



LIA Administrators & Insurance Services



**APPRAISAL AND VALUATION
PROFESSIONAL LIABILITY INSURANCE POLICY**

DECLARATIONS

ASPEN SPECIALTY INSURANCE COMPANY

(A stock insurance company herein called the "Company")
175 Capitol Blvd. Suite 100
Rock Hill, CT 06067

Date Issued	Policy Number	Previous Policy Number
10/22/2018	ASI002990-04	ASI002990-03

THIS IS A **CLAIMS MADE AND REPORTED POLICY**. COVERAGE IS LIMITED TO LIABILITY FOR ONLY THOSE **CLAIMS** THAT ARE FIRST MADE AGAINST THE **INSURED** DURING THE **POLICY PERIOD** AND THEN REPORTED TO THE COMPANY IN WRITING NO LATER THAN SIXTY (60) DAYS AFTER EXPIRATION OR TERMINATION OF THIS POLICY, OR DURING THE **EXTENDED REPORTING PERIOD**, IF APPLICABLE, FOR A **WRONGFUL ACT** COMMITTED ON OR AFTER THE **RETROACTIVE DATE** AND BEFORE THE END OF THE **POLICY PERIOD**. PLEASE READ THE POLICY CAREFULLY.

Item

<p>1. Customer ID: 166823 Named Insured: KUBE, R.F. INC. Robert F. Kube 197 Broadview Ave Warrenton, VA 20186</p>	<p>This contract is a surplus lines contract, and is not protected by the Virginia Guarantee Fund.</p>	
<p>2. Policy Period: From: 11/12/2018 To: 11/12/2019 12:01 A.M. Standard Time at the address stated in 1 above.</p>		
<p>3. Deductible: \$1,000 Each Claim</p>		
<p>4. Retroactive Date: 11/12/2013</p>		
<p>5. Inception Date: 11/12/2015</p>		
<p>6. Limits of Liability: A. \$300,000 Each Claim B. \$1,000,000 Aggregate</p>		
<p>7. Mail all notices, including notice of Claim, to: LIA Administrators & Insurance Services 1600 Anacapa Street Santa Barbara, California 93101 (800) 334-0652; Fax: (805) 962-0652</p>		
<p>8. Annual Premium: \$673.00</p>		
<p>9. Forms attached at issue: LIA002S (12/14) ASPCO002 0715 LIA012 (12/14) LIA119 (10/14) LIA122 (10/14) LIA131 (10/14)</p>		

This Declarations Page, together with the completed and signed Policy Application including all attachments and exhibits thereto, and the Policy shall constitute the contract between the Named Insured and the Company.

10/22/2018

Date

By

Authorized Signature

LIA-001S (12/14)

Aspen Specialty Insurance Company

Appraisal and Valuation Professional Liability Insurance Policy



Named Insured: KUBE, R.F. INC.
Robert F. Kube

Policy Number: ASI002990-04
Effective Date: 11/12/2018
Customer ID: 166823

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL COVERED APPRAISERS ENDORSEMENT

In consideration of the premium charged, it is agreed that Section IV. **DEFINITIONS (I) "Insured"** is amended to include:

"Insured" means:

The persons identified below, but only while acting on behalf of the Named **Insured**:

Name	Coverage Effective Date	Principal/Owner, Appraiser or Trainee
Robert F. Kube	11/12/2018	Principal/Owner

All other terms, conditions, and exclusions of this Policy remain unchanged.