

MEMORANDUM OF INSURANCE

DATE
29-Mar-2023

This Memorandum is issued as a matter of information only to authorized viewers for their internal use only and confers no rights upon any viewer of this Memorandum. This Memorandum does not amend, extend or alter the coverage described below. This Memorandum may only be copied, printed and distributed within an authorized viewer and may only be used and viewed by an authorized viewer for its internal use. Any other use, duplication or distribution of this Memorandum without the consent of Marsh is prohibited. "Authorized viewer" shall mean an entity or person which is authorized by the insured named herein to access this Memorandum via <https://marshdigital.marsh.com/marshconnect/viewMOI.action?clientId=3535928>. The information contained herein is as of the date referred to above. Marsh shall be under no obligation to update such information.

PRODUCER Marsh USA Inc. ("Marsh")	COMPANIES AFFORDING COVERAGE	
	Co. A HARTFORD FIRE INSURANCE COMPANY	
INSURED STANLEY BLACK & DECKER, INC. AND AFFILIATED COMPANIES 1000 STANLEY DRIVE, NEW BRITAIN Connecticut 06053 United States	Co. B HARTFORD UNDERWRITERS INSURANCE COMPANY	
	Co. C ACE PROPERTY & CASUALTY INSURANCE COMPANY	
	Co. D SEE BELOW FOR CARRIER INFORMATION	
	Co. E	
		Co. F

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS MEMORANDUM MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS	
					LIMITS IN USD UNLESS OTHERWISE INDICATED	
A	GENERAL LIABILITY Commercial General Liability Occurrence	02 CSE J77030	01-Apr-2023	01-Apr-2024	GENERAL AGGREGATE	4,000,000
					PRODUCTS - COMP/OP AGG	8,500,000
					PERSONAL AND ADV INJURY	2,000,000
					EACH OCCURRENCE	2,000,000
					FIRE DAMAGE (ANY ONE FIRE)	2,000,000
					MED EXP (ANY ONE PERSON)	10,000
A B	AUTOMOBILE LIABILITY Any Auto	02 CSE J77023 (AOS)	01-Apr-2023	01-Apr-2024	COMBINED SINGLE LIMIT	2,000,000
					BODILY INJURY (PER PERSON)	
		02 CSE J77024 (HI)	01-Apr-2023	01-Apr-2024	BODILY INJURY (PER ACCIDENT)	
					PROPERTY DAMAGE	
C	EXCESS LIABILITY Umbrella Form	XEU G27969951 008	01-Apr-2023	01-Apr-2024	EACH OCCURENCE	5,000,000
					AGGREGATE	5,000,000
D D D D	WORKERS COMPENSATION / EMPLOYERS LIABILITY THE PROPRIETOR / PARTNERS / EXECUTIVE OFFICERS ARE Included	02 WBR J77021 (WI)	01-Apr-2023	01-Apr-2024		
		02 XWE J77022 (NY, OH)*	01-Apr-2023	01-Apr-2024	WORKERS COMP LIMITS	Statutory
		02 WN J77020 (TX)	01-Apr-2023	01-Apr-2024	EL EACH ACCIDENT	2,000,000
					EL DISEASE - POLICY LIMIT	2,000,000
		02 WN J77020 (AK, ID)	01-Apr-2023	01-Apr-2024	EL DISEASE - EACH EMPLOYEE	2,000,000

The Memorandum of Insurance serves solely to list insurance policies, limits and dates of coverage. Any modifications here to are not authorized.

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PRODUCER Marsh USA Inc. ("Marsh")	INSURED STANLEY BLACK & DECKER, INC. AND AFFILIATED COMPANIES 1000 STANLEY DRIVE, NEW BRITAIN Connecticut 06053 United States
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ADDITIONAL INFORMATION
EXCESS LIABILITY POLICY DOES NOT PROVIDE EXCESS COVERAGE OVER THE WORKERS COMPENSATION COVERAGE

D: ADDITIONAL INSURER INFORMATION

Work Comp (WI) Insurer is Twin City Fire Insurance Company
 Work Comp (NY,OH) Insurer is Hartford Casualty Insurance Company. *Excess WC SIR for NY and OH is \$2,000,000 for subsidiaries with payroll in those states and as on file with State WC Board.
 Work Comp (TX) Insurer is Hartford Insurance Company Of Illinois
 Work Comp (AK,ID) Insurer is Hartford Insurance Company of the Midwest

INSURER: HARTFORD UNDERWRITERS INSURANCE COMPANY
 POLICY NUMBER & STATES COVERED: 02 WN J77020 (AZ,HI,MA,NC,NJ,SD,VA)
 POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

INSURER: HARTFORD FIRE INSURANCE COMPANY
 POLICY NUMBER & STATES COVERED: 02 WN J77020 (NH,OR,PA,PR)
 POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

INSURER: HARTFORD ACCIDENT AND INDEMNITY COMPANY
 POLICY NUMBER & STATES COVERED: 02 WN J77020 (AL,GA,KY,MI,MT,TN,VT)
 POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

INSURER: TRUMBALL INSURANCE COMPANY
 POLICY NUMBER & STATES COVERED: 02 WN J77020 (AR,DC,IN,LA,NE,RI,UT)
 POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

INSURER: SENTINEL INSURANCE COMPANY LTD
 POLICY NUMBER & STATES COVERED: 02 WN J77020 (IA,NV,OK)
 POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

INSURER: PROPERTY AND CASUALTY INSURANCE COMPANY OF HARTFORD
 POLICY NUMBER & STATES COVERED: 02 WN J77020 (CA,CO,DE,ME,MN,MS,SC)
 POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

INSURER: NUTMEG INSURANCE COMPANY
POLICY NUMBER & STATES COVERED: 02 WN J77020 (CT,IL)
POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

INSURER: TWIN CITY FIRE INSURANCE COMPANY
POLICY NUMBER & STATES COVERED: 02 WN J77020 (FL,ND,WA)
POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024
(Including stop gap coverage for WA (for some company payroll).

INSURER: HARTFORD INSURANCE COMPANY OF THE SOUTHEAST
POLICY NUMBER & STATES COVERED: 02 WN J77020 (KS,MD)
POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

INSURER: HARTFORD CASUALTY INSURANCE COMPANY
POLICY NUMBER & STATES COVERED: 02 WN J77020 (MO,NY,OH,WV)
POLICY EFFECTIVE DATES: 04/01/2023 - 04/01/2024

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