

## Please fill out this form and return it to us with your \$249 check made payable to: URL Insurance Group at 500 Nationwide Drive, Harrisburg, PA 17110.

Note: Gemini agents receive complimentary E&O coverage. If you are a current Gemini Partner your certificate is available for download on our website. Visit the My URL Agent Center, click "My Commissions", and download your 2024-2025 certificate.

Once your check is received, you will be specifically named as an additional insured under URL Insurance Group's Errors and Omissions insurance with Everest Indemnity Insurance Company. The policy will provide coverage from November 1<sup>st</sup>, 2024 to October 31<sup>st</sup>, 2025. **You must have a certificate issued in your name to be covered by our policy.** 

## Features included in the policy:1

- Per occurrence maximum coverage: \$1,000,000
- Aggregate lifetime maximum coverage: \$2,000,000
- Deductible: \$5,000 (subject to policy deductible)

This insurance only covers transactions with those companies which URL Insurance Group represents and those transactions must be negotiated through our brokerage office.

Everest Indemnity Insurance Company will defend and settle any claims. You are required to advise us immediately upon first knowledge of a situation, which might give rise to a claim or dispute. You are asked to cooperate fully with the insurance company.

There is no cost to you for claim investigation or defense, but you will be expected to reimburse Everest Indemnity Insurance Company for all settlements under \$5,000 and reimburse Everest Indemnity Insurance Company \$5,000 on all larger settlements. You are not to advertise or in any way let your clients know that you are insured for errors and omissions.

We are happy to provide this important protection for you at a reasonable cost and hope it will expand your business with our agency. Please sign and return one copy of this letter indicating that you understand these provisions.





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I understand the information contained in this letter. After receipt of payment by URL Insurance Group, coverage will not be effective until URL receives written confirmation from the insurance carrier.

Producer Signature:		Date:
Print Name:		
Street Address (no P.O. boxes):		
City:	State:	Zip Code:
Phone Number:		
Email Address:		

<sup>1</sup> The Preferred Producer Coverage does not provide coverage for any transaction that are not placed directly through the names insured. You must have a certificate of coverage issued by Gallagher in order for coverage to trigger under the endorsement. Failing to do so, will result in coverage issues should a claim occur. The Preferred Producer Coverage does not provide coverage for "Prior Acts" and may not be sufficient to satisfy "Prior Acts" requirements of an individual producer's coverage. Coverage may terminate at any time, without notification, by the sole discretion of the named Insured or Everest Indemnity Insurance Company. Coverage is only provided for business written through the named insured and where the Insurance carrier holds an B+ or better A.M. Best rating at the time business was written.



