



# Loss and Premium History

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Loss Valuation Date:07/27/2024

## Account Summary

Strategic Opportunities - P&C

**Insured:** SANDLIN ELECTRICAL LLC  
724 OLD CORDESVILLE RD  
MONCKS CORNER, SC -29461

**Agency:** AP INTEGO INSURANCE GROUP, LLC  
375 WOODCLIFF DR  
FAIRPORT, NY 144504276

**Code:** 6202127

Line Of Business	Prefix	Policy Number	Policy Term	Written Premium	Earned Premium	Number of Claims	Net Paid Losses	Current Reserves	Paid + Reserves	Allocated Expenses	Total	Loss Ratio (%) *	L/R incl. Exp (%)
Commercial Package	BKS	59587664	10/20/2023 - 10/20/2024	\$10,563	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
			10/20/2022 - 10/20/2023	\$9,980	N/A	1	\$0	\$0	\$0	\$505	\$505	N/A	N/A
			10/20/2021 - 10/20/2022	\$7,344	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
ALL YEARS				\$27,887	N/A	1	\$0	\$0	\$0	\$505	\$505	N/A	N/A
General Liability	BLS	59587664	03/01/2021 - 03/01/2022	\$5,222	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
			03/01/2020 - 03/01/2021	\$7,017	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
			03/01/2019 - 03/01/2020	\$3,667	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
ALL YEARS				\$15,906	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
Supported Lead Liability	USO	59587664	10/20/2023 - 10/20/2024	\$4,091	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
			01/10/2023 - 10/10/2023	\$1,726	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
			06/15/2021 - 03/15/2022	\$307	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
ALL YEARS				\$6,124	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
BKS TOTAL				\$27,887	N/A	1	\$0	\$0	\$0	\$505	\$505	N/A	N/A
BLS TOTAL				\$15,906	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
USO TOTAL				\$6,124	N/A	0	\$0	\$0	\$0	\$0	\$0	N/A	N/A
GRAND TOTAL				\$49,917	N/A	1	\$0	\$0	\$0	\$505	\$505	N/A	N/A

This report is intended for informational purposes only, is subject to changes, and shall not be construed as an admission of liability. Reserve information is revealed only as a recognition of a potential exposure and does not necessarily represent the value of a claim or a decision that the claim should or will be paid.

\* Premium Notes: The premium on this report may not represent the total charges related to the policy. Taxes and surcharges are not included in premium when calculating loss ratio. Additionally, premiums are updated on a monthly basis and may not reflect recent premium changes nor premium fully earned as of the Valuation Date.

NOTE: If a policy was previously written with Safeco Insurance, the policy's complete loss history will not be available on this report. To obtain the claims history while a policy was written with Safeco, you must access the Loss Runs tool on [www.safeconow.com](http://www.safeconow.com).



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Loss Valuation Date:07/27/2024				Account Detail			Strategic Opportunities - P&C				
Insured: SANDLIN ELECTRICAL LLC 724 OLD CORDESVILLE RD MONCKS CORNER, SC -29461				Agency: AP INTEGRO INSURANCE GROUP, LLC 375 WOODCLIFF DR FAIRPORT, NY 144504276					Code: 6202127		

Claim Number	Loss Date	Date Received	Location/ Bldg/Veh Number	Actual Paid Losses	Recovery Amount	Net Paid Losses	Current Reserves	Paid + Reserves	Allocated Expenses	Total	Claim Status
Claimant Name or Coverage Type			Risk State	Description of Loss							

Policy Number: BKS 59587664				Policy Term: 10/20/2023 - 10/20/2024							
TOTAL				\$0	\$0	\$0	\$0	\$0	\$0	\$0	

Policy Number: BKS 59587664				Policy Term: 10/20/2022 - 10/20/2023							
24148387	10/21/2022	09/06/2023	0	\$0	\$0	\$0	\$0	\$0	\$505	\$505	C
PREMISES			S	LAWSUIT/CASE #: 2023-CP-08-02081 PER INSD, MELISSA SANDLIN, RECEIVED A LETTER FROM A SUBCONTRACTOR INSD WORKS FOR, LOW COUNTRY PRE							
TOTAL				\$0	\$0	\$0	\$0	\$0	\$505	\$505	

Policy Number: BKS 59587664				Policy Term: 10/20/2021 - 10/20/2022							
TOTAL				\$0	\$0	\$0	\$0	\$0	\$0	\$0	

Policy Number: BLS 59587664				Policy Term: 03/01/2021 - 03/01/2022							
TOTAL				\$0	\$0	\$0	\$0	\$0	\$0	\$0	

Policy Number: BLS 59587664				Policy Term: 03/01/2020 - 03/01/2021							
TOTAL				\$0	\$0	\$0	\$0	\$0	\$0	\$0	

Policy Number: BLS 59587664				Policy Term: 03/01/2019 - 03/01/2020							
TOTAL				\$0	\$0	\$0	\$0	\$0	\$0	\$0	

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Claim Number	Loss Date	Date Received	Location/ Bldg/Veh Number	Actual Paid Losses	Recovery Amount	Net Paid Losses	Current Reserves	Paid + Reserves	Allocated Expenses	Total	Claim Status
Claimant Name or Coverage Type			Risk State	Description of Loss							

Policy Number:	USO 59587664	Policy Term:	10/20/2023 - 10/20/2024
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TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
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Policy Number:	USO 59587664	Policy Term:	01/10/2023 - 10/10/2023
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TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
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Policy Number:	USO 59587664	Policy Term:	06/15/2021 - 03/15/2022
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TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
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GRAND TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	\$505	\$505	
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