

PUBLIC NOTICE

Notice is hereby given that the Tooele City Council and the Redevelopment Agency (RDA) of Tooele City will meet in a Work Meeting, on Wednesday, November 20, 2024, at 6:30 p.m. The meeting will be held in the Tooele City Hall Council Chambers, located at 90 North Main Street, Tooele, Utah. The complete public notice is posted on the Utah Public Notice Website www.utah.gov, the Tooele City Website www.tooelecity.gov, and at Tooele City Hall. To request a copy of the public notice or for additional inquiries please contact Michelle Pitt, City Recorder at (435)843-2111 or michellep@tooelecity.gov.

We encourage you to join the City Council meeting electronically by visiting the **Tooele City YouTube Channel**, at https://www.youtube.com/@tooelecity or by going to YouTube.com and searching "Tooele City Channel".

AGENDA

- 1. Open City Council Meeting
- 2. Roll Call
- 3. Mayor's Report
- 4. Council Members' Report
- 5. **Discussion Items**
 - a. 2025 Workers Compensation Insurance Update

Presented by Kami Perkins, HR Director

- 6. Closed Meeting
 - ~ Litigation, Property Acquisition, and/or Personnel
- 7. Adjourn

Michelle Y. Pitt, Tooele City Recorder

Pursuant to the Americans with Disabilities Act, individuals needing special accommodations should notify Michelle Y. Pitt, Tooele City Recorder, at 435-843-2111 or Michellep@Tooelecity.gov, prior to the meeting.



Proposal of Insurance

TOOELE CITY CORPORATION

90 N Main St Tooele, UT 84074

Workers Compensation

Effective Date of Coverage: 01/01/2025 to 01/01/2026

Sean England Sales Executive

Chad Hawkins, MSML Account Manager

Moreton & Company

101 South 200 East, Suite 300 | Salt Lake City, UT 84111 (801) 531-1234 | Fax (801) 531-6117 | moreton.com
Insurance | Employee Benefits | Surety
CA License No. 0522220





Tooele, UT 84074

PRODUCER: Moreton & Company P O Box 58139 SALT LAKE CITY, UT 84158-0139

Guaranteed INSURANCE PROPOSAL Proposal No: 1639001-1970254

INSURED: TOOELE CITY CORPORATION INSURED IS: Corporation

90 N Main St EFFECTIVE DATE: 01/01/2025 to 01/01/2026 at 12:01am

WCF Mutual Insurance Company is pleased to provide you with this proposal.

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.

Classifications	Code No.	Premium Basis Total Estimated Annual Remuneration	Rates Per \$100 of Remuneration	<u>Net Rate</u>	Estimated <u>Annual Premium</u>
STATE: Utah 01/01/2025 to 01/01/2026 at 12:01 STREET OR ROAD MAINTENANCE, CONSTRUCTION OR RECONSTRUCTION BY STATE, C OUNTY OR MUNICIPALITY-ALL EMPLOYEES & DRIVERS	5509	626,464	1.86	0.88	\$11,652
FIREFIGHTERS & DRIVERS	7710	383,523	2.97	1.40	\$11,39 1
FIREFIGHTERS & DRIVERS - VOLUNTEER	7711	42,000	3.04	1.43	\$1,277
CLERICAL OFFICE EMPLOYEES NOC	8810	2,434,426	0.09	0.04	\$2,191
COUNTY EMPLOYEES	9416	0	1.42	0.67	\$0
MUNICIPAL EMPLOYEES	9417	11,267,289	1.65	0.78	\$185,910
. TOTAL MANUAL	. PREMIUM				\$212,421
EMPLOYERS LIABILITY 1000/1000/1000	9812	212,421	1,10%		\$214,758
EXPERIENCE MODIFICATION	9898	214,758	0.62		\$133,150
SCHEDULE RATING	9887	133,150	-18.00%		\$109.183
TOTAL STANDARD	PREMIUM				\$109,183
PREMIUM SIZE DISCOUNT	0063	109,183	-10.54%		\$97,675
EXPENSE CONSTANT	0900	97.675	\$200.00		\$97,875
TERRORISM	9740	14,753,702	0.005		\$98.613
CATASTROPHE-OTHER THAN CERTIFIED ACTS OF TERRORISM	9741	14,753,702	0.01		\$100,088
ESTIMATED ANNUAL	PREMIUM				\$100,088
We a		Italia nainaionnes a naina	100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		\$400.000

Total Due For: Utah 01/01/2025 to 01/01/2026 at 12:01 AM \$100,088

WCF Insurance Comparison Worksheet prepared by: Chad Hawkins, Account Manager Policyholder: TOOELE CITY CORPORATION

2024 Policy Expiring (Estimated)

Description	Codes	Payroll	Rate	Estimated Premium
STREET OR ROAD MAINTENANCE	5509	\$584,944	\$1.86	\$10,880
FIREFIGHTERS & DRIVERS	7710	\$248,410	\$2,97	\$7,378
FIREFIGHTERS & DRIVERS- VOL	7711	\$42,000	\$3.04	\$1,277
CLERICAL OFFICE	8810	\$2,234,470	\$0.09	
MUNICIPAL EMPLOYEES	9417	\$9,970,851	\$1.65	\$164,519
Manual Premium	M Parties (Sec. 2), As a second Carlos As Agentia (2), 2	\$13,080,675		\$186,065
Employers Liability		1000/1000/1000	1.011	\$188,111
Experience Mod .			0.84	
Premium Deviations		18%	0.82	\$129,571
Association Credit			1.00	\$129,571
Premium Size Discount (%)		10.87%	0.89	\$115,487
Expense Constant			\$200	\$115,687
Walver of Subrogation			\$0	\$115,687
Terrorism		0.0005%	\$654.03	\$116,341
Catastrophe		0.01%	\$1,308.07	\$117,649
TOTAL PREMIUM	e regional section	SNOOTHINGS SIN	34 N 20 M 20 M 20 M	\$117,849

2025 Policy Renewal					
Description	- 17 - 17 (7 7 4 1 4	Codes	Payroll	Rate	Estimated Premium
STREET OR ROAD MAINTENAN	CE	5509	\$626,464	\$1.86	\$11,652
FIREFIGHTERS & DRIVERS		7710	\$383,523	\$2.97	\$11,391
FIREFIGHTERS & DRIVERS- VO	L	7711	\$42,000	\$3.04	
CLERICAL OFFICE		8810	\$2,434,426	\$0.09	\$2,191
MUNICIPAL EMPLOYEES		9417	\$11,267,289	\$1.65	
Manual Premium	推進		\$14,753,702	Same with the second	\$212,421
Employers Liability			1000/1000/1000	1.011	\$214,758
Experience Mod				0.62	\$133,150
Premium Deviations			18%	0.82	\$109,183
Association Credit				1.00	\$109,183
Premium Size Discount (%)			10.54%	0.89	\$97,675
Expense Constant				\$200	\$97,875
Waiver of Subrogation				\$0	
Terrorism			0.0005%	\$737.69	\$98,613
Catastrophe			0.01%	\$1,475.37	\$100,088
TOTAL PREMIUM		See March 1981 And the Control of the		1.72 (1.74.7	\$100,088
Policy Comparison	14 S	Expiring Prem	Renewal Prem	Difference -	Premium Difference
		\$117,649	\$100,088		-15%
Rate Comparison		Expiring Payroll	Renewal Payroll	Difference	Payroll Difference
Class Codes 2021 2022 20	23	\$13,080,675	\$14,753,702	\$1,673,027	13%
5509 \$2.09 \$1.74 \$1.	56			Net	-28%
7710 \$2.94 \$2.54 \$2.				Div	ridend History
7711 \$3.01 \$2.60 \$2.	19			2023	\$ 11,332
8810 \$0.11 \$0.08 \$0.	80			2022	\$ 12,167
9417 \$1.65 \$1.36 \$1.	27			2021	\$ 12,058
	_			2020	
•				2019	\$ 12,061
				Total	\$ 52,998

WORKERS COMPENSATION EXPERIENCE RATING



Risk Name: TOOELE CITY CORP

Risk ID: 430120301

Rating Effective Date: 01/01/2025

Production Date: 08/15/2024

State: UTAH

43-UTAH

Firm ID:

Firm Name: TOOELE CITY CORP

Carrier: 19933

Policy No. 1639001

Eff Date:

01/01/2021

Exp Date: 01/01/2022

Code	ELR	D- Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
5509	.41	.34	398,817	1,635	556	202111628	05	F	6,744	6,744
7710	.64	.34	96,864	620	211	NO. 7	06	*	1,786	1,786
7711	.64	.34	37,000	237	81	202115148	06	F	2,134	2,134
8810	.02		1,842,782	369	162	202116758	06	F	2,504	2,504
9417	.48	.44	7,484,722	35,927	15,808	202115050	06	F	-3,082	3,082
9812	EMPLC	YERS	LIABILIT	0	0	202124834	06	F	11,955	11,955
Policy	Total:			Subject Premium:	139,338	Total Act Inc Losses:		o I an de colono y a fi ch	28,205	

43-UTAH

Firm ID:

Firm Name: TOOELE CITY CORP

Carrier: 19933

Policy No. 1639001

Eff Date:

01/01/2022

Exp Date: 01/01/2023

	** **					3 77 D 17 EGEL			- HO 1120	
Code	ELR	∴D∋ Ratio	Payroll / / -	Expected Losses	Exp Prim 4	Claim Data	JJ	OF	Act Inc.	Act Prim Losses
5509	.41	.34	458,010	1,878	639	202224248	06	F	2,024	2,024
7710	.64	.34	129,897	831	283	202205908	06	F	2,533	2,533
7711	.64	34	37,000	237	81	NO. 6	06	*	3,131	3,131
8810	.02	.44	1,996,310	399	176					
9417	.48	.44	8,550,246	41,041	18,058	ed-basic one-base disamed-ac-				, d., j., d.,
9812	EMPLO	YERS	LIABILIT	0	0					
Policy	Total:		11,171,463	Subject Premium:	131,541	Total Act Inc Losses:		***************************************	7,688	

43-UTAH

Firm ID:

Firm Name: TOOELE CITY CORP

Carrier: 19933

Policy No. 1639001

Eff Date: 01/01/2023

Exp Date: 01/01/2024

Code	多·公司的公司的公司。	D- Ratio	Payroli	Expected Losses	Exp Prim Losses	Claim Data	Į.	OF	Act Inc Losses	Act Prim Losses
5509	.41	.34	570,376	2,339	795	NO. 10	06	*	3,407	3,407
7710	.64	.34	222,377	1,423	484	202324774	06	F	5,521	5,521
7711	.64	.34	22,174	142	48					
8810	.02	.44	2,142,378	1	188					
9417	.48	44	9,532,791	45,757	20,133		1			
9812	EMPLC	YERS	LIABILIT	0	0				AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	
Policy	Total:		12,490,096	Subject Premium:	139,148	Total Act Inc Losses:			8,928	

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X Ex-Medical Coverage



Claim Summary

Policy Number: 1639001 Policy Effective Date: 2020/01/01 State: UT

Claim Nbr	Claim Status	Sta Sta	Days Rptd	Claimant Name Inj	e of ury	Accident Description	Litigation	Total Ptd	Total Reserve	Total Recovered	Total Incurred
202001684	Closed Med	UT	1			MOTOR VEHICLE, NOC	No	2,408.25	.00	.00	2,498.25
202002801	Closed Med	UT	1	[회사 원래 - 이 기가 시 기본을 만드셨다면요.		STRUCK OR INJURED, NOC	No	501.80	.00	.00.	501.80
202004546	Closed Med	UT	10	[발생하다 보고하는 사람들은 아니다 나를 살다.		PERSON IN ACT OF CRIME	No	1,186.90	.00.	.00	1,186.90
202005422	Settled	UΤ	1			STRAIN OR INJURY BY, NOC	Yes	88,664.33	.00	.00	88,664,33
202008203	Closed Med	UΤ	20			FOREIGN BODY IN EYE	No	67.86	.00.	.00	67.86
202014164	Closed Med	UT	46			LIFTING	No	.00	.00	.00.	.00.
202015053	Closed Med	UT	3			SLIP, FALL TRIP, NOC	No	209.10	.00	.00.	209.10
202022878	Closed Med	UT	1			ON ICE OR SNOW	No	622.52	.00.	.00	622.52
202023067	Closed Med	ហ	3			PERSON IN ACT OF CRIME	No	388.95	.00.	.00.	388.95
IIT Claims for Pariod	Regioning: 2020/0	1/01				.3		94 049 71	00	00	94 049 71

UT Claims for Period Beginning: 2929/01/01

Name: TOOELE CITY CORPORATION Policy Nbr.: 1639001 Beg Date: 01/01/2019 End Date: 11/01/2024 Report Date: 11/01/2024 Info Only: N State: ALL Claim Status: Open Comp, Open Medical, Closed Comp, Closed Medical, Denied, Settled Location: NA Department: ALL



Claim Summary

Policy Number: 1639001 Policy Effective Date: 2021/01/01 State: UT

Claim Nbr	Claim Status	St	Days Rptd	Claimant Name	Date of Injuny	Accident Description	Litigation	Total Ptd	Total Reserve	Total Recovered	Total Incurred
202102616	Closed Med	UT	1		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	STRIKE AGAINST/STEP ON, NOC	No	189.42	.00	.00.	189.42
202107316	Closed Med	UT	4	[문화장에 기업하는 것, 120호		OTHER-MISCELLANEOUS, NOC	No	124.12	.00	.00	124.12
202111628	Closed Comp	UT	1			FALLING OR FLYING OBJECT	No	6,667.40	.00	.00.	8,867.40
202115200	Closed Med	UT	21	[[문화 회사회사회 환경 : 1888 다.		OBJECT BEING LIFTED OR HANDLED	No	629.98	.00.	.00.	629.98
202115148	Closed Med	UT	7			STRAIN OR INJURY BY, NOC	No	2,684.76	.00	.00.	2,684.76
202115050	Closed Med	ur	1			ABSORB/INGEST/INHALE, NOC	No	3,134,14	.00	.00.	3,134,14
202116758	Closed Med	UT	15	[기타 레고토스 - 등급하다 역기		SLIP, FALL.TRIP, NOC	No	4,842.33	.00.	.00.	4,842,33
202116269	Closed Med	UT	3			HAND TOOL UTENSIL NOT POWERED	No	240.83	.00	.00.	240,83
202122076	Closed Med	IJŦ	6			SLIP, FALL, TRIP, NOC	No	245.00	.00.	.00.	245.00
202124318	Closed Med	UT	6			RUBBED OR ABRADED, NOC	No	840,66	.00	.00	840.66
202124132	Closed Med	UT	1	[P] 전 등에 많은 게 하게 하셨다고 ##		CAUGHT INJUNDER/BETWEEN, NOC	No	334.24	.00.	.00,	334.24
202124569	Closed Med	UT	1			SLIP, FALL, TRIP, NOC	No.	.00.	.00	.00	.00
202124834	Closed Med	UT	3			OTHER-MISCELLANEOUS, NOC	No	12,159.26	00	.00	12,159,26
202125488	Closed Med	UT	7	\mathbf{R}_{1} , which is the \mathbf{R}_{1}		ANIMAL OR INSECT	No	467.38	.00.	251.26	216.12
IT Claims for Period F	leginging: 2021/0	1/61		[[[[[[[[[[[[[[[[[[[[32,759,52	60	251.26	32.508.26

Policy Nbr: 1639001 Beg Date: 01/01/2019 End Date: 11/01/2024 Report Date: 11/01/2024 Info Only: N Name: TOOELE CITY CORPORATION State: ALL Claim Status: Open Comp, Open Medical, Closed Comp, Closed Medical, Denied, Settled Location: NA Department: ALL



Claim Summary

Policy Number: 1639001 Policy Effective Date: 2022/01/01 State: UT

Claim Nbr	Claim Status	SÉ	Days Rptd		Claimant Name	Date of Injury	Accident Description	Litigation	Total Ptd	Total Reserve	Total Recovered	Total Incurred
202200345	Closed Med	UT	1	4 1			ON ICE OR SNOW	No	270,36	.00.	.00.	270.36
202201583	Closed Med	ur	7			e de la companya	OTHER-MISCELLANEOUS, NOC .	No	1,681,00	.00.	.00	1,581.00
202203687	Closed Med	UT	3				SLIP, FALL, TRIP, NOC	No	342,45	.00	.00	342.45
202205908	Closed Med	UT	10				STATIONARY OBJECT	No	3,100.06	.00.	.00	3,100.06
202206658	Closed Med	UT	5				MOTOR VEHICLE, NOC	No	365.14	.00	.00	365.14
202209819	Closed Med	UT	3				CONTACT WITH, NOC	No	.00.	.00.	.00.	.00.
202213172	Closed Med	UT	7				HAND TOOL OR MACHIN IN USE	No	435.44	.00	.00	435,44
202213370	Closed Med	UT	1				FALLING OR FLYING OBJECT	No	1,128.73	.00.	.00.	1,128.73
202213764	Closed Med	பா	1				FOREIGN BODY IN EYE	No	.00.	.00	.00	.00
202217745	Closed Med	UT	1				OTHER-MISCELLANEOUS, NOC	No	.00.	.00.	.00.	.00
202224248	Closed Med	UT	3]	왕이 그 아마를 사람이		ABSORE/INGEST/INHALE, NOC	No	2,058.94	.00		2,658,94
UT Claims for Period Be	ginning: 2022/0 [.]	1/01				al De Clary			9,382.12	.00	.00	9,382.12

Name: TOOELE CITY CORPORATION Policy Nbr.: 1639001 Beg Date: 01/01/2019 End Date: 11/01/2024 Report Date: 11/01/2024 info Only: N State: ALL Claim Status: Open Comp, Open Medical, Closed Comp, Closed Medical, Denied, Settled Location: NA Department: ALL

WCF Mutual, WCF National, and WCF Select Insurance Companies - wcf.com/about-us



Claim Summary

Policy Number: 1639001 Policy Effective Date: 2023/01/01 State: UT

Claim Nbr	Claim Status	Sť	Days Rotd	Claimant Name Date of Injury	Accident Description	Litigation	Total Ptd	Total Reserve	Total Recovered	Total Incurred
		to Vicini			pagaran kacamatan bankan b				174004460	
202300843	Closed Med	UT	2		PUSHING OR PULLING	No	490.45	.00	.00.	490.45
202304220	Clased Med	UT	7		ANIMAL OR INSECT	No	183.05	.00	166,96	16.09
202305290	Closed Med	UT	1 .		OBJECT BEING LIFTED OR HANDLED	No	351.85	.00	.00.	351.85
202305631	Closed Med	ŲΤ	5		COLLISION WITH ANOTHER VEHICLE	No	269.86	.00.	233.56	- 36.30
202305796	Closed Med	UT	2		FOREIGN BODY IN EYE	No	146,27	.00.	.00,	146.27
202308602	Closed Med	บา	8:		CUT, PUNCTURE, SCRAPE, NOC	No	743.14	.00	.00	743.14
202308773	Closed Med	UT	3		OTHER-MISCELLANEOUS, NOC	No	176.87	.00	.00	176.87
202312567	Closed Med	UT	13		OTHER-MISCELLANEOUS, NOC	No	521.90	.00	.00.	521.90
202313394	Closed Med	UT	3		STATIONARY OBJECT	No	169.49	.00.	.00	169.49
202316794	Closed Med	UT	2		STRUCK OR INJURED, NOC	No	129.64	.00.	118.52	13.12
202317144	Closed Med	UT	1		STRUCK OR INJURED, NOC	No	225.39	.00.	.00	225.39
202319850	Closed Med	UΤ	2		FOREIGN BODY IN EYE	No	201.13	.00	.00	201 <u>.13</u>
202321827	Clased Med	ŲΤ	0]] 이 경우 등 사람이 하면 하다면 되었다.	SLIP,FALL,TRIP, NOC	No	1,077.33	.00.	.00	1,077.33
202324774	Closed Med	UT	2		OTHER-MISCELLANEOUS, NOC	No	5,541.60	.00	.00.	5,541.60
IT Claims for Period B	eginning: 2023/0	1804					10,227.97	.00.	517.04	9.710.93

Policy Nbr. 1639001 Beg Date: 01/01/2019 End Date: 11/01/2024 Report Date: 11/01/2024 Info Only: N Name: TOOELE CITY CORPORATION State: ALL Claim Status: Open Comp, Open Medical, Closed Comp, Closed Medical, Denied, Settled Location: NA Department: ALL

WCF Mutual, WCF National, and WCF Select Insurance Companies - wcf.com/about-us



Claim Summary

Policy Number: 1639001 Policy Effective Date: 2024/01/01 State: UT

Claim Nor	Claim Status	St	Days Rptd	i c	laimant Nar	ner -	Date of Injury	Acc	dent Description	Litigation	Total Ptd 🛴 To	tal Reserve R	Total T ecovered T	otal incurred
202406547	Closed Med	Turl	1	Organization (Con-	Company of	e System (1997)				No	218.18	.00	.00	218.18
202408343	Denied	UT	.							No No	611.73	.00	.00	611.73
202408967	Closed Med	UT	3	k sa	Action Miller					No	398.43	.00	.00	398.43
202410283	Open Med	UΥ	0					(李孝明)		No	14,247.04	4,511.14	.00	18,758.18
202412006	Closed Med	UT	2		되었다.					No	371.13	.00	.00	371.13
202412762	Closed Med	UT	G							No	204,34	.00.	.00	204.34
UT Claims for Period E	Beginning: 2024/0	1/01									16,050.85	4,511.14	.00	20,561.99
Grand Total										19. 18	388,695,78	4,511.14	1,141.98	392,064,94

Name: TOOELE CITY CORPORATION Policy Nbr. 1639001 Beg Date: 01/01/2019 End Date: 11/01/2024 Report Date: 11/01/2024 Info Only: N State: ALL Claim Status: Open Comp, Open Medical, Closed Comp, Closed Medical, Denied, Settled Location: NA Department: ALL