

DECLARATIONS

REAL ESTATE APPRAISERS ERRORS & OMISSIONS INSURANCE POLICY

Authorized Representative

301 E. Fourth Street, Cincinnati, OH 45202

THIS IS BOTH A CLAIMS MADE AND REPORTED INSURANCE POLICY.

THIS POLICY APPLIES TO THOSE CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED AND REPORTED IN WRITING TO THE COMPANY DURING THE POLICY PERIOD.

Insurance is afforded by the company indicated below: (A capital stock corporation)

Great American Assurance Company

Note: The Insurance Company selected above shall herein be referred to as the Company.

Policy Number: Renewal of: **RAP3186700-23** Herbert H. Landy Insurance Agency Inc. Program Administrator: 100 River Ridge Drive, Suite 301 Norwood, MA 02062

Item 1. Named Insured: Joseph Anthony Chico
Item 2. Address: 226 Scotts Run Road
City, State, Zip Code: Maidsville, WV 26541
Item 3. Policy Period: From 07/14/2024 To 07/14/2025 (Month, Day, Year) (Month, Day, Year) (Both dates at 12:01 a.m. Standard Time at the address of the Named Insured as stated in Item 2.)
Item 4. Limits of Liability:
A. \$ Damages Limit of Liability – Each Claim
B. \$ Claim Expenses Limit of Liability – Each Claim
C. \$ 1,000,000 Damages Limit of Liability – Policy Aggregate
D. \$ Claim Expenses Limit of Liability – Policy Aggregate
Item 5. Deductible (Inclusive of Claim Expenses):
A. \$ Each Claim
B. \$ Aggregate
Item 6. Premium: \$ 704.00 Additional 0.55% WV State Tax \$3.87
Item 7. Retroactive Date (if applicable): 07/14/2021
Item 8. Forms, Notices and Endorsements attached: D42100 (03/15) D42300 WV (05/13) IL7324 (07/21)

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D42402 (05/13) D42412 (03/17) D42413 (06/17) D42414 (08/19)