



Writing Company
(a Stock Insurance Company)

Professional First™
Bankers Professional Liability Policy

Declarations

This Declarations Page is attached to and forms part of the Policy

DECLARATIONS

NOTICE: THE COVERAGE PROVIDED UNDER THIS POLICY IS LIMITED TO ONLY THOSE CLAIMS FIRST MADE DURING THE POLICY PERIOD OR ANY APPLICABLE DISCOVERY PERIOD. THE LIMIT OF LIABILITY TO PAY JUDGMENTS OR SETTLEMENTS WILL BE REDUCED AND MAY BE EXHAUSTED BY DEFENSE COSTS, AND DEFENSE COSTS WILL BE APPLIED AGAINST THE RETENTION. THE INSURER WILL NOT BE LIABLE FOR DEFENSE COSTS OR OTHER LOSS IN EXCESS OF THE APPLICABLE LIMIT OF LIABILITY. THE INSURER DOES NOT ASSUME ANY DUTY TO DEFEND UNDER THIS POLICY. PLEASE REVIEW THE POLICY CAREFULLY.

	Policy No.:	Renewal of:
1. Parent Company:		
Mailing Address:		
2. Insurer:		
3. Policy Period:	From: (Inception Date) to (Expiration Date)	
	12:01 a.m. local time at Mailing Address listed in Item 1, above.	
4. Limit of Liability:	\$	
5. Retention:	\$	Each Claim
6. Notices to Insurer:	<p align="center"><u>For Claims or Potential Claims</u></p> <p>By 24-hour toll free number: 855-453-9675</p> <p>By Email: claimsnotice@bhspecialty.com</p> <p>By Fax: 617-507-8259</p> <p>By Mail: Log on to www.bhspecialty.com/claims-reporting.html for mailing address</p>	<p align="center"><u>All Other Notices</u></p> <p>By Email: execandprofnotices@bhspecialty.com</p> <p>By Fax: 617-248-1618</p> <p>By Mail: Log on to www.bhspecialty.com/claims-reporting.html for mailing address</p>



7. Discovery Period:

A. Additional Premium: \$

B. Additional Period:

8. Premium: \$, including \$0 for Terrorism

9. Responsible
Manager:

THESE DECLARATIONS, TOGETHER WITH THE COMPLETED AND SIGNED APPLICATION FOR THIS POLICY, THE POLICY FORM AND ANY ENDORSEMENTS ATTACHED HERETO, CONSTITUTE THE ABOVE NUMBERED INSURANCE POLICY.

Date of Issue:

Countersigned By:

Ralph Tortorella, III, Secretary

Peter J. Eastwood, President