

April 17, 1986

SUBJECT: INSURANCE

WITHDRAWN

CIRCULAR LETTER NO. 3 (1986)

TO ALL AUTHORIZED PROPERTY AND CASUALTY INSURERS UNDERWRITING MEMBERS OF THE NEW YORK INSURANCE EXCHANGE., INC. (NYIE), PRODUCER ASSOCIATIONS AND EXCESS LINE BROKERS

RE: AVAILABILITY SURVEY FOR CERTAIN LIABILITY INSURANCE COVERAGES

The Insurance Department has established a Liability Insurance Hotline to assist New York State businesses and non-profit organizations in obtaining liability insurance coverages. To date, we have received over 1200 requests for assistance. During the four month period in which the Hotline has operated, we have noted that liability insurance for certain types of risks appears to be unavailable at any price.

On April 8, 1986, members of my staff and I met with a broad representation from your industry, and we were informed that markets do exist for many of these risks. Before establishing voluntary market assistance programs or mandatory residual market mechanisms for these risks, we wish to determine those insurers, if any, that are furnishing or will furnish markets for particular types of scarce coverages, so that we may refer requests for assistance to these existing markets.

Accordingly, the Department is conducting this survey to ascertain the existence of markets for these risks: An adequate response by the insurance industry will minimize the need for MAPS or involuntary residuals market mechanisms. Therefore, it is essential that you complete the annexed survey and return it to the Department no later than May 2, 1986. Please direct your reply and any questions to Richard Lynde (212-602-0338), Associate Insurance Examiner, Property and Casualty Bureau.

Very truly yours,

[SIGNATURE]

JAMES P. CORCORAN

Superintendent of Insurance

NEW YORK STATE INSURANCE DEPARTMENT LIABILITY INSURANCE SURVEY

Please check the appropriate box to indicate whether or not your company will write liability insurance for each particular type of risk, provided of course, that it meets your underwriting criteria. If you will write a particular type of risk, provide the name and telephone number of a contact person that the Insurance Department may provide for inquiries about placement of coverage.

TYPE OF RISK	YES	NO	CONTACT
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TYPE OF RISK	YES	NO	CONTACT
Recreation Liability-Carnivals, Fairs and Amusement Parks required by Article 27 of the New York Labor Law to obtain liability insurance.			

Large Amusements Parks	<input type="checkbox"/>	<input type="checkbox"/>	
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Small Amusement Parks	<input type="checkbox"/>	<input type="checkbox"/>	
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Traveling Amusement Shows	<input type="checkbox"/>	<input type="checkbox"/>	
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Small Local Fairs	<input type="checkbox"/>	<input type="checkbox"/>	
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Carnivals	<input type="checkbox"/>	<input type="checkbox"/>	
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State or County Fairs	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
Other Recreational Liability			

Ice Skating Rinks/and or Clubs	<input type="checkbox"/>	<input type="checkbox"/>	
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Ski Tour Operators	<input type="checkbox"/>	<input type="checkbox"/>	
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Horseback Riding Establishments	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
Winter Recreation Facilities	<input type="checkbox"/>	<input type="checkbox"/>	
Go Kart Facilities	<input type="checkbox"/>	<input type="checkbox"/>	
Snowmobile Rentals	<input type="checkbox"/>	<input type="checkbox"/>	
Bowling Alleys	<input type="checkbox"/>	<input type="checkbox"/>	
Indoor Pool Swim Clubs	<input type="checkbox"/>	<input type="checkbox"/>	
Private Recreational Clubs	<input type="checkbox"/>	<input type="checkbox"/>	
Summer Camp & Recreational Facilities	<input type="checkbox"/>	<input type="checkbox"/>	
TYPE OF RISK	YES	NO	CONTACT
Art Show Exhibitors	<input type="checkbox"/>	<input type="checkbox"/>	
Roller Skating Facilities	<input type="checkbox"/>	<input type="checkbox"/>	
Special Events	<input type="checkbox"/>	<input type="checkbox"/>	
Health Clubs	<input type="checkbox"/>	<input type="checkbox"/>	
Racquet Ball Facilities	<input type="checkbox"/>	<input type="checkbox"/>	

TYPE OF RISK	YES	NO	CONTACT
Private Beaches	<input type="checkbox"/>	<input type="checkbox"/>	
Baseball & Softball Clubs	<input type="checkbox"/>	<input type="checkbox"/>	
Fireworks Display	<input type="checkbox"/>	<input type="checkbox"/>	
Contact Sports Club	<input type="checkbox"/>	<input type="checkbox"/>	
Gymnasium Schools	<input type="checkbox"/>	<input type="checkbox"/>	
Youth Centers	<input type="checkbox"/>	<input type="checkbox"/>	

TYPE OF RISK	YES	NO	CONTACT
Private Airplanes	<input type="checkbox"/>	<input type="checkbox"/>	
Boat Rentals	<input type="checkbox"/>	<input type="checkbox"/>	
Boat Launch Facilities	<input type="checkbox"/>	<input type="checkbox"/>	
Boat Marina Facilities	<input type="checkbox"/>	<input type="checkbox"/>	
Museum Establishments	<input type="checkbox"/>	<input type="checkbox"/>	
Tennis Instructor	<input type="checkbox"/>	<input type="checkbox"/>	

TYPE OF RISK	YES	NO	CONTACT
Road Race Club	<input type="checkbox"/>	<input type="checkbox"/>	
Judo & Karate Instruction	<input type="checkbox"/>	<input type="checkbox"/>	
Pleasure Boating	<input type="checkbox"/>	<input type="checkbox"/>	
Theater Club	<input type="checkbox"/>	<input type="checkbox"/>	
Recreational Guide Service	<input type="checkbox"/>	<input type="checkbox"/>	

TYPE OF RISK	YES	NO	CONTACT
Singles Club	<input type="checkbox"/>	<input type="checkbox"/>	
Beach Club	<input type="checkbox"/>	<input type="checkbox"/>	
Police Athletic League	<input type="checkbox"/>	<input type="checkbox"/>	
Knights of Columbus or other fraternal organizations	<input type="checkbox"/>	<input type="checkbox"/>	
Special Exhibit Floater	<input type="checkbox"/>	<input type="checkbox"/>	
Vacation Resorts	<input type="checkbox"/>	<input type="checkbox"/>	

LIQUOR LAW LIABILITY - taverns and

TYPE OF RISK	YES	NO	CONTACT
restaurants for which liquor accounts for more than 50% of total sales. CGL coverage is not requested.	<input type="checkbox"/>	<input type="checkbox"/>	

PRODUCT LIABILITY

Medical Products - Sales	<input type="checkbox"/>	<input type="checkbox"/>	
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Cosmestic Manufacturers	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
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Tanning Salons	<input type="checkbox"/>	<input type="checkbox"/>	
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New Products (Cosmetics)	<input type="checkbox"/>	<input type="checkbox"/>	
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Cosmetics Sales	<input type="checkbox"/>	<input type="checkbox"/>	
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Food Processing (New Business)	<input type="checkbox"/>	<input type="checkbox"/>	
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Asbestos Removal	<input type="checkbox"/>	<input type="checkbox"/>	
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Removal of other Pollutants (i.e., Dioxin, PCBs)	<input type="checkbox"/>	<input type="checkbox"/>	
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Auto Dealers	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
Boiler & Machinery Repair	<input type="checkbox"/>	<input type="checkbox"/>	

COMPLETED OPERATIONS

Auto Body Repair Work	<input type="checkbox"/>	<input type="checkbox"/>	
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City Contractual. Work	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
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Tree Spraying	<input type="checkbox"/>	<input type="checkbox"/>	
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Duct Work Installation	<input type="checkbox"/>	<input type="checkbox"/>	
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Bridge Painting	<input type="checkbox"/>	<input type="checkbox"/>	
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Masonry Work	<input type="checkbox"/>	<input type="checkbox"/>	
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Dock Repair	<input type="checkbox"/>	<input type="checkbox"/>	
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Cardboard Manufacturer	<input type="checkbox"/>	<input type="checkbox"/>	
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Scaffolding Sales	<input type="checkbox"/>	<input type="checkbox"/>	
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Knife Manufacturing & Sales	<input type="checkbox"/>	<input type="checkbox"/>	
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MISC. PRODUCT LIABILITY

TYPE OF RISK	YES	NO	CONTACT
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Detergent Manufacturer	<input type="checkbox"/>	<input type="checkbox"/>	
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Furrier	<input type="checkbox"/>	<input type="checkbox"/>	
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Chemical Packaging Firm	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
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Fire Gauge Manufacturer	<input type="checkbox"/>	<input type="checkbox"/>	
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Pen Maker	<input type="checkbox"/>	<input type="checkbox"/>	
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Fire Equipment Manufacturer	<input type="checkbox"/>	<input type="checkbox"/>	
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Toilet Renting Company	<input type="checkbox"/>	<input type="checkbox"/>	
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Platform Lift Rentals	<input type="checkbox"/>	<input type="checkbox"/>	
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Close Out Sales Vendor	<input type="checkbox"/>	<input type="checkbox"/>	
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Riding Equipment Sales	<input type="checkbox"/>	<input type="checkbox"/>	
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Clothing Distributor	<input type="checkbox"/>	<input type="checkbox"/>	
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Importer of Clothes	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
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Fuel Oil Distributor	<input type="checkbox"/>	<input type="checkbox"/>	
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Boat Hauling	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
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Golf Cart Leasing	<input type="checkbox"/>	<input type="checkbox"/>	
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**SMALL CONTRACTORS AND OTHER SMALL BUSINESSES
(1-5 EMPLOYEES)**

Electrical Contractors	<input type="checkbox"/>	<input type="checkbox"/>	
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Elevator and Boiler Repair	<input type="checkbox"/>	<input type="checkbox"/>	
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Home Improvement Contractors	<input type="checkbox"/>	<input type="checkbox"/>	
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Tree Spraying	<input type="checkbox"/>	<input type="checkbox"/>	
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Landscaping	<input type="checkbox"/>	<input type="checkbox"/>	
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Cleaning Services	<input type="checkbox"/>	<input type="checkbox"/>	
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Home Inspection Companies	<input type="checkbox"/>	<input type="checkbox"/>	
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Laundromats	<input type="checkbox"/>	<input type="checkbox"/>	
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Small Retail Shop-Owners	<input type="checkbox"/>	<input type="checkbox"/>	
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Roofing Contractors	<input type="checkbox"/>	<input type="checkbox"/>	
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INSURER NAME

TYPE OF RISK	YES	NO	CONTACT
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Air Conditioning Contractors	<input type="checkbox"/>	<input type="checkbox"/>	
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TYPE OF RISK	YES	NO	CONTACT
PROFESSIONAL LIABILITY - DIRECTORS AND OFFICERS			
Directors and Officers Liability			
(Profit)	<input type="checkbox"/>	<input type="checkbox"/>	
(Non-Profit)	<input type="checkbox"/>	<input type="checkbox"/>	
Lawyers Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	
Law Enforcement Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	
Social Worker Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	
Pharmacist Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	
Architects and Engineers Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	
Insurance Producers Errors and Omissions	<input type="checkbox"/>	<input type="checkbox"/>	
Public Official Errors and Omissions	<input type="checkbox"/>	<input type="checkbox"/>	
INSURER NAME			
TYPE OF RISK	YES	NO	CONTACT
Real Estate Errors and Omissions	<input type="checkbox"/>	<input type="checkbox"/>	
Nursing Homes Medical Malpractice	<input type="checkbox"/>	<input type="checkbox"/>	
Private Nursing Service Medical Malpractice	<input type="checkbox"/>	<input type="checkbox"/>	
Medical Students Medical Malpractice	<input type="checkbox"/>	<input type="checkbox"/>	
MISCELLANEOUS LIABILITY RISKS			
Municipal Liability Excess Coverage (\$ 4 million in excess of \$ 1 million)	<input type="checkbox"/>	<input type="checkbox"/>	
Other Excess Liability (\$ 4 million in excess of	<input type="checkbox"/>	<input type="checkbox"/>	

TYPE OF RISK	YES	NO	CONTACT
\$ 1 million)			
Security Firms (i.e. Pinkerton Guard)	<input type="checkbox"/>	<input type="checkbox"/>	
Small Storage Warehouses	<input type="checkbox"/>	<input type="checkbox"/>	
Vacant Commercial Buildings	<input type="checkbox"/>	<input type="checkbox"/>	

INSURER NAME

TYPE OF RISK	YES	NO	CONTACT
Vacant Dwellings	<input type="checkbox"/>	<input type="checkbox"/>	
Block Associations	<input type="checkbox"/>	<input type="checkbox"/>	
Community Centers	<input type="checkbox"/>	<input type="checkbox"/>	
Senior Citizen Centers	<input type="checkbox"/>	<input type="checkbox"/>	
Child Care			
(Profit)	<input type="checkbox"/>	<input type="checkbox"/>	
(Non-Profit)	<input type="checkbox"/>	<input type="checkbox"/>	

COMPLETED BY:

INSURER

NAME

TITLE

TELEPHONE

RETURN TO:

RICHARD LYNDE, ASSOCIATE EXAMINER PROPERTY AND CASUALTY BUREAU NEW YORK STATE
INSURANCE DEPARTMENT 160 WEST BROADWAY NEW YORK, NEW YORK 10013