POLICY NUMBER: VÓÖ Renewal of Policy No: New



COVERAGE IS PROVIDED BY GREAT AMERICAN E & S INSURANCE COMPANY A STOCK COMPANY

Named Insured: and Mailing Address	Ùæ{] ^ÁÚ[æ͡c ÁÁ
Policy Period:	From: July 1, 2013 To: Continuous
Agent or Broker Office Address: City and State:	Beecher Carlson Six Concourse Parkway, Suite 2 00 Atlanta, GA 30328

In return for payment of premium and subject to all the terms of this policywe will provide you the insurance as stated herein.

This policy does not provide coverage for liability rising from bodily injury or property damage to property of others except as may be specifically designated above.

Authorized Representative:	Date:
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GREATAMERICAN. INSURANCE GROUP

LANDLORD REQUIRED TENANT LEGAL LIABILITY INSURANCE

Great American E & S Insurance Company 301 E. Fourth Street, 20th Floor Cincinnati, OH 45202

PLEASE READ CAREFULLY: This policy provides limited liability coverage for "property damage" to the "insured location" by the "tenant". It has been purchased by a property owner or property manager ("Named Insured") to meet the minimum "tenant" liability insurance requirements of a residential lease agreement. Coverage may be narrower than a personal liability insurance policy or the liability coverage afforded to the "tenant" by a renter's insurance policy. The "tenant" is only an Additional Insured and not a Named Insured under this policy.

AGREEMENT

We will provide the insurance described in the policy in return for the payment of the premium by the Named Insured and compliance with all provisions of the policy applicable to the Named Insured and the "tenant" respectively.

DEFINITIONS

- **A.** In the policy, "we", "us" and "our" refer to the Company providing the insurance.
- B. In addition, certain words and phrases are defined as follows:
 - "Bodily injury" means bodily harm, sickness or disease, including required care, loss services and death that result.
 - 2. "Business" means:
 - a. A trade, profession or occupation engaged in on a full-time, part-time or occupational basis; or
 - b. Any other activity engaged in for mone, other compensation, except the following:
 - (1) One or more activities, no description (2) through (4) below, for this no person receives more than 100 in total compensation of the 12 months before the date of loss;
 - (2) Volunteer actives a which ho money is received other than payr ant for expenses incurred to perfect the activity;
 - (3) Providing home day care services for which no compensation is received, other than the mutual exchange of such services; or
 - (4) The rendering of home day care services to a relative of the "tenant".
 - 3. "Tenant" means:
 - a. the "tenant" and residents of the "tenant's" household who are:
 - (1) the "tenant's" relatives; or
 - (2) Other persons under the age of 21 and in the care of any person named above; or

- **b.** "residence employee" in the course of their employment while on the "insured location".
- What the word "the" or "a" immediately precedes the word "tenant", the words the "tenant" ogether mean one or more "tenant".
- 4. "Insured le on" means:
 - a. The "rasidence premises"; and
 - The art of other premises, structures and and contained within continuous common grounds owned or operated by the Named Insured and used by the "tenant" as a residence.
- 5. "Occurrence" means an accident on the "insured location", including continuous or repeated exposure to substantially the same general harmful conditions, which results, during the Coverage Period, in "property damage" to the "insured location".
- 6. "Property damage" means physical injury to, destruction of, or loss of use of any part of the "insured location" caused by <u>fire, smoke, explosion, water damage, backup or overflow of sewer, drain or sump, falling objects, riot or civil commotion.</u>
- 7. "Residence employee" means an employee of the "tenant", or an employee leased to the "tenant" by a labor leasing firm, under an agreement between the "tenant" and the labor leasing firm, whose duties are related to the maintenance or use of the "residence premises", including household or domestic services. A "residence employee" does not include a temporary employee who is furnished to the "tenant" to substitute for a permanent "residence employee" on leave or to meet seasonal or short-term workload conditions.
- 8. "Residence premises" means the residential dwelling unit where the "tenant" resides, and which is specifically scheduled to this policy as a "residence premises".

9. "Fungi" means any type or form of fungus, including mold or mildew and any mycotoxins, spores, scents or byproducts produced or released by fungi.

LIABILITY COVERAGES

Property Damage Liability to Landlord's Property

If a claim is made or a suit is brought against the "tenant" for damages because of "property damage" caused by an "occurrence" to the "insured location" to which this coverage applies, we will:

- Pay up to our Limit of Liability for the damages for which the "tenant" is legally liable. Damages include prejudgment interest awarded against the "tenant": and
- Provide a defense at our expense by counsel of our choice, even if the suit is groundless, false or fraudulent.

We may investigate and settle any claim or suit that we decide is appropriate. Our duty to settle or defend ends when our Limit of Liability for the "occurrence" has been exhausted by payment of a judgment or settlement.

EXCLUSIONS

A. "Vehicle Liability"

"Property damage" arising from the ownership, maintenance, occupancy, operation, use, loading or unloading of aircraft, hovercraft, watercoor motor vehicles.

B. Expected Or Intended Damage

"Property damage" which is expected or by a "tenant" who is 13 years of age or old even if the resulting "property damage" is of a ferent kind, quality or degree than appeted or intended.

C. "Business"

"Property damage" arising comporting of the incommon with a "business" conducted or engaged by the "tenant", whether or not the "business" is owned or operated by the "tenant".

This Exclusion C. applies, but is not limited to, an act or omission, regardless of its nature or circumstance, involving a service or duty rendered, promised, owed, or implied to be provided because of the nature of the "business".

D. "Bodily Injury"

"Bodily Injury" liability or medical expense payments to any person.

E. War

"Property damage" caused directly or indirectly by war, including the following and any consequence of any of the following:

 Undeclared war, civil war, insurrection, rebellion or revolution;

- Warlike act by a military force or military personnel; or
- Destruction, seizure or use for a military purpose.

Discharge of any nuclear, biological or chemical agent or weapon will be deemed a warlike act even if accidental.

F. Controlled Substances

"Property damage" arising out of the use, sale, manufacture, delivery, transfer or possession by any person of a Controll ed Substance as defined by the Federal Food and Drug Law at 21 U.S.C.A. Sections 811 and 812.

Controlled Substances include but are not limited to methan thetamine, cocaine, LSD, marijuana and all procotic drugs. However, this exclusion does not apply to the legitimate use of prescription corps by a person following the orders of a licensed desician.

G. "Pollutants Vestos, Lead and Silicon

"Property damage" arising out of the presence, copersal, reclase, ingestion, inhalation, absention contact with, exposure to, or failure to varn the presence of: "pollutants", lead, asbestos, silicon or anything containing such material or substance. In addition, we will not pay cost or expense to abate, mitigate, remediate, contain, remove or dispose of any of Mese substances.

"Fungi" and Bacteria

- a. "Property damage" which would not have occurred, in whole or in part, but for the actual, alleged or threatened inhalation of, ingestion of, contact with, exposure to, existence of, presence of, growth or spread of, any "fungi" or bacteria on or within a building or structure, including its contents, regardless of whether any other cause, event, material or product contributed concurrently or in any sequence to such damage.
- **b.** Any loss, cost or expenses arising out of the abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of, "fungi" or bacteria, by any insured or by any other person or entity.

I. "Property Damage" Liability

This policy does not apply to:

1. Liability:

- a. For any loss assessment charged against the "tenant" as a member of an association, corporation or community of property owners;
- b. Under any contract or agreement entered into by the "tenant". However, this exclusion does not apply to written contracts:

- (1) That exclusively relate to the ownership, maintenance or use of the "residence premises"; and
- (2) Where the contract or agreement was executed by the "tenant" prior to an "occurrence":

unless excluded in **a.** above or elsewhere in the policy;

- 2. "Property damage" to property owned by any "tenant". This includes costs or expenses incurred by the "tenant" or others to repair, replace, enhance, restore or maintain such property to prevent injury to a person or damage to property of others, whether on or away from an "insured location";
- "Property damage" to property rented to, occupied or used by or in the care of the ant" other than the "insured location".
- Loss of rental income, rental value or business income.

ADDITIONAL COVERAGES

We cover the following in addition to the Limits of Liability:

A. Claim Expenses

We pay:

- Expenses we incur and costs taxed again the "tenant" in any suit we defend;
- Premiums on bonds required in a suit we defend, but not for bond amounts more than the Limit of Liability. We need not app furnish any bond;
- 3. Reasonable expenses incurred by the "tenant" at our request, including a value of earnings (but not loss of other a come out \$250 per day, for assisting us in the irrestigation or defense of a claim er suit; an
- 4. Interest on the entire inagment which scrues after entry of the judgment at the period we pay or tender, or deposit in the that put of the judgment which does not exceed the Limit of Liability that applies.

B. Replacement Cost Damage To Property

Unless "Replacement Cost" is specifically indicated in the Declarations, we will only pay, at replacement cost, up to \$1,000 per "occurrence" for "property damage".

LIABILITY CONDITIONS

A. Limit Of Liability

Our total liability for all damages resulting from any one "occurrence" will not be more than the Limit of Liability shown in the policy.

This limit is the same regardless of the number of claims made. All "property damage" resulting from any one accident or from continuous or repeated exposure to substantially the same general harmful conditions shall be considered to be the result of one "occurrence".

B. Severability Of Insurance

Coverage applies separately to each "residence premises" tenant household. This condition will not increase our Limit of Liability for any one "occurrence".

C. Duties After "Occurrence"

In case of an "occurrence", the "tenant" will perform the following duties that apply. We have no duty to provide coverage under the policy if the "tenant's failure to comply with the following duties is rejudicity to us. The "tenant" will help us by spring the these duties are performed:

- 1. Give the notice to us or our agent as soon as is practical which sets forth:
 - a. The identity of the policy and the "named insure" shown in the policy;
 - Regionably available information on the te, place and circumstances of the "occurrence"; and
 - Names and addresses of any claimants and witnesses;
- Cooperate with us in the investigation, settlement or defense of any claim or suit;
- **3.** Promptly forward to us every notice, demand, summons or other process relating to the "occurrence";
- 4. At our request, help us:
 - a. To make settlement;
 - **b.** To enforce any right of contribution or indemnity against any person or organization who may be liable to the "tenant";
 - **c.** With the conduct of suits and attend hearings and trials; and
 - **d.** To secure and give evidence and obtain the attendance of witnesses;
- **5.** No "tenant" shall, except at their own cost, voluntarily make payment, assume obligation or incur any expense.

D. Suit Against Us

- No action can be brought against us unless there has been full compliance with all of the terms of this policy.
- No one will have the right to join us as a party to any action against either the Named Insured or the "tenant".
- No action can be brought against us until the obligation of the "tenant" has been determined by final judgment or agreement signed by us.

E. Bankruptcy

Bankruptcy or insolvency of the Named Insured or the "tenant" will not relieve us of our obligations under the policy.

F. Other Insurance

Coverage under this policy is excess over other valid and collectible "tenant" insurance except insurance written specifically to cover as excess over the Limit of Liability that applies in the policy.

G. Coverage Period

Coverage under the policy applies only to "property damage" which occurs during a valid Coverage Period. The Coverage Period for each eligible "residence premises" shall commence upon the later of:

- 1. the policy Effective Date; or
- 2. the inception date of the lease agreement between the "tenant" and the Named Insured for utilizing the "residence premises"; or
- **3.** such later Coverage Effective Date as reported by the Named Insured.

The Coverage Period shall cease upon the earlier of:

- 1. the policy cancellation or Expiration Date; or
- 2. the termination or expiration date of the lease agreement between the "tenant" and the Named Insured for utilizing the "residence premises"; or
- such earlier Coverage Expiration Da ported by the Named Insured; or
- 4. such other cancellation date as precipitated by non-payment of premium of other reasons.

H. Concealment Or Fraud

We do not provide coverage to a "tenant" who, whether before or after a bss, b

- Intentionally conceal misrep sented any material fact or circumstance
- 2. Engaged in fraudulent conduct, or
- 3. Made false statements;

relating to any claim or the insurance coverage provided under the policy.

GENERAL CONDITIONS

A. Tenant is not a Named Insured

The "tenant" is not a Named Insured under the policy. The "tenant" is only an Additional Insured.

Further, to qualify as an Additional Insured, all premiums must have been paid for the Coverage Period for such "tenant" and "residence premises".

B. Cancellation / Nonrenewal

- The Named Insured may cancel the policy at any time by returning it to us or by letting us know in writing of the date cancellation is to take effect.
- 2. We may cancel the policy at any time. We may do so by delivering to the Named Insured, or mailing to the Named Insured at the mailing address shown on the policy Declarations, written notice at least 10 days before the date cancellation is to take effect for material misrepresentation or non-payment of premium and 30 days for any other reason. Proof of mailing will be sufficient proof of notice.
- 3. We pay elect not to renew the policy. We may do so by delivering to the Named Insured at the making address down on the policy Declarations, after name at least 30 days before the explanation and the policy. Proof of mailing will be sufficient proof of notice.
 - Unless a feed otherwise by us, upon cancellion conon-renewal of the policy for any reason, all coverage shall immediately cease for all "tenants". The cancellation or expiration date of the policy shall be the end of the Policy Period for all "tenants".
- Upon termination or expiration of the lease agreement between the Named Insured and the "tenant" for use of the "residence premises", all coverage under the policy shall immediately cease for such "tenant" without notice to the "tenant".
- 6. When this policy is canceled, any unearned premium remitted for the period from the date of cancellation to the expiration or anniversary dates of the annual lease agreements will be refunded to the Named Insured in accordance with our short rate methodology.
- 7. Upon cancellation or nonrenewal, no additional "residence premises" or Coverage Periods may be reported after such date. As this policy allows for additional "residence premises" to be added during the Policy Period by reporting to us, we may at any time decline to accept such additional "residence premises" under this policy. This declination shall not be considered to be a cancellation of this policy and shall not be subject to provisions that apply to cancellation of this policy.
- 8. In the event of nonpayment of premium for any individual "residence premises" or non-payment of a monthly installment premium, we may, at our option, deny coverage for such "residence premises" and/or monthly reporting period and the same shall not constitute cancellation of this policy.

D. Named Insured's Duty to Notify Tenants

We have no duty to notify the "tenant" of cancellation or non-renewal of the policy. The Named Insured shall notify all "tenants" of cancellation or non-renewal of the policy.

E. Assignment

Assignment of the policy will not be valid unless we give our written consent.

F. Subrogation

The "tenant" may waive in writing before a loss all rights of recovery against any person. If not waived, we may require an assignment of rights of recovery for a loss to the extent that payment is made by us. If an assignment is sought, the "tenant" must sign and deliver all related papers and cooperate with us.

G. Death

If a "tenant" dies, we insure the legal representative of the deceased but only with respect to the "residence premises" of the deceased covered under the policy at the time of death.

H. Waiver Or Change Of Policy Provisions

A waiver or change of a provision of the policy must be done in writing by us to be valid. Our request for an examination or a request by either party for an appraisal will not waive any of our rights.

I. Premium Reporting and Remittance

- Premium shall be computed in accordance with our rates as specified in the p Declarations or as amended by us.
- 2. Within 5 days after the close of each month the Named Insured shall
 Reporting Schedule, the such of formation mutually agreed to identify each "tradence premises" being added or deleted om the policy; the effective rate of addition or deletion; and the as ociaterly care.

- 3. Any premium due shall be payable within 20 days after the close of each month. Coverage for any individual "residence premises" and the occupying "tenants" will not be effective unless we receive the Reporting Schedule and the appropriate premium has been paid for such "residence premises".
- 4. Coverage may not be backdated prior to the later of the first day of the Reporting Month or the inception date of the lease agreement. Failure by the Named Insured to report an individual "residence premises" shall void coverage for such "residence premises" and occupying "tenants".
- 5. At your request, we do not provide coverage for an "residence premises" that you specify, your nonpayment of premium for any included "sidence premises" shall, at our alle discretion be deemed evidence that you've wait at coverage for such "residence arem" es". If subsequent payment is tendered, we shall have the right but not the obligation to accept payment and extend coverage for such "residence premises".
- s. It event that the "tenant" obtains personal liability insurance or renters insurance in compliance with the terms of the lease agreement, coverage for the "tenant's" residence premises shall be automatically cancelled to such date with a return of any unearned premium.

IN WITNESS WHEREOF, the Company has caused this policy to be executed by its President and Secretary,

Donald Larson President, Specialty Group Karen Holley Horrell Secretary

Kun Halley Harell



IMPORTANT NOTICE TO POLICYHOLDERS CONTACTING THE COMPANY

Should you have any questions about this policy, you may contact the agent from which you acquired this policy or you may contact the Company directly at:

GREAT AMERICAN E & S INSURANCE COMPANY UNDERWRITING DEPARTMENT

1100 E. Washington Street, Suite 200 Grayslake, Illinois 60030 Toll Free Phone: (877) 803-4 19 Facsimile: (847) 543-15 2

To report a claim or should you have a question about a claim, you may attact the agent from which you acquired this policy or you may contest the Company directly at:

GREAT AMERICAN E & SINS RANG COMPANY CLAIMS F PART JENT

301 E. Four St. 20th Floor Cincil pati, 45202 Toll Free F. 10 (80c, 380-0352 Facsimile (5.1.) 579-6391 E-pail: FISC sims Qgaic.com

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SERVICE OF SUIT

(APPLICABLE IN ALL STATES EXCEPT PENNSYLVANIA AND DELAWARE)

Pursuant to any statute of any state ordistrict of the United States of America that makes provision therefore, the Insurer hereby designates the commissioner, superintendent or director of insurance or other officespecified for that purpose in the statute and his or her successors in office and duly authorized deputies in the state here this policy is issued, as the Insurer's true and lawful attorney for service of legal process in any action, suit or proceeding brought in the state where this policy is issued by or on bell of of an insured or beneficiary against the Insurer arising out of the insurance issued under this policy. Any legal process received by such attorney for service of legal process shall be forwarded, except as provided bell w, to the attention of: Eve Cutler Rosen, General Counsel, Great American Insurance Company, 580 Walks attreet, Incinnati, Ohio 45202.

In California, any legal process received by the Insurer's stat utory attorned for service of process shall be forwarded to the attention of: Nancy Flores, The CT Corps tion System, 818 West Seventh Street, Los Angeles, California 90017;

In the **District of Columbia**, any legal process receive by the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of process shall be forwarded to: **CT Corporation System, 1015** the insurer's statutory attorney for service of ser

In **Illinois**, the Director, at his or her option, may for valuacop, of the process to the Surplus Line Association of Illinois for delivery to the unauthorized insurer or may lieve the process to unauthorized insurer by another means which the Director considers to be easonable compt and certain. The be valid, the process must state the names of the Insured and the unauthorized insurer at the contract of insurance.

In **Maine**, the Insurer hereby designate ST Corpora in System asits attorney for service oflegal process in any action relating to this policy, and directs that a State legal process be mailed to: CT Corporation System, One Portland Square, Portland, Maine 04101.

In **Oregon**, the Insurer and the insured policinolder hereby agree to waive the provisions of Oregon Insurance Code Section **735.490** requiring that the role of legal process in any action relating to this policy shall eserved on the insurance agent who register a or delivered this policy and instead agree that such service of legal process be mailed directly to: **Eve Cutler Rosen.** Ceneral **Counsel**, **Great American insurance Company 580 Walnut Street**, **Cincinnati**, **Ohio 45202**.

In **Rhode Island**, the Insurer hereby designates CT Corporation System as its attorney for service of legal process in any action relating to this policy, and directs that all such legal process be mailed to CT Corporation System, 10 Weybosset Street, Providence, Rhode Island 02903.

The foregoing designations of attorney for service of legal process upor the Insurer shall not constitute a waiver of the Insurer's rights to remove, remand, dismiss or transferany suit or proceeding from any court, or to commence any suit or other proceeding in any court of competent jurisdiction.

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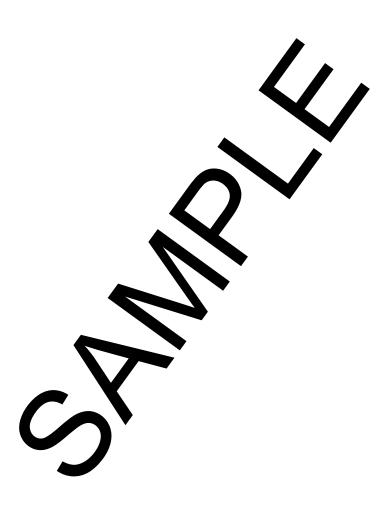


THIS ENDORSEMENT CHANGES YOUR POLICY. PLEASE READ IT CAREFULLY.

ECONOMIC AND TRADE SANCTIONS CLAUSE

This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance.

IL 73 24 (Ed. 08/12)





IMPORTANT INFORMATION TO POLICYHOLDERS CALIFORNIA

TO OBTAIN INFORMATION OR TO MAKE A COMPLAINT

In the event you need to contact someone about this Policy for any reason please contact your agent. If you have additional questions, you may contact the insurance company issuing this Policy at the following address and telephone number:

Great American Insurance Group Administrative Offices 580 Walnut Street Cincinnati, OH 45202

Or you may call the toll-free telephone number for information or to pake a complaint at:

1-800-21-72

If you have a problem with your insurance comparits agent or representative that has not been resolved to your satisfaction, please call or write to the partment of Insurance.

California Dipartment of Insurance
Services Division
300 buth Spring Street, South Tower
Los Anglas, California 90013

1-27-4357

213-897-8921 (if calling from within the Los Angeles area) 4800-482-4833 (TDD Number)

Written correspondence is precent so that a record of your inquiry can be maintained. When contacting your agent, company or the sureau of Insurance, have your Policy Number available.

ATTACH THIS NOTICE TO YOUR POLICY

This notice is for information only and does not become a part or condition of the attached document.



SURPLUS LINES NOTIFICATION

- 1. THE INSURANCE POLICY THAT YOU HAVE PURCHASED IS BEING ISSUED BY AN INSURER THAT IS NOT LICENSED BY THE STATE OF CALIFORNIA. THESE COMPANIES ARE CALLED "NONADMITTED" OR "SURPLUS LINE" INSURERS.
- 2. THE INSURER IS NOT SUBJECT TO THE FINANCIAL SOLVENCY REGULATION AND ENFORCEMENT THAT APPLY TO CALIFORNIA LICENSED INSURERS.
- 3. THE INSURER DOES NOT PARTICIPATE IN ANY OF THE INSURANCE GUARANTEE FUNDS CREATED BY CALIFORNIA LAW. THEREFORE, THESE FUNDS WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS IF THE INSURER BICOMES INSOLVENT AND IS UNABLE TO MAKE PAYMENTS AS PROMISED.
- 4. THE INSURER SHOULD BE LICENSED EITHER AS A FORTAN INSURER IN ANOTHER STATE IN THE UNITED STATES OR AS A NON-UNITED STATES (ALIEN) INSURER. YOU SHOULD ASK QUESTIONS OF YOUR INSURANCE AGENT BROKER, OR "SURPLUS LINE" BROKER OR CONTACT THE CALIFORNIA DEPARTMENT OF INSURANCE AT THE FOLLOWING TOLL-FREE TELEPHONE NICHBER 1-806-927-4357. ASK WHETHER OR NOT THE INSURER IS LICENSED AS A FORZIGN OR NON-UNITED STATES (ALIEN) INSURER AND FOR ADDITIONAL INFORMATION ABOUT THE INSURER. YOU MAY ALSO CONTACT THE NAIC'S INTERNET WITH SITE AT WWW.NAIC.ORG.
- 5. FOREIGN INSURERS SHOULD BE LICENSED Y A STATE IN THE UNITED STATES AND YOU MAY CONTACT THAT STATE'S DEPARTMENT OF INSURANCE TO OBTAIN MORE INFORMATION ABOUT THAT INSUREMENT.
- 6. FOR NON-UNITED STATES (ALIEN) INSUBERS, THE INSURER SHOULD BE LICENSED BY A COUNTRY OUTSIDE OF THE COUNTRY STATES AND SHOULD BE ON THE NAIC'S INTERNATIONAL INSURERS SEPARTIMENT (IID) LISTING OF APPROVED NONADMITTED NON-UNITED STATES INSURES. ASK YOUR AGENT, BROKER, OR "SURPLUS LINE" BROKER TO OBTAIN JURIS INFORMATION ABOUT THAT INSURER.
- 7. CALIFORNIA MAINTAIN A DEST OF APPROVED SURPLUS LINE INSURERS. ASK YOUR AGENT OR BROKER IF THE ISURER IS ON THAT LIST, OR VIEW THAT LIST AT THE INTERNET WEB SITE THE CALIFORNIA DEPARTMENT OF INSURANCE: WWW.INSURANCE.CA.GOV.
- 8. IF YOU, AS THE APPLICANT, REQUIRED THAT THE INSURANCE POLICY YOU HAVE PURCHASED BE BOUND IMMEDIATELY, EITHER BECAUSE EXISTING COVERAGE WAS GOING TO LAPSE WITHIN TWO BUSINESS DAYS OR BECAUSE YOU WERE REQUIRED TO HAVE COVERAGE WITHIN TWO BUSINESS DAYS, AND YOU DID NOT RECEIVE THIS DISCLOSURE FORM AND A REQUEST FOR YOUR SIGNATURE UNTIL AFTER COVERAGE BECAME EFFECTIVE, YOU HAVE THE RIGHT TO CANCEL THIS POLICY WITHIN FIVE DAYS OF RECEIVING THIS DISCLOSURE. IF YOU CANCEL COVERAGE, THE PREMIUM WILL BE PRORATED AND ANY BROKER'S FEE CHARGED FOR THIS INSURANCE WILL BE RETURNED TO YOU.

"THIS INSURANCE IS ISSUED PURSUANT TO THE CALIFORNIA INSURANCE CODE, SECTIONS 1760 THROUGH 1780, AND IS PLACED IN AN INSURER OR INSURERS NOT HOLDING A CERTIFICATE OF AUTHORITY FROM OR REGULATED BY THE CALIFORNIA INSURANCE COMMISSIONER."