

**REAL ESTATE APPRAISERS  
 ERRORS & OMISSIONS INSURANCE APPLICATION  
 All States Except Alaska, Georgia, Louisiana, and New York**



This application is for individuals who only do 100% appraisal work. If you are involved in other areas of Real Estate contact your agent.

<b>Name of Applicant</b> _____ _____ (Individual) <b>Address</b> _____ <b>City</b> _____ <b>St.</b> _____ <b>ZIP</b> _____ <b>Tel.</b> ( ) _____ <b>Fax</b> ( ) _____ <b>E-Mail</b> _____ <b>Desired Effective Date:</b> ____/____/____	<b>Applicant is:</b> <input type="checkbox"/> Ind. Contractor <input type="checkbox"/> Sole Prop. <input type="checkbox"/> Corporation <input type="checkbox"/> Partner <b>Name of Firm</b> _____ <i>Each appraiser must complete an individual application and pay the appropriate premium to be eligible for the insurance coverage.</i> <input type="checkbox"/> <b>New Business</b>
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**For you to be eligible for this program, the response to questions 1- 4 below must all be "true".**

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| 1. The applicant is a licensed appraiser.  | <input type="checkbox"/> True <input type="checkbox"/> False |
| 2. The applicant does not appraise any real estate in which he / she has an ownership interest   | <input type="checkbox"/> True <input type="checkbox"/> False |
| 3. The applicant has not been disciplined by any state licensing board or other regulatory board as a result of appraisal activities within the past 5 years | <input type="checkbox"/> True <input type="checkbox"/> False |
| 4. There have been no claims reported and/or pending circumstances which could result in a claim against the applicant within the past 5 years.              | <input type="checkbox"/> True <input type="checkbox"/> False |

**80% or more of my revenues are derived from residential appraisals**  True  False  
*If your response is "true", you qualify for the residential premiums shown below*

**If you have a policy in force you need prior acts coverage. Attach a copy of the current policy declaration page showing the prior acts date**

Per Claim/Annual Aggregate *	Residential			Commercial		
	All other states	California	Washington	All other states	California	Washington
\$300,000 / \$600,000	\$455.00	\$570.00	\$437.00	\$537.00	\$671.00	\$515.00
\$500,000 / \$1,000,000	\$520.00	\$644.00	\$500.00	\$613.00	\$758.00	\$589.00
\$1,000,000 / \$2,000,000	\$590.00	\$733.00	\$565.00	\$694.00	\$862.00	\$667.00

\* A standard deductible of \$500.00 per claim / \$1,000.00 aggregate will be included in each policy

_____ Circle premium selected and enter here <b>Step 1</b> TOTAL	_____ Premium Due + 125.00 Broker Fee _____ TOTAL
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<b>Step 2. Optional Terrorism Insurance: See below regarding this optional insurance.</b>	
<b>Continue only if you elect to purchase terrorism insurance</b>	
<b>Step 2a. Florida Residents:</b> Multiply the premium you selected in step 1 by X 1.01	\$ _____ Premium due
<b>Step 2b. Washington Residents:</b> Multiply the premium you selected in step 1 by X 1.02	\$ _____ Premium due
<b>Step 2c. All other States:</b> Add \$100.00 to the premium you selected in Step 1	\$ _____ Premium due

<b>West Virginia Residents:</b> The State of West Virginia assesses a tax of 1% on insurance. Enter the premium you selected from 1 or 2 above and multiply by 1.01	\$ _____ Premium due
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<b>New Jersey Residents:</b> A 1.75% surcharge must be collected for the Insurance Guaranty Fund in addition to the premium above. Enter the premium you selected from step 1 or 2 from above and multiply by 1.0175 . See the reverse side for a description of this surcharge.	\$ _____ Premium due
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**Kentucky Residents.** The premiums shown above do not include the State, City or County Taxes assessed in Kentucky, which range from 2% to 7%. Please contact our office to obtain the amount of the tax prior to submitting your application.

**OPTIONAL: Terrorism Risk Insurance Act of 2002:** You are hereby notified that under the Terrorism Risk Insurance Act of 2002 ("The Act"), you have a right to purchase insurance coverage for losses arising out of acts of terrorism, as defined in Section 102(1) of The Act: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State, and the Attorney General of the United States - to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property; or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of an air carrier or vessel or the premises of a United States mission; and to have been committed by an individual or individuals acting on behalf of any foreign person or foreign interest, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. You should know that coverage provided by the policy offered in this quote for losses caused by acts of terrorism, as defined in The Act, is partially reimbursed by the United States under a formula established by The Act. Under this formula, the United States pays 90% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is \$100.00 except in the state of Florida where the premium is 1% of the developed premium and the state of Washington where the premium is 2% of the developed premium. The Premium charged does not include any charges for the portion of the loss covered by the Federal government under the Act. If you reject this offer of terrorism coverage please do ALL of the following: Check the "reject" option below.

**I reject coverage for losses due to terrorist acts as defined in the act. Sign and date below; and forward the original to your agent.**

**Signature** \_\_\_\_\_ **Date Signed** \_\_\_\_/\_\_\_\_/\_\_\_\_

General Star National Insurance Company is an "admitted" or "licensed" insurer in all states except Connecticut (where General Star Indemnity Company is "admitted" or "licensed"), subject to the financial solvency regulation and enforcement, which applies to licensed companies. This insurance company participates in state insurance guarantee funds.

**NOTICE:** By applying for this insurance, the applicant also is applying for membership in The Realtors Insurance Purchasing Group Association, a purchasing group formed and operating pursuant to the Federal Liability Risk Retention Act of 1986 (15 USC 3901 et seq.). This purchasing group was formed for the sole purpose of providing errors and omissions liability insurance to real estate professionals. The sole purpose of becoming a member is to purchase professional liability insurance.

Completion of the application or tendering of premium does not bind coverage. Any person who knowingly and with intent to defraud any Insurance Company or other person files an application for insurance containing any false information, or conceals, for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act. Failure to report any claim made against you during your current policy term, or facts, circumstances or events which may give rise to a claim against you to your current insurance company BEFORE the expiration of your current policy term may create a lack of coverage.

**Notice to New York Applicants** Any person who knowingly and with intent to defraud any Insurance Company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information containing any fact material thereto, commits a fraudulent insurance act which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation. I declare that the information submitted herein is true and accurate to the best of my knowledge and becomes a part of my Professional Liability application. I understand an incorrect or incomplete statement could void my protection.

**Fraud Warning.** (not applicable in Nebraska, Vermont or Virginia): Any person who knowingly and with the intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purposes of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties

**New Jersey Insurance Guaranty Association Fund.** Companies writing property and casualty insurance business in New Jersey are required to participate in the New Jersey Insurance Guaranty Association. If a company becomes insolvent, the Guaranty Association settles unpaid claims and assesses each insurance company for its fair share. New Jersey law requires all companies to surcharge policies to recover these assessments. The current assessment is 1.75% and will be displayed on your premium notice.

IT IS AGREED THAT THIS FORM SHALL BE THE BASIS OF THE CONTRACT SHOULD A POLICY BE ISSUED IT WILL ATTACH TO THE POLICY.  
I understand that the final premium will be rounded to the next dollar. I declare that the information submitted herein is true to the best of my knowledge and becomes a part of my Professional Liability application. I understand that an incorrect or incomplete statement could void my protection.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Must be signed by a principal of the firm*

Make Check Payable to: BRILLIANT INSURANCE SERVICES

**Attach Your Check Here**

**KEEP THE ORIGINAL CHECK FOR YOUR RECORDS.** We input the information from your faxed check to create a duplicate pre-authorized bank draft with the same check number and same amount as the one you faxed. After it's deposited you will receive it back from your bank along with your other cancelled checks.

