



TRUST DEPARTMENT ERRORS AND OMISSIONS POLICY

POLICY NUMBER _____

A stock insurance company, herein called the Insurer

NOTICE: Please read carefully. This policy applies only to claims first made during the policy year. Note that the Limit of Liability available to pay judgments or settlements shall be reduced by amounts incurred as defense expenses, against which the retention shall also apply. This policy does not provide for any duty by the Insurer to defend the Insured.

DECLARATIONS

ITEM 1 - INSURED (Indicate full corporate name and mailing address:)

AGENCY CODE, NAME AND ADDRESS:

ITEM 2 - POLICY PERIOD

(a) POLICY INCEPTION DATE: FROM _____

(b) POLICY EXPIRATION DATE: TO _____
(12:01 A.M. STANDARD TIME AT THE ADDRESS SPECIFIED IN ITEM 1 ABOVE)

ITEM 3 - EXTENDED REPORTING PERIOD

PERIOD: _____ days PREMIUM: _____ % of the POLICY PREMIUM indicated in Item 4 below

ITEM 4 - POLICY PREMIUM \$ _____

ITEM 5 - LIMIT OF LIABILITY (inclusive of Defense Expenses)
Aggregate Limit of Liability for the POLICY PERIOD: \$ _____

ITEM 6 - RETENTION (applies to each Claim): \$ _____

ITEM 7 - ENDORSEMENT(S) effective as of the POLICY INCEPTION DATE:

These Declarations, together with the signed Proposal and all attachments and materials submitted therewith and the attached Trust Department Errors and Omissions Policy and any Endorsements thereto, shall constitute the entire contract between the INSURED and the INSURER.

DATE

AUTHORIZED REPRESENTATIVE