

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS WORKERS' COMPENSATION AGENCY MARK C. LONG DIRECTOR

SHELLY EDGERTON DIRECTOR

Mr. Edward Dembek Boyne USA, Inc. 3951 Charlevoix Ave. Petoskey, MI 49770

WORKERS' DISABILITY COMPENSATION INDIVIDUAL SELF-INSURED AUTHORITY

Pursuant to the authority granted under Section 418.611(1)(a), your application for self-insured authority has been approved. Combinable entities (if any) self-insured under this program are referenced by attachment. This authority is effective September 01, 2017.

This approval expires August 31, 2018. You must file a renewal application 30 days prior to the renewal date. Upon filing the renewal application, the authority shall be extended until approved for an additional 12 months or until denied by the Agency, pursuant to Administrative Rule 408,43c.

Your carrier I.D. number is 70087534. Your service company I.D. number is A86. Please use these numbers on all correspondence with the Agency.

The Agency requires and has received confirmation of the excess liability insurance with limits and retentions as outlined below:

Specific Excess Liability Insurance Policy # AGC4056502 Policy Limit: Statutory Specific Retention: \$450,000

Term: 12 Month(s)

Aggregate Excess Liability Insurance

Policy # AGC4056502 Policy Limit: \$5,000,000

Estimated Retention: \$1,307,114

Term: 12 Month(s)

Security:

Letter of Credit

\$100,000

Dated and entered at Lansing, Michigan on September 28, 2017.

Mark C. Long, Director

cc. Funds Administration

COMBINABLE ENTITIES ATTACHMENT SELF-INSURED AUTHORITY CERTIFICATION

September 28, 2017

Primary Self-Insured: Boyne USA, Inc. Fed ID: 38-1301850

Approval Effective Date: September 01, 2017

Federal ID **Approved Self-Insured Combinable Entities**

1 38-3185018 Bay Harbor Golf Club, Inc.

2 38-3504390 **BV/BCS LLC**