



• We put the **Experience and Options** in E&O programs •  
 502-897-1876 / 1-800-637-7319  
 4211 Norbourne Blvd., Louisville, KY 40207-4048  
 P.O. Box 6709, Louisville, KY 40206-0709  
 www.risceo.com

**Kentucky Real Estate Commission's  
 Group Real Estate Errors and Omissions Insurance Program**

Administered by Rice Insurance Services Company, LLC (RISC) and Issued by Continental Casualty Company

**ENDORSEMENT REQUEST FORM FOR LICENSEES ALREADY ENROLLED IN THE 2018 / 2019 GROUP PROGRAM**

If you have already purchased insurance through the 2018 / 2019 group policy and want to add an endorsement, you must have an active Kentucky real estate license. To request an endorsement, send RISC the completed form (BOTH PAGES) and a check payable to RISC for the applicable premium.

If your payment is returned for nonsufficient funds, you are responsible for payment of any resulting bank fees or penalties.

Continental and RISC reserve the right to refuse to sell endorsements after the inception of your individual policy period. If your endorsement request is approved, the effective date of the endorsement(s) will be the later of April 1, 2018 or the date RISC receives the completed form (BOTH PAGES) and applicable premium. All endorsements expire concurrently with the group policy.

**LICENSEE INFORMATION:** Please type or print and ensure information is correct and complete.

Licensee Name:	License Type:	License No.:
Real Estate Firm:	City & County in which Firm is Located:	
Address:		SSN (last 4):
City:	State:	Zip Code:
Phone (home / cell): <input type="checkbox"/> If cell, check here if you want to receive texts if / when that becomes available.	Phone (work):	
Fax:	Email*:	

\*We occasionally send important notices by email. To receive these notices, provide your current email address and add our email domain (@risceo.com) to your address book.

Optional Endorsements Available	Unit Price	Amount Due
<b>Appraisal Endorsement:</b> Expands the professional services insured to include appraisal services. The basic policy excludes appraisal coverage. Appraisers <b>must</b> purchase this endorsement to be insured for appraisal activity. To be eligible, you must have both an active real estate license and an active appraisal license.	\$200	
<b>Conformity Endorsement:</b> Conforms coverage under the KY policy to meet the requirements of other mandatory states where you have an active real estate license. Only licensees domiciled in KY are eligible for this endorsement. Circle any of the following states where you have an active real estate license and need proof of E&O insurance: <b>AK CO IA ID LA MS ND NE NM RI SD TN* WY</b> Other State License Type: _____ / Other State License #: _____ (identify state if more than one) <small>*Not available to some licensees due to TN regulations. Please contact RISC if you have questions.</small>	\$15	
<b>Residential Personal Interest Coverage Endorsement:</b> Adds insurance for the sale or listing for sale of residential property in which you, your spouse, or an entity owned by you or your spouse have an ownership interest under certain conditions.	\$6	
<b>Developed/Constructed by Spouse Endorsement:</b> Adds insurance for the sale or listing for sale of residential property which is constructed or developed by the licensee's spouse under certain conditions.	\$250	
<b>Subpoena Coverage Endorsement:</b> Attorneys fees up to \$5,000 in connection with a subpoena in a suit involving a transaction in which you performed professional services under certain conditions, up to a \$5,000 aggregate.	\$6	
<b>Increased Limits Endorsements:</b> You may purchase either of the following Increased Limits Endorsements, but not both.		
• <b>Increased Limits \$250,000 per Claim / \$1,000,000 Aggregate</b> <small>See below for instructions on selecting Premium A or Premium B.</small>	A \$60 or B \$90	
• <b>Increased Limits \$500,000 per Claim / \$1,000,000 Aggregate</b> <small>See below for instructions on selecting Premium A or Premium B.</small>	A \$110 or B \$165	
<b>Premium A:</b> You earn 75% or more real estate activity income* from Residential Sales** and you have had no claims*** in the past 5 years. <b>Premium B:</b> You earn less than 75% real estate activity income* from Residential Sales** or you have had 1 claim or more*** in the past 5 years. <small>*To determine the percentage of your real estate activity income derived from Residential Sales, divide your income derived from Residential Sales by the amount of your total real estate activity income.        **Residential Sales means sales of properties zoned for and occupied exclusively as residences for 4 families or less. Residential Sales also includes: (1) sales of vacant land, provided the land is zoned for residential use and is not a development project of 4 or more residences and (2) sales of farm property that will be a buyer's principal residence and where a buyer will derive no more than 25% of total income from farming. Commercial sales and renting, leasing, managing, or appraising residential or commercial property are not Residential Sales.        ***If you are a principal broker, a claim made against you, your firm for your acts, or your firm for the firm's acts is considered a claim against you for purposes of calculating the endorsement premium. If you are not a principal broker, a claim made against you or your firm for your acts is considered a claim against you for purposes of calculating the endorsement premium.</small>		
<b>Add Selected Endorsement Premium</b>	<b>SUBTOTAL</b>	\$ _____
<b>Municipal Tax Due (Subtotal x Applicable Municipal Tax Rate):</b> Verify the tax rate for the city and county where your firm's OFFICE is located (shown on the bill from the KREC) with your principal broker and write that information where indicated on this form. We will verify the proper tax rate for your firm's address with special software in accordance with KY law. Please contact RISC with any questions.	<b>Municipal Tax Tax Rate:</b> _____%	\$ _____ (Subtotal x Tax Rate)
<b>KY Surcharge (SUBTOTAL x 1.8%)</b>	<b>KY Surcharge</b>	\$ _____ (Subtotal x 1.8%)
<b>Total (SUBTOTAL + Municipal Tax + KY Surcharge)</b>	<b>TOTAL</b>	\$ _____ (Incl. Mun. Tax & Surcharge)

Please send completed form (both pages) with payment to RISC

Mailing Address: P.O. Box 6709, Louisville, KY 40206-0709 / Overnight Address: 4211 Norbourne Blvd, Louisville, KY 40207-4048

CNA is a service mark and trade name registered with the US Patent and Trademark Office. The program referenced herein is underwritten by Continental Casualty Company, a CNA insurance company. The information included on both pages of this document is for illustrative purposes only and is not a contract. It is intended to provide a general overview of the products and services offered. Only the policy can provide the actual terms, coverages, amounts, conditions, and exclusions. This program is only available in Kentucky. © 2018



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The undersigned certifies that as of this date, the undersigned

1. holds an active Kentucky real estate license; and
2. has no knowledge of any of the following: (a) claims against the undersigned; (b) negligent acts, errors, or omissions that may reasonably be expected to become the basis of a claim against the undersigned; or (c) related negligent acts, errors, or omissions committed or alleged to have been committed that may reasonably be expected to become the basis of a claim against the undersigned; and
3. understands that the endorsement(s), if issued, will not apply to any of the following: (a) claims that first arose prior to the endorsement's effective date; (b) claims that arise after the endorsement's effective date and relate to a claim that first arose prior to that date; (c) negligent acts, errors, or omissions committed or alleged to have been committed prior to the endorsement's effective date that may reasonably be expected to become the basis of a claim against the undersigned; or (d) related negligent acts, errors, or omissions committed or alleged to have been committed prior to the endorsement's effective date that may reasonably be expected to become the basis of a claim against the undersigned; and
4. understands the endorsement premium is fully earned upon the endorsement's inception date and no refunds will be given after that time.

**COMPLETE AFTER APRIL 1, 2018** – Reason for requesting endorsement(s) after the group policy's effective date:

\_\_\_\_\_

SIGNATURE OF LICENSEE: \_\_\_\_\_

DATE: \_\_\_\_\_

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