



NOTICE: THIS COVERAGE PART IS WRITTEN ON A CLAIMS-MADE BASIS. SUBJECT TO ITS TERMS, THIS COVERAGE PART APPLIES ONLY TO CLAIMS FIRST MADE AGAINST THE INSUREDS DURING THE POLICY PERIOD OR ANY APPLICABLE EXTENDED REPORTING PERIOD. THE LIMITS OF LIABILITY CAN BE COMPLETELY EXHAUSTED BY DEFENSE EXPENSES AND DEFENSE EXPENSES WILL BE APPLIED AGAINST THE RETENTION. THE INSURER WILL HAVE NO LIABILITY FOR DEFENSE EXPENSES OR THE AMOUNT OF ANY JUDGMENT OR SETTLEMENT IN EXCESS OF THE APPLICABLE LIMIT OF LIABILITY.

PLEASE READ THE ENTIRE POLICY CAREFULLY.

Policy Number

SXXXXXXXXXXXXXXXXXX

Accelerant Specialty Insurance

400 Northridge Rd.
Suite 800
Sandy Springs, GA 30350

Item 1. NAMED INSURED AND ADDRESS

<<Name of Insured>>
<<Address 1>>
<<Address 2>>
<<City, State, Zip Code>>

Item 2. POLICY PERIOD

Inception Date: <<policy inception>> Expiration Date: <<policy expiration>>
(12:01 AM standard time at the address shown in Item 1.)

Item 3. COMBINED POLICY AGGREGATE LIMIT OF LIABILITY: YES NO

If "Yes" is checked above the Combined Policy Aggregate Limit of Liability for all Claims under all Liability Coverage Parts is \$<<limit>>

Item 4. COVERAGE PARTS APPLICABLE TO THIS POLICY

Coverage Part

- Directors & Officers and Entity Liability Coverage Part**
- Employment Practices Liability Coverage Part**
- Fiduciary Liability Coverage Part**
- Crime Coverage Part**



Item 5. COVERAGE PREMIUM \$ <<Premium>>

Item 6. EXTENDED REPORTING PERIOD

Additional Period:

1 Year:

Percentage of Annualized Premium:

<<PER>>%

2 Years:

<<PER>>%

3 Years:

<<PER>>%

Item 7. NOTICE TO INSURER

Report a claim to the Company as required to:

<<Insurance Company>>

<<Address 1>>

<<Address 2>>

<<City, State, Zip Code>>

Claims Telephone Number:

<<Telephone#>>

Facsimile:

<<Fax#>>

Email:

<<claim reporting email>>

In witness whereof, the Insurer has caused this Policy to be executed, but it shall not be valid unless also signed by a duly authorized representative of the Insurer.

Hugh Burgess, Chief Underwriting Officer