

3. A. Workers Compensation Insurance: Part one of the policy applies to the Workers Compensation Law of the states listed here: LA

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

Bodily Injury by Accident	\$500,000	each accident
Bodily Injury by Disease	\$500,000	policy limit
Bodily Injury by Disease	\$500,000	each employee

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

ALL STATES EXCEPT NORTH DAKOTA, OHIO, WASHINGTON, WYOMING, U.S.TERRITORIES AND STATES DESIGNATED IN ITEM 3.A. OF THE INFORMATION PAGE.

D. This policy includes these endorsements and schedule:

SEE ENDORSEMENT-WC 99 03 68

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

Classifications Code Number and Description	Premium Basis Total Estimated Annual Remuneration	Rates Per \$100 of Remuneration	Estimated Annual Premium
Total Standard Premium			\$363
Expense Constant			\$175
Terrorism Risk Insurance Program Reauthorization Act Disclosure Endorsement			\$5
Catastrophe (Other Than Certified Acts Of Terrorism)			\$8
Estimated Annual Premium (before Surcharges)			\$551

*See the attached Schedule(s) of Operations for Location and State Level Premium Information

Total Estimated Annual Premium:	\$551
Deposit Premium:	
Policy Minimum Premium:	\$315 LA (Includes Increased Limit Min. Prem.)

Interstate/Intrastate Identification Number: Refer to Schedule of Operations

Labor Contractors Policy Number:

NAICS: 621399
SIC: 8049



EXTENSION OF THE INFORMATION PAGE - ITEM 3.D - ENDORSEMENTS

000083 6/29 2 04

Policy Number: 76 WEG AY2W3N

Endorsement Number:

Effective Date: 06/01/23

Effective hour is the same as stated on the Information Page of the policy.

Named Insured and Address:

Core Louisiana Counseling & Recovery Center LLC
306 W JUDGE PEREZ DR
CHALMETTE LA 70043

Item 3.D. of the Information Page is completed to include the following endorsements:

- G-4119-0 POLICYHOLDER NOTICE-PAYROLL BILLING
- WC000000C WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY
- WC000001A.1 INFORMATION PAGE
- WC000001A.2 INFORMATION PAGE
- WC000403 EXPERIENCE RATING MODIFICATION FACTOR ENDORSEMENT
- WC000414A 90-DAY REPORTING REQUIREMENT- NOTIFICATION OF CHANGE IN OWNERSHIP ENDORSEMENT
- WC000419A PART FIVE - PREMIUM AMENDATORY ENDORSEMENT
- WC000421F CATASTROPHE (OTHER THAN CERTIFIED ACTS OF TERRORISM) PREMIUM ENDORSEMENT
- WC000422C TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT DISCLOSURE ENDORSEMENT
- WC170303 LOUISIANA DUTY TO DEFEND ENDORSEMENT
- WC170601J LOUISIANA AMENDATORY ENDORSEMENT
- WC170602A LOUISIANA COST CONTAINMENT ACT ENDORSEMENT
- WC990001K Signature/Copyright
- WC990002 WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY BUSINESS INSURANCE POLICY
- WC990005 SCHEDULE OF OPERATIONS
- WC990302B WORKERS COMPENSATION BROAD FORM ENDORSEMENT
- WC990358B AMENDMENT TO WORKERS COMPENSATION BROAD FORM ENDORSEMENT - EMPLOYERS LIABILITY STOP GAP COVERAGE

EXTENSION OF THE INFORMATION PAGE - ITEM 3.D - ENDORSEMENTS

Policy Number: 76 WEG AY2W3N

Endorsement Number:

Effective Date: 06/01/23

Effective hour is the same as stated on the Information Page of the policy.

Named Insured and Address: Core Louisiana Counseling & Recovery Center LLC

306 W JUDGE PEREZ DR
CHALMETTE LA 70043

Item 3.D. of the Information Page is completed to include the following endorsements:

WC990368

EXTENSION OF THE INFORMATION PAGE - ITEM 3.D. - ENDORSEMENTS

WC990689

GOODS AND SERVICES ENDORSEMENT





SCHEDULE OF OPERATIONS

This Schedule of Operations forms a part of the policy effective on the inception date of the policy unless another date is indicated below:

INSURER: PROPERTY AND CASUALTY INSURANCE COMPANY OF HARTFORD

Company Code: P

Policy Number: 76 WEG AY2W3N

Schedule Number: 01-17-01

Effective Date: 06/01/23 Effective hour is the same as stated on the Information Page of the policy.

Named Insured and Location Address of operations covered by this schedule:

Core Louisiana Counseling & Recovery Center LLC
306 W JUDGE PEREZ DR
CHALMETTE LA 70043

FEIN: 84-3929829

NAICS: 621399

SIC: 8049

NO. OF EMPL: 5

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

Classifications Code Number and Description	Premium Basis Total Estimated Annual Remuneration	Rates Per \$100 of Remuneration	Estimated Annual Premium
8832 PHYSICIAN & CLERICAL	75,000.00	0.350000	263
Total State Summary			
Total Class Premium			263
Emp liab increased limits		0.011000	3
Employer Liability Increase Limits balance to Minimum Premium			97
Total Estimated Annual Standard Premium			363
Expense constant			175
Terrorism Risk Insurance Program Reauthorization Act Disclosure Endorsement	75,000.00	0.006000	5
Catastrophe (other than certified acts of terrorism)	75,000.00	0.010000	8
Total Estimated Annual Premium			551

Countersigned by _____

Authorized Representative

Form WC 99 00 05

(1) Printed in U.S.A.

Process Date: 06/09/23

Policy Expiration Date: 06/01/24