



LIA Administrators & Insurance Services



**APPRAISAL AND VALUATION
PROFESSIONAL LIABILITY INSURANCE POLICY**

DECLARATIONS

ASPEN AMERICAN INSURANCE COMPANY

(A stock insurance company herein called the "Company")

175 Capitol Blvd. Suite 100

Rocky Hill, CT 06067

Date Issued

Policy Number

Previous Policy Number

03/20/2017

AAI008367-03

ASI000285-02

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

1. Customer ID: 168048

Named **Insured**:

KHB APPRAISALS

Kent Hackleman Blacklidge Ph.D.

814 Maplewood Drive

Kokomo, IN 46902

2. **Policy Period**: From: 04/01/2017 To: 04/01/2018

12:01 A.M. Standard Time at the address stated in 1 above.

3. **Deductible**: \$1,000 Each Claim

4. **Retroactive Date**: 04/06/2005

5. **Inception Date**: 04/01/2015

6. **Limits of Liability**: A. \$500,000 Each Claim

B. \$1,000,000 Aggregate

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

8. **Annual Premium**: \$751.00

9. **Forms attached at issue**: LIA002 (12/14) LIA IN (11/15) LIA012 (12/14) LIA122 (10/14)

LIA131 (10/14)

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.

03/20/2017

Date

LIA-001 (12/14)

By

Authorized Signature

Aspen American Insurance Company

Appraisal and Valuation Professional Liability Insurance Policy



Named Insured: KHB APPRAISALS
Kent Hackleman Blacklidge Ph.D.

Policy Number: AAI008367-03
Effective Date: 04/01/2017
Customer ID: 168048

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
Kent Hackleman Blacklidge	04/01/2017	Principal/Owner

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