



**NEBRASKA REAL ESTATE COMMISSION'S (NREC's)  
GROUP ERRORS AND OMISSIONS (E&O) PROGRAM**

Administered by Rice Insurance Services Center (RISC)  
A Division of Accretive Specialty Insurance Solutions, LLC  
Issued by Continental Casualty Company

502-897-1876 / 1-800-637-7319  
4211 Norbourne Blvd., Louisville, KY 40207  
P.O. Box 6709, Louisville, KY 40206  
www.risceo.com

**NOTICE** – Rice Insurance Services Center, a division of Accretive Specialty Insurance Solutions, LLC (RISC), is pleased to continue to provide the NREC's 2024 group real estate errors and omissions (E&O) insurance program. Nebraska law requires that all active real estate licensees carry and maintain E&O insurance to cover all licensed activities. **Real estate firms are not required to carry E&O insurance but may choose to do so. Real estate firms must be registered with the Nebraska Secretary of State to enroll in the group policy. If your firm was enrolled in our 2023 state group program, its coverage expired January 1, 2024.** Real estate firms that purchase insurance through the RISC group program will be insured for the firm's professional services as a registered real estate firm. In the event a covered claim is made against the firm for the firm's acts and for the firm's vicarious liability for the acts of one of its covered licensees, the firm's insurance may provide limits of liability in addition to any available under the licensee's insurance.

**PROTECTION FROM THE MOST EXPERIENCED PROVIDER IN THE BUSINESS** – RISC's independent group program exceeds state requirements and is specially tailored to meet the specific needs of Nebraska licensees. Our management team has been involved in state-mandated real estate E&O insurance programs longer than any other group in the business. The insurance carrier is Continental Casualty Company (Continental), a CNA insurance Company. RISC's experience and excellent claims service, combined with CNA's strong financial performance and ratings (rated "A" by A.M. Best), ensures a quality program for Nebraska licensees.

**OPTION FOR RENEWING E&O COVERAGE FOR MULTIPLE LICENSEES** – Companies with 10+ licensees can request a Multiple Licensee Renewal Form to electronically submit enrollment information for all the firm's licensees timely and expediently.

**FIRM EXCESS POLICIES AVAILABLE** – Firm excess policies (written by Continental) with up to \$3,000,000 aggregate limits are available on an underwritten basis. To qualify, all the firm's licensees must participate in the group program. Contact us for an application to obtain a quote.

**REVIEW THE FOLLOWING IMPORTANT INFORMATION AND SIGN BELOW**

**What Is and Is Not Covered** – We urge anyone considering the group program to review a sample policy, including the Exclusions section. Sample policy forms and additional information are available on our website, [www.risceo.com](http://www.risceo.com), or by calling us toll-free at 1-800-637-7319, Ext. 1.

**This is a Claims-Made-and-Reported Policy** – There is no coverage for claims first made before the beginning or after the end of your firm's individual policy period. If you or your firm have any knowledge of a claim; potential claim; or any act, error, omission, fact, or situation that may give rise to a claim against you or your firm, it must be reported in writing immediately to you and your firm's insurance carrier before the current policy period expires. Failure to do so may jeopardize any coverage that would have otherwise been available. Any claim under the RISC's policies must be reported to us in writing during the individual policy period in which it is first made against the insured. For further instructions and a notice of claim form, visit our website, [www.risceo.com](http://www.risceo.com), then select the "Resources" tab and click "Forms" or call us toll-free at 1-800-637-7319, Ext. 2.

**Prior Acts and Importance of Timely Renewal** – Your firm's "retroactive date" determines whether there is coverage for services performed before the policy's effective date. The retroactive date is the date from which your firm has continuously maintained uninterrupted E&O insurance, with no gaps. Even a one-day gap will result in loss of coverage for ALL professional services performed before the new policy's effective date, even if your firm had E&O insurance when the services were provided and again when the claim arises. If your firm failed to enroll timely, call RISC immediately to see if it qualifies to backdate its individual policy period to January 1, 2024.

**Not Renewing Coverage? Consider an Optional Extended Reporting Period (ERP) Endorsement** – There is no coverage for claims that arise after the end of your firm's individual policy period unless an ERP is in place. Claims often arise years after the subject transaction occurred. ERP Endorsements extend the policy's reporting date to apply to claims that are first made against an insured and reported to the carrier within the ERP. If your firm is not renewing coverage for any reason (e.g., inactivating / retiring its license or switching to another insurance provider), it should consider purchasing an ERP Endorsement. If your firm was insured through our 2023 group program and did not renew coverage, it should consider purchasing an optional 1, 2, 3, and 5 year ERP Endorsement. We offer 1, 2, 3, and 5 year ERP Endorsements for firms that enroll in the 2024 group program and do not renew coverage for any reason. Under our programs, an ERP Endorsement may only be purchased any time during or up to 90 days after the end of your firm's individual policy period.

**Territory** – Firms domiciled in Nebraska are insured for real estate services performed anywhere they hold an active real estate license, provided the services would require a real estate license if performed in Nebraska. Firms not domiciled in Nebraska are insured for Nebraska transactions only. Out-of-state firms may be considered domiciled in Nebraska if their principal real estate license is affiliated with a real estate office in Nebraska and they reside within 50 miles of the Nebraska state line. See the sample policy, Territory section for more information.

**Effective Date** – Coverage will be effective the day we receive the firm's *completed enrollment form and premium*. To request a different effective date, provide requested inception date (after January 1, 2024) for Continental's consideration: \_\_\_\_\_

**Premium / Deductible** – All premiums are fully earned at policy inception and no refunds are permitted after that date. If your firm's payment is returned for non-sufficient funds, it is responsible for payment of any resulting bank fees or penalties. The deductible will be due in accordance with the policy. Enrollee agrees to reimburse the Company for any and all costs and expenses it incurs by employing a collection agency to collect any overdue deductible.

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 Nebraska. © 2023



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**FIRM ENROLLMENT FORM**

**Real estate firms are not required to carry E&O insurance but may choose to do so. Real estate firms must be registered with the Nebraska Secretary of State to enroll in the group policy.**

**HOW TO ENROLL**

**ONLINE** – At www.risceo.com with a Visa, MasterCard, American Express or Discover card and download a certificate of coverage immediately (\$5 nonrefundable convenience fee applies).

**BY MAIL** – Select desired coverages below and send your firm's completed form (both pages) with a check or money order payable to RISC. Allow 7 – 10 business days for processing.

**Mailing Address**  
RISC, P.O. Box 6709, Louisville, KY 40206-0709

**Overnight Delivery**  
RISC, 4211 Norbourne Blvd., Louisville, KY 40207-4048

**REAL ESTATE FIRM INFORMATION**

Correct any incorrect information and fill in any blanks. Failure to do so may delay issuance of your firm's coverage.

Company Name		Designated Broker	
DBA		Secretary of State No.	
Address			
City	State	Zip Code	
Work Phone	Home Phone	Cell Phone <input type="checkbox"/> I want text reminders if / when the option is available	
Fax	Email*		

\*We occasionally send important notices by email. To receive these notices, provide your firm's current email address and add @risceo.com to your firm's address book.

**SELECT YOUR FIRM'S DESIRED COVERAGE(S)**

<b>BASIC POLICY</b>							See prorated premium at left	\$ _____
<b>Limits of Liability</b> – \$100,000 per claim / \$300,000 aggregate <b>Deductible</b> – \$1,000 (Damages)								
2023 Inception Date,	Jan \$125	Feb \$115	Mar \$104	Apr \$94	May \$83	June \$73		
Policy Expires 1/01/2024	Jul \$63	Aug \$52	Sept \$42	Oct \$31	Nov \$21	Dec \$10		
<b>Conformity Endorsement</b> – Conforms your firm's insurance through the NE policy to comply with E&O requirements in another mandated state where your firm has an active real estate license. To be eligible for this endorsement, your firm must be actually domiciled in NE or treated as domiciled in NE by the policy terms. Please circle applicable state(s):							\$20 regardless of number of states at issuance	
CO ID IA LA Other State License #: _____ (identify state if more than one)								
<b>Prorated Basic Policy Premium</b>							\$ _____	
<b>+ Any Optional Endorsement Premium</b>							\$ _____	
<b>TOTAL</b>							\$ _____	

Enrollee has reviewed and understands the information contained herein. Enrollee declares that the above statements are true and that Enrollee has not suppressed or misstated any material facts. Enrollee understands that it is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits. Enrollee agrees that this enrollment form shall be the basis of the contract with the Company and that coverage, if written, will be provided on a claims-made-and-reported basis. Enrollee understands and agrees that the completion of this enrollment form does not bind the Company to issue a policy.

<b>COMPLETE IF ENROLLING BY MAIL</b>			
<b>FIRM NAME</b>			
<b>SIGNATURE OF PERSON WITH AUTHORITY FOR FIRM</b>			
<b>PRINT NAME</b>		<b>DATE</b>	