location #1 - 37 Middaugh Rd, Brooktondale, NY 14817

Construction: Frame / Protection Class: 9

Property Coverage

Perils: Special

Coverage	Limit	Deductible	Valuation	Rate	Premium
Business Personal Property	\$5,000	\$500	Replacement Cost		Included
Business Income and Extra Expense	\$32,500	N/A	Not Applicable		Included
Equipment Breakdown	Included	\$500		73.000	\$73
Electronic Data	\$25,000	\$500	Replacement Cost	0.050	\$12

Property Coverage Premium for Location #1: \$123 MP

Coverages automatically provided by Businessowners coverage form

Business Personal Property - automatic increase	25% during peak season	Business Personal Property at newly acquired locations	\$100,000
Business Personal Property not at premises	\$10,000	Outdoor Property (including trees, shrubs, and plants)	\$500 per tree/shrub/plant - \$2,500 total limit
Exterior Building Glass	Up to Business Personal Property	Signs attached to the Building	\$1,000
Increased Cost of Construction	\$10,000 - Only when Building coverage with Replacement Cost is provided	Valuable Papers & Records	\$10,000 (\$5,000 not at premises)
Accounts Receivable	\$10,000 (\$5,000 not at premises)	Personal Effects	\$2,500
Forgery and Alteration	\$2,500	Money Orders and Counterfeit Paper Currency	\$1,000
Fire Department Service Charge	\$1,000		

Coverage provided by Equipment Breakdown

Mechanical Breakdown,Electrical Arcing
 Loss or damage to hot water boilers & steam equipment
 Steam explosion of boilers, piping, engines & turbines
 \$250,000 limit for Perishable Goods Spoilage
 \$250,000 limit for Refrigeration Contamination

Warranted Property Conditions

- All electric is on functioning and operational circuit breakers [P-6]
- Functioning and operational smoke/heat detectors in all units or occupancies [P-5]

Liability Coverage

Description	Fire Code	Class Code	Basis	Exposure	Prod/CompOps Rate	All Other Rate	Prod/CompOps Premium	All Other Premium
Chamber of Commerce - Not-For-Profit only	0702	41668	Total Area	500	0.000	425.745	\$0	\$213
				Per 1,000 Total Area				
Blanket Additional Insured - Non-Profit Package		49950	Flat	1	0.000	100.000	\$0	\$100
			Flat					

Liability Coverage Premium for Location #1: \$345 MP

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

Directors & Officers Liability/Employment Practices Liability Coverage

Description	Retention (each claim)	Premium
Directors and Officers Liability	\$1,000	\$704

Directors & Officers Liability/Employment Practices Liability Coverage Premium for All Locations: \$704

Total for Location: \$1,172

III. LIABILITY LIMITS OF INSURANCE

BUSINESSOWNERS GENERAL LIABILITY

Liability and Medical Expense	\$1,000,000
Medical Expense (Any One Person)	\$5,000
Damage To Premises Rented to You	\$100,000
General Aggregate	\$2,000,000
General Liability Deductible	\$0

DIRECTORS & OFFICERS LIABILITY

Claims Made Limit	\$1,000,000
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IV. REQUIRED FORMS & ENDORSEMENTS

Directors and Officers Endorsements

DO-100 NY	(03/15) Coverage Part A. Non Profit Directors And Officers Liability	DO-NY DN	(06/12) New York Disclosure Notice
DO-207 NY	(09/11) Failure to Maintain Insurance Exclusion	SNPP	(04/08) Specialty Non Profit Package Application
DO-211	(05/13) Insurance Consultation, Placement And Administration Exclusion Endorsement	USL DOJ NY	(10/12) Non-Profit Professional Liability Policy Common Policy Conditions
DO-283 NY	(01/14) Data & Security+ Endorsement		

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

Common Endorsements

BP0003	(01/10) Businessowners Coverage Form	BP-167	(11/11) Computer Systems Coverage
BP0417	(01/10) Employment-Related Practices Exclusion	BP-168	(11/11) Exclusion - Injury To Performers Or Entertainers
BP0524	(01/15) Exclusion Of Certified Acts Of Terrorism	BP-179 NBP	(12/17) Amendment of Liquor Liability Exclusion
BP0604	(03/08) New York - Exclusion Of Loss Due To Virus Or Bacteria	BP-201	(09/16) Coverage Extension - Education Services
BP-107	(04/08) Actual Cash Value Definition	BP-40	(03/11) Molestation Or Abuse Exclusion
BP-108 NY	(06/08) Absolute Pollution Exclusion - Property And Liability	BP-47	(11/10) Equipment Breakdown Enhancement Endorsement
BP-11	(05/04) Exclusion - Fiduciary Liability and Financial Services	BP-514	(02/22) Cyber Incident Exclusion - New York
BP-110 NY	(06/08) Absolute Lead Exclusion	BP-58 NY	(07/12) Animal Exclusion
BP-111 NY	(06/08) Lead Contamination Exclusion	BP-59	(02/13) Exclusion - Athletic Activity Or Sport Participants
BP-112 NY	(10/11) Absolute Silica Exclusion	BP-60	(05/07) Exclusion For Bleacher Collapse
BP-113 NY	(06/08) Absolute Asbestos Exclusion	BP-65	(05/07) Exclusion For Mechanical Rides
BP-114 NY	(04/08) Asbestos Material Exclusion	BP-88	(04/06) Expanded Definition of Bodily Injury
BP-115	(07/08) Protective Devices Or Services Provisions	BP-90 NY	(05/09) Who Is An Insured Clarification Endorsement
BP-133 NY	(08/20) New York Changes	BP-95	(05/07) Exclusion For Climbing, Rebounding And Interactive Games And Devices
BP-145 NPP	(06/10) Blanket Additional Insured Endorsement	BP-96	(05/07) Exclusion For Firearms, Fireworks And Other Pyrotechnic Devices
BP-15	(07/04) Business Income and Extra Expense Limit	BP-97	(05/07) Exclusion For Event Vendor/Exhibitor & Contractor
BP1505	(05/14) Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data -Related Liability - Limited Bodily Injury Exception Not Included	Jacket NY MTV	(12/19) Policy Jacket - Mount Vernon
BP-152	(01/13) Separation of Insureds Clarification Endorsement	TRIADN NY	(12/20) Policyholder Disclosure Notice of Terrorism Insurance Coverage
BP-165	(05/18) Exclusion - Specific Activities, Events or Conditions or Over 2,500 People		

V. OFFER OF OPTIONAL COVERAGE(S)

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote.

	Coverage	Additional Premium
Option 1	Non-Owned & Hired Automobile Liability - Specialty Product	\$225.00
	Coverage	Additional Premium
Option 2	Power Outage Business Personal Property	\$38.00

Important Information

- If this coverage is purchased, add CP 149A Business Personal Property Utility Services Coverage - Power Outage
- Power Outage Business Personal Property Limit is \$5,000

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

	Coverage	Additional Premium
Option 3	Interruption Of Computer Operations	\$12.00

Important Information

- Applicant must purchase Equipment Breakdown coverage and Business Income coverage if Interruption of Computer Operations coverage is desired.
- If this coverage is purchased, Add BP 167 Computer Systems Coverage
- Interruption of Computer Operations Limit is \$25,000. Higher limits are available subject to a maximum of \$300,000 combined limit for Electronic Data and Interruption of Computer Operations coverages.

	Coverage	Additional Premium
Option 4	Fiduciary Liability - Non-Profit Directors & Officers	\$100.00

Important Information

- If purchased, the DO-256 NY Fiduciary Liability Coverage will be added which coincides with the D&O Limits up to \$1 million with defense inside that limit.

	Coverage	Subtract Premium
Option 5	Defense Within the Limits	\$100.00

Important Information

- If Defense Within the Limits is selected, DO-281 Defense Within the Limits endorsement will be added.
- Moves defense costs to within the limits of liability for a discounted price.

	Coverage	Additional Premium
Option 6	Terrorism Coverage	\$4.00

Important Information

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for an additional premium of 0.90% of the total applicable premium. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE - Notice of Terrorism Exclusion. When making your decision to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount, and limits in this policy applicable to losses arising from events other than acts of terrorism.
- The Terrorism premium shown above has been calculated as a percentage of the quoted coverages. If any coverages are added or removed at binding, the additional premium shown above is subject to change.

VI. DIRECT BILL PAYMENT PLAN DESCRIPTIONS**One Year Payment Plan Descriptions:**

SINGLE PAYMENT - The entire premium is invoiced immediately and is due 20 days after it is invoiced.

TWO PAYMENTS - 50% of the premium is invoiced immediately and is due 20 days after it is invoiced; the balance is invoiced 150 days after inception.

THREE PAYMENTS - 40% of the premium is invoiced immediately and is due 20 days after it is invoiced; 30% is invoiced 120 days after inception; the balance is invoiced 210 days after inception.

FOUR PAYMENTS - 40% of the premium is invoiced immediately and is due 20 days after it is invoiced; three equal installments of 20% are invoiced at 120 days, 180 days and 240 days after inception.

An installment fee as noted on page 1 of this quote applies to each installment after the first.

Enclosed you will find an annual **admitted** Commercial Umbrella Coverage for Downtown Ithaca Local Development. The quote number is CUP023F2547.

- Section I-** Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.
- Section II-** Schedule of Underlying Coverages
- Section III-** Lists the required coverage forms, notices, endorsements and exclusions.
- Section IV-** Offers optional coverages that are available to the applicant but are not currently included in the quote.
- Section V-** Provides the Direct Bill Payment Description.

In addition we have included some materials that will assist in the evaluation of this offer of coverage.

- A pre-filled application that includes the information you have already provided.
- Endorsement TRIADN NY Policyholder Disclosure Notice of Terrorism Insurance Coverage for your review.
- A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

The carrier will send you an invoice based on the terms reflected in this quote.
Payment is due to the carrier.

Payment options available to you are:

1. Send the invoice remittance slip with payment to the lockbox address on their invoice
2. Pay online at www.usli.com/ezpay.
3. Pay by phone (automated system available 24/7) at 866-632-2003

Your invoice will include a unique number that will allow you to register your policy at www.usli.com/ezpay. By registering your policy, you will have access to additional information as well as the option to set-up recurring payments. Recurring payments are a great way to minimize the possibility of your policy being cancelled or not renewed because payment was not received.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to quote this account!

Sincerely,
Jodie Leigey
TOMPKINS INSURANCE

CUP023F2547

Quote is valid until 4/11/2023

To: **Downtown Ithaca Local Development**

From: Jodie Leigey

jleigey@tompkinsfinancial.com

Please bind effective: _____

Insured email address: ssmithjablonski@downtownithacaldc.org

Insured phone number: 607-339-1971

Confirm optional coverages:

- Do not include any optional coverages.
- Include the following optional coverages from Section IV
(Taxes & Fees may apply to optional premium if purchased)
 - Option 1 - Terrorism Coverage

This policy is eligible to be Direct Billed.
Note: a \$5.00 installment fee will apply to each installment after the first - please select one of the following:

- Direct Bill both this New Business and future Renewals**
(If checked - Select a Payment Plan):
 - SINGLE PAYMENT
 - TWO PAYMENTS - Premium must be over \$400
 - THREE PAYMENTS - Premium must be over \$675
 - FOUR PAYMENTS - Premium must be over \$1,000

See the last page of this quote for Payment Plan Descriptions

- Do not Direct Bill this New Business but do Direct Bill future Renewals
- Do not Direct Bill this policy

NOTE: If the Direct Bill Option is selected, the Company will invoice the insured. Do not bill or collect the down payment. All taxes, surcharges and fees (except installment fees) will be billed in full with the first installment.

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

COMMERCIAL UMBRELLA COVERAGE POLICY INFORMATION

Carrier:	United States Liability Insurance Company
Status:	Admitted
A.M. Best Rating:	A++ (Superior) - XII
Term Quoted:	Annual

LIMIT OPTIONS	PREMIUM	FEES	AMOUNT DUE
<input type="checkbox"/> \$1,000,000	\$355 (MP)	\$0.00	\$355.00

ADDITIONAL COSTS

Broker Fee	\$0
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FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSURED – VISIT BIZRESOURCECENTER.COM FOR DETAILS

We have provided a pre-filled application that would assist in satisfying these requirements.

Please contact us with any questions regarding the terminology used or the coverages provided.

****Read the quote carefully, it may not match the coverages requested****

This account is subject to the following - Sections A, B and C:

Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements.

Underwriter receipt, review and acceptance of the fully completed application. We may modify the terms and/or premiums quoted or rescind this quote if the information provided in the completed application is different from the original submission or there is a significant change in the risk from the date it was quoted.

A. Prior To Bind Requirements:

- No Prior To Bind Requirements

B. Items Required Within 21 days of the inception of coverage:

- No 21 Day Subject to Notes

C. Underwriting Notes:

- Please be advised, we have prepared this quote of higher limits of liability based on the information provided for a primary quote. It is valid only over the United States Liability Insurance Group quote provided, however we can consider adjusting it to be valid over other carriers. In addition, we can possibly include other lines of coverage in the underlying such as Automobile Liability and Employer's Liability.
- Please contact me if you wish to discuss further.

II. SCHEDULE OF UNDERLYING COVERAGES

Commercial General Liability	Limits of Liability	
Carrier: Mount Vernon Fire Insurance Company	Each Occurrence:	\$1,000,000
AM Best Rating: A++g	Products/Completed Operations Aggregate:	\$2,000,000
	General Aggregate:	\$2,000,000
	Personal & Advertising Injury:	\$1,000,000

Automobile Liability	Limits of Liability	
Carrier: Mount Vernon Fire Insurance Company	Combined Single Limit:	\$1,000,000
AM Best Rating: A++g		

Employers Liability	Not Covered	

Professional Liability	Not Covered	

Non Profit Liability	Limits of Liability	
Carrier: Mount Vernon Fire Insurance Company	Directors and Officers:	\$1,000,000
AM Best Rating: A++g	Employment Practices:	\$1,000,000

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

III. REQUIRED FORMS & ENDORSEMENTS

CUP	(07/05) Commercial Umbrella Policy	IUL117	(09/10) Nuclear Energy Liability Exclusion (Broad Form)
CUP114	(02/07) Coverage A - Excess Following Form Professional Liability Coverage Endorsement	Jacket NY	(12/19) Policy Jacket
CUP115	(01/07) Coverage A - Excess Following Form Professional Liability Coverage Endorsement	L-472	(07/08) Exclusion - Injury To Performers Or Entertainers
CUP502	(03/06) Absolute Exclusion For Liquor Liability And Liability Arising Out Of Liquor Related Services	L-536	(09/09) Exclusion - Participation In Athletic Activity, Physical Activity Or Sports
CUP542	(12/20) Exclusion of War and Certified Acts of Terrorism	L-622	(07/08) Abuse Or Molestation Exclusion
CUP549	(09/16) Exclusion - Unmanned Aircraft	TRIADN NY	(12/20) Policyholder Disclosure Notice of Terrorism Insurance Coverage
IUL NY	(06/10) New York Changes	UL370	(04/04) Exclusion - Liability As A Result Of Owned Autos
IUL100	(07/06) Expected or Intended Injury Exclusion		

IV. OFFER OF OPTIONAL COVERAGE(S)

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote.

	Coverage	Rate
Option 1	Terrorism Coverage	See notes for rate information

Important Information

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for 0.9000% of the total applicable premium for this risk. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE – Notice of Terrorism Exclusion. When making your decision whether to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount and limits in this policy applicable to losses arising from events other than acts of terrorism.
- Coverage available under this offer is contingent on the underlying policies providing terrorism coverage and at the same limit as the Schedule of Underlying Coverages

V. DIRECT BILL PAYMENT PLAN DESCRIPTIONS**One Year Payment Plan Descriptions:**

SINGLE PAYMENT - The entire premium is invoiced immediately and is due 20 days after it is invoiced.

TWO PAYMENTS - 50% of the premium is invoiced immediately and is due 20 days after it is invoiced; the balance is invoiced 150 days after inception.

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Read the quote carefully, it may not match the coverages requested

Specialty Non Profit Package Application

Package Policy designed for office based Non Profit organizations (including, but not limited to Chamber of Commerce, Trade Associations, Business Associations and Charitable Organizations).

Please complete all sections of this application and have signed by the applicant.

GENERAL INFORMATION

Name Of Organization: Downtown Ithaca Local Development

Mailing Address: 37 Middaugh Rd

City: Brooktondale State: NY Zip Code: 14817

Location Address: 37 Middaugh Rd Same as mailing address

City: Brooktondale State: NY Zip Code: 14817

Website Address: _____ Email Address: _____

APPLICANT ELIGIBILITY

Are there past, pending or planned foreclosures and/or bankruptcies or judgments for unpaid taxes against the named insured or any officer, partner, member or owner, individually within the last five years? Yes No

Has Insurance coverage been cancelled or non-renewed in the past three years? (not applicable in MO) Yes No

Does the organization have tax exempt status by the I.R.S.? Yes No

Is organization involved with any of the following services: Current or future construction or renovation projects, land acquisition, adoption/foster care, legal, medical/dental, financial, publishing, medical journal publication, real estate listings, research and development, or involved in activism? Yes No

Does the organization perform any operations located outside the U.S., or organize any international travel or international activities? Yes No

Are direct social service programs including but not limited to thrift store operations, counseling and referral services, residential shelters, day/overnight camps, or healthcare provided? Yes No

LOCATIONS OF COVERAGES AND CORRESPONDING CLASSIFICATIONS

Location #1

Address	City	State	Zip
37 Middaugh Rd	Brooktondale	NY	14817

Construction: Frame Protection Class: 9 No. of Stories: _____ Total Square Footage: 500

Year Built: 1972 Years at this location: _____ Roof Age: 10

Roof Type: Flat Shingle Wood Shake Metal Tile Slate Other _____

Plumbing: PVC Copper Lead Iron Galvanized Other _____

Updates: Plumbing: _____ Electrical: _____ Heating: _____

Protective Devices:	<input type="checkbox"/> Functional & operational smoke detectors		
	<input type="checkbox"/> Burglar Alarm	<input type="checkbox"/> Central Station	<input type="checkbox"/> Local
	<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> Central Station	<input type="checkbox"/> Local
	<input type="checkbox"/> Sprinkler System _____ % of the building		
Cause of Loss:	<input checked="" type="checkbox"/> Special Form	<input type="checkbox"/> Broad Form	<input type="checkbox"/> Basic Form
Exclusions:	<input type="checkbox"/> Wind & Hail	<input type="checkbox"/> Water Damage	<input type="checkbox"/> Theft <input type="checkbox"/> Sprinkler Leakage
Deductible:	<input checked="" type="checkbox"/> \$500	<input type="checkbox"/> \$1,000	<input type="checkbox"/> \$2,500 <input type="checkbox"/> \$5,000 <input type="checkbox"/> Other _____

Coverage	Limit	Additional Information
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Business Personal Property	\$5,000	Co-Insurance: <input checked="" type="checkbox"/> 80% <input type="checkbox"/> 90% <input type="checkbox"/> 100% Valuation: <input checked="" type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value
Business Income and Extra Expense	\$32,500	Co-Insurance: <input type="checkbox"/> 80% <input type="checkbox"/> 90% <input checked="" type="checkbox"/> 100% Valuation: <input type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value
Equipment Breakdown	Included in Building and Personal Property	Co-Insurance: <input type="checkbox"/> 80% <input type="checkbox"/> 90% <input type="checkbox"/> 100% Valuation: <input type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value
Electronic Data	\$25,000	Co-Insurance: <input checked="" type="checkbox"/> 80% <input type="checkbox"/> 90% <input type="checkbox"/> 100% Valuation: <input checked="" type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value

UNDERWRITING INFORMATION FOR LOCATION #1

Classification	Premium Basis	Exposure	Applicable Sq. Ft.
Chamber of Commerce - Not-For-Profit only	Total Area	500	N/A
Blanket Additional Insured - Non-Profit Package	Flat	1	

PROPERTY ELIGIBILITY

- Do all public areas, occupancies and/or habitational units have functioning and operational smoke and/or heat detectors? Yes No
- Are there functioning and operational fire extinguishers readily available? Yes No
- For any building built prior to 1978, is 100 percent of the wiring on functioning and operational circuit breakers? Yes No

GENERAL LIABILITY ELIGIBILITY

- Do all public areas, occupancies and/or habitational units have functioning and operational smoke and/or heat detectors? Yes No
- For any building built prior to 1978, is 100 percent of the wiring on functioning and operational circuit breakers? Yes No

LOSS HISTORY

Property

Please provide detail below

Year	Status	Incurred	Description
2022-2023			None
2021-2022			None
2020-2021			None

Liability

Please provide detail below

Year	Status	Incurred	Description
2022-2023			None
2021-2022			None
2020-2021			None



Non Profit Professional Liability Application - All States

APPLICANT MAY QUALIFY FOR AN INSTANT QUOTE BY COMPLETING SECTION I. BELOW. SECTION II ANSWERS WILL BE REQUIRED PRIOR TO BINDING AND ARE SUBJECT TO UNDERWRITING APPROVAL.

This is an application for a claims made policy - Please read your policy carefully. Application for Non Profit Directors & Officers Liability Insurance (Coverage Part A) and Employment Practices Liability Insurance (Optional Coverage Part B) and Fiduciary Liability Insurance (Optional)

New York Disclosure Notice: Under DO 290 NY, DO 281 NY and DO 282 NY, if made part of your policy, the limits of liability available under this policy may be completely exhausted by the payment of defense costs. Defense costs shall be applied against the retention.

I. INSTANT QUOTE INFORMATION

Instant Quote is not available for accounts with losses in the past 5 years. If there is a loss history, please complete Section I. and submit details in a claim supplement

Applicant's Name: Downtown Ithaca Local Development

Location Address: 37 Middaugh Rd Same as mailing address or complete section III.

City: Brooktondale State: NY Zip: 14817

Web Address: _____ Email Address of primary contact: _____

Description of Operations:

help to facilitate companies needs for conference center usage

Total Annual Revenue: \$65,000 (If > \$2 million attach the most recent 12-month financial statement)

If less than 3 years in operation, annual revenue: this year \$65,000 next year: \$65,000 third year: \$65,000

Total Fund Balance (Total Assets minus Total Liabilities): _____

Full Time Employees: 1 Part Time: 0 Temporary/Seasonal: 0 Volunteers: 0

Does the organization perform any operations located outside the U.S.? No In Existence Since: 2008

II. UNDERWRITING INFORMATION

1. Does the organization have an anti-harassment and anti-discrimination policy? Yes No
 2. Does the organization have tax exempt status by the I.R.S.? Yes No
 3. Does the organization have General Liability Insurance? Yes No
 4. Expiring Information: Carrier _____ Limits _____ Retention _____ Premium _____
- (Attach a statement of details for all "yes" answers to the following questions)**
5. Is any entity proposed for Insurance involved in any of the following:
 - a) Research, development or testing? Yes No
 - b) Certification, accreditation or standard-setting? Yes No
 - c) Disciplinary actions as a result of peer review activities? Yes No
 - d) Administration or sponsorship of any insurance programs? Yes No
 - e) Labor/union negotiations or collective bargaining? Yes No

6. Does the applicant have any chapters or subsidiaries requiring coverage? Yes No
7. Has any entity proposed for insurance closed, downsized, laid off, reduced staff, sold, merged with or acquired any company in the past 12 months or anticipates doing so in the next 12 months? Yes No
8. Has the Applicant or any person proposed for coverage (whether or not in the service of Applicant) been the subject of or been involved directly or indirectly in any civil, criminal, regulatory, legislative or administrative proceeding(s)? Yes No
- 9 a. Within the last 5 years, has any inquiry, complaint, notice of hearing, claim or suit been made against any entity proposed for Insurance, or any person proposed for Insurance in the capacity of Director, Officer, Trustee, Employee or Volunteer of any entity proposed for Insurance? Yes No
- 9 b. Is any person(s) proposed for this insurance aware of any fact, circumstance or situation which may result in claim against any entity proposed for Insurance or any of its Directors, Officers, Trustees, Employees or Volunteers? Yes No
10. Has any Policy for Directors and Officers or Employment Practices Liability ever been cancelled or non-renewed? Yes No
(Do not answer if applicant is located in Missouri)

III. FIDUCIARY (Available for 100 employees or less)

(All questions must be answered in order for Fiduciary Liability coverage to be bound.)

1. Does each Pension Plan use an outside Investment Manager? Yes No
2. Does each Plan subject to ERISA comply with all applicable requirements of ERISA and the Internal Revenue Code of 1982, as amended (the "Code") including: eligibility, participation, vesting, fiduciary responsibility and funding standards? Yes No
3. In the past 2 years has there been or is there now under consideration any material changes to a Plan or termination/consolidation of a Plan? Yes No
4. Has there been or is there now pending any claim(s) against any proposed Insured arising out of any Plan? Yes No
5. Does any proposed Insured have knowledge or information of any act, error or omission which might give rise to a claim under the proposed Fiduciary Liability Coverage? Yes No

IV. ADDITIONAL APPLICANT INFORMATION

Applicant's Mailing Address: 37 Middaugh Rd

City: Brooktondale

State: NY

Zip: 14817

New York Disclosure Notice: This policy is written on a claims made basis and shall provide no coverage for claims arising out of incidents, occurrences or alleged Wrongful Acts or Wrongful Employment Acts that took place prior to retroactive date, if any, stated on the declarations. This policy shall cover only those claims made against an insured while the policy remains in effect for incidents reported during the Policy Period or any subsequent renewal of this Policy or any extended reporting period and all coverage under the policy ceases upon termination of the policy except for the automatic extended reporting period coverage unless the insured purchases additional extend reporting period coverage. The policy includes an automatic 60 day extended claims reporting period following the termination of this policy. The Insured may purchase for an additional premium an additional extended reporting period of 12 months, 24 months or 36 months following the termination of this policy. Potential coverage gaps may arise upon the expiration for this extended reporting period. During the first several years of a claims made relationship, claims-made rates are comparatively lower than occurrence rates. The insured can expect substantial annual premium increases independent overall rate increases until the claims-made relationship has matured.

New York Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Retail Agency Name: TOMPKINS INSURANCE

License #: _____

Main Agency Phone Number: _____

Agency Mailing Address: _____

City: _____

State: _____

Zip: _____

The signer of this application acknowledges and understands that the information provided in this Application is material to the Insurer's decision to provide the requested insurance and is relied on by the Insurer in providing such insurance. The signer of this application represents that the information provided in this Application is true and correct in all matters. The signer of this Application further represents that any changes in matters inquired about in this Application occurring prior to the effective date of coverage, which render the information provided herein untrue, incorrect or inaccurate in any way will be reported to the Insurer immediately in writing. The Insurer reserves the right to modify or withdraw any quote or binder issued if such changes are material to the insurability or premium charged, based on the Insurer's underwriting guides. The Insurer is hereby authorized, but not required, to make any investigation and inquiry in connection with the information, statements and disclosures provided in this Application. The decision of the Insurer not to make or to limit any investigation or inquiry shall not be deemed a waiver of any rights by the Insurer and shall not estop the Insurer from relying on any statement in this Application in the event the Policy is issued. It is agreed that this Application shall be the basis of the contract should a policy be issued and it will be attached and become a part of the Policy.

Applicant's Signature: _____

Title: _____

Date: _____

President, Chairperson or Executive Director

**DOWNTOWN ITHACA LOCAL DEVELOPMENT CORPORATION
EXECUTIVE DIRECTOR – OVERVIEW OF RESPONSIBILITIES FOR 2023**

GOVERNANCE	
Board	<ul style="list-style-type: none"> • Manage transition to In-person meetings • Develop agendas with president/board and keep minutes • Support board members in meeting their goals and responsibilities • Prepare/revise officer and director job descriptions • Create board handbook • Recruitment, onboarding and orientation for new members • Work with secretary on fulfillment of recording duties • Serve as staff lead for the executive committee • Serve as staff lead for the nominating committee
Policies/Governance	<ul style="list-style-type: none"> • Shepherd the process to develop or revise policies: <ul style="list-style-type: none"> ○ Bylaws ○ Sexual harassment prevention policy ○ Sexual harassment prevention training attestation ○ Conflict of interest policy attestation ○ Procurement policy ○ Document retention policy ○ Whistleblower policy ○ Financial procedures policy/manual • Ensure Open Meetings Law and NYS nonprofit law compliance • Serve as point-of-contact for legal firm
FINANCIAL	
Banking	<ul style="list-style-type: none"> • Enroll new officer(s) as authorized signer(s) • Establish accounts for short-term and long-term needs • Guide process for obtaining bridge financing • Set up credit card • Set up LDC insurance
Grants/Sponsorship/Fundraising	<ul style="list-style-type: none"> • Key partner in HUD grant fulfillment and steer stewardship efforts for Sen. Schumer • Key partner in ESD grant fulfillment • Manage LDC sponsorship solicitation process, including finalizing sponsorship/naming opportunities, prospect list development, solicitation strategy, collateral materials • Engage in fundraising for art
Financial Management	<ul style="list-style-type: none"> • Oversee annual audit and 990 filing • Set up chart of accounts • Establish reserve and operating funds on balance sheet • Accounts payable oversight/room tax vouchers • Set up ACH payments as warranted • Monitor and implement bond requirements • Work with treasurer in fulfillment of annual duties • Implement and oversee account reconciliations and other components of financial policies manual • Serve as staff lead for the finance committee

**DOWNTOWN ITHACA LOCAL DEVELOPMENT CORPORATION
EXECUTIVE DIRECTOR – OVERVIEW OF RESPONSIBILITIES FOR 2023**

	<ul style="list-style-type: none"> • Serve as primary contact for accountant, bookkeeper and DIA administration
Budgeting	<ul style="list-style-type: none"> • Transition to being LDC lead for budget management and development: <ul style="list-style-type: none"> ○ 2023 budget revisions ○ 2024 budget ○ Future budget projections
FUNDING PARTNERS	
Funding Partners <i>Fiscal Oversight Committee</i> <i>City of Ithaca</i> <i>Tompkins County</i> <i>Hotel Group</i> <i>Chamber Foundation</i> <i>Downtown Ithaca Alliance</i>	<ul style="list-style-type: none"> • Monitor and ensure compliance with multiparty agreement • Responsible for reporting to FO committee as stipulated • Serve as convener for FO Committee (tent.) • Monitor, attend and present as needed at Planning & Economic Development Committee and Common Council meetings • Monitor, attend and present as needed at Housing & Economic Development Committee and County Legislature meetings • Attend STPB monthly meetings/serve on board • Report/present at Chamber Foundation and DIA board meetings as appropriate • Facilitate presentations by others at meetings
CAPITAL	
Construction/Capital Project	<ul style="list-style-type: none"> • Work with Project Manager to participate in and bring forward discussions and actions related to outstanding capital project items: <ul style="list-style-type: none"> ○ Signage ○ FFE ○ Retail ○ Kitchen ○ Interiors • Steer the artwork project • Serve on building committee
Building Owner/Vecino	<ul style="list-style-type: none"> • Track and advance discussions related to IDCC
OPERATIONS & MARKETING	
Center Operations/ASM	<ul style="list-style-type: none"> • Serve as main point of contact with Craig Liston • Responsible for ensuring ASM and LDC carry out preopening responsibilities and tasks • Facilitate LDC discussion and decisions in areas such as hiring and marketing • Oversee process of obtaining office space for ASM staff • Monitor and review preopening budget • Monitor and review operating proforma
Marketing	<ul style="list-style-type: none"> • Serve as LDC liaison/partner to CVB • Serve as LDC liaison/partner to Imagine Ithaca • Serve as staff lead for the marketing workgroup, to include budget management • Role in grand opening, ribbon-cutting/BAH events, etc. (TBD)

**DOWNTOWN ITHACA LOCAL DEVELOPMENT CORPORATION
EXECUTIVE DIRECTOR – OVERVIEW OF RESPONSIBILITIES FOR 2023**

EXTERNAL RELATIONS	
Community Relations	<ul style="list-style-type: none"> • Develop and implement 2023-24 calendar to include: <ul style="list-style-type: none"> ○ Presentations to community groups ○ Neighbor relations ○ Stakeholder/VIP one-on-ones (some coupled with sponsorship) and small groups/hard-hat tours
Communications/PR	<ul style="list-style-type: none"> • Oversee creation of LDC website • Develop, with team input, presentation materials/talking points (FAQ, Facts at a Glance/Infographic, presentation templates)
ADMINISTRATION	
HR	<ul style="list-style-type: none"> • Undertake preparations for a move to full-time Executive Director status, to include job description review and review of employment/administration arrangement • Recruit and supervise an intern
Administration	<ul style="list-style-type: none"> • Ensure sound records management/FOIL compliance • Manage Google Workspace • Manage online accounts • Procure and manage LDC supplies, equipment, technology and software
BIG ROCKS/EXTERNAL	
Big Rocks/External	<ul style="list-style-type: none"> • Responsible for tracking and helping advance “big rocks” discussions and projects, such as: <ul style="list-style-type: none"> ○ Traffic Wayfinding ○ Workforce Development ○ Flood Maps/Insurance ○ Streetscaping (light poles, banners, holiday lighting) ○ Destination reputation/onsite & neighborhood ○ “Managing Community Expectations”