



## WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY POLICY

### INFORMATION PAGE

NCCI CO CODE #: 57095

**INSURED:**

Marquette Movers, LLC  
DBA: Marquette Movers  
355 Alger St  
Marquette, MI 49855

NEW

POLICY NUMBER: WCP00013965

**AGENT:**

VAST  
300 S Front Street  
Marquette, MI 49855  
(906) 228-7500

1. Insured Type: Limited Liability Corporation

Federal Employer I.D.

84-4635120

Risk I.D. #

6779727A

Other work places and identification numbers are shown on the Extension of Information pages.

2. The Policy Period is from 09/15/2025 to 09/15/2026 12:01 A.M. at the named insured's mailing address.

3. A. Worker's Compensation Insurance: Part One of the policy applies to the Workers' Compensation Law of the states listed here:

MICHIGAN

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

Bodily Injury by Accident:	\$2,000,000 Each Accident
Bodily Injury by Disease:	\$2,000,000 Policy Limit
Bodily Injury by Disease:	\$2,000,000 Each Employee

C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here:

D. This policy includes these endorsements and schedules:

#### SEE LISTING OF ENDORSEMENTS - EXTENSION OF INFORMATION PAGE

4. The premium for this policy will be determined by our Manual of Rules, Classifications, Rates and Rating Plans. All information required below is subject to verification and change by audit. The Premium adjustment period is annual.

#### SEE EXTENSION OF INFORMATION PAGE

Minimum Premium:	\$500	Total Estimated Annual Premium	\$10,397
Issued Date:	08/13/2025	Deposit Premium	\$10,397

603 South Washington  
Avenue  
Lansing, MI 48933

Phone: 517.372.5656  
Toll-free: 800.366.3699  
Fax: 517.372.1303

retailersinsurance.com  
24/7 Claims Reporting:  
866.764.7705

## EXTENSION OF INFORMATION PAGE

Named Insured: Marquette Movers, LLC

Policy Number: WCP00013965

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### Item 4: Schedule of Operations

Code	Classification	Premium Basis Total Estimated Annual Remuneration	Rate Per \$100 of Remuneration	Estimated Annual Premium
8293	Furniture Moving Storage	234,250	11.00	25,768
8810	Clerical Office Employees NOC	89,174	0.26	232

Premium Subject to Modification	\$ 26,000
9898 Experience Modification	0.86
9887 Scheduled Credit	-0.25
9880 Safe Workplace Credit	-0.25
0064 Premium Discount - Non Stock	-0.100
9138 Paid-In-Full Discount	-0.10
0900 Expense Constant	\$ 210
0001 Cyber Liability Policy (\$100,000 aggregate) Sub-Limits: Cyber Event (\$25,000) Cyber Deception (\$10,000) Ransom Payment (\$10,000)	\$0 \$0 \$0 \$0
<b>Total Estimated Premium</b>	<b>\$10,397</b>



## EXTENSION OF INFORMATION PAGE

Named Insured: Marquette Movers, LLC

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### Item 1: Locations

Location Number	Location Name	Address	Federal Tax ID
001	Marquette Movers, LLC DBA: Marquette Movers	355 Alger St Marquette MI 49855	84-4635120

**EXTENSION OF INFORMATION PAGE**

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**Item 3 D: Endorsement Schedule**

We agree that the following listed endorsements form a part of this policy on its effective date.

WC 00 00 00 C	Policy
WC 00 00 01 A	Information Pages
WC 00 04 03	Experience Rating Modification Factor Endorsement
WC 00 04 06 B	Premium Discount Endorsement
WC 21 03 03 A	Michigan Notice to Policyholder Endorsement
WC 21 03 04	Michigan Law Endorsement
WC 21 04 02 C	Terrorism Risk Insurance Program Reauthorization Act Endorsement
WC 99 03 01 C	Cyber Liability Program Protection Endorsement
WC 99 06 01	Workers' Compensation Participating Endorsement Dividends
WC 99 06 02	NSF Fee Endorsement