

# NAVIGATORS INSURANCE COMPANY

**THIS IS BOTH A CLAIMS MADE AND REPORTED INSURANCE POLICY.**

**THIS POLICY APPLIES TO THOSE CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED AND REPORTED IN WRITING TO THE COMPANY DURING THE POLICY PERIOD.**

**PLEASE READ THIS POLICY CAREFULLY.**

## REAL ESTATE APPRAISERS ERRORS AND OMISSIONS INSURANCE POLICY DECLARATIONS

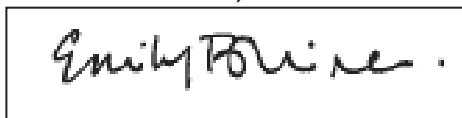
**POLICY NUMBER:** PH16RALR30302IV **RENEWAL OF:** PH15RALR30302IV

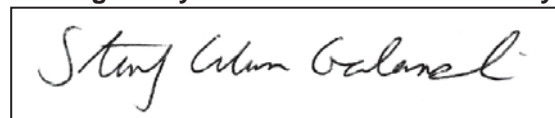
1. **NAMED INSURED:** Kelly L Ashman
  
2. **ADDRESS:** 43613 E. Florida Ave, Ste G  
HEMET, CA 92544
  
3. **POLICY PERIOD: FROM:** 08/03/2016 **TO:** 08/03/2017  
12:01 A.M. Standard Time at the address of the **Named Insured** as stated in Number 2 above.
  
4. **LIMITS OF LIABILITY:**
  - A. \$ 1,000,000 **Damages** Limit of Liability – Each **Claim**
  - B. \$ 1,000,000 **Claim Expenses** Limit of Liability – Each **Claim**
  - C. \$ 1,000,000 **Damages** Limit of Liability – Policy Aggregate
  - D. \$ 1,000,000 **Claim Expenses** Limit of Liability – Policy Aggregate
  
5. **DEDUCTIBLE (Inclusive of claim expenses):**
  - A. \$ 500 Each **Claim**
  - B. \$ 1,000 Aggregate
  
6. **PREMIUM:** \$ 850.00
  
7. **RETROACTIVE DATE:** 08/03/1998
  
8. **FORMS ATTACHED:**  
RiskMgmt, NAV ML-002, CA Notice, NAV RAL DEC, NAV RAL NIC PF, NAV RAL 002, NAV RAL 003, NAV RAL 300 CA

**PROGRAM ADMINISTRATOR:** RealCare Insurance Marketing, Inc.

By Acceptance of this policy the Insured agrees that the statements in the Declarations and the Application and any attachments hereto are the Insured's agreements and representations and that this policy embodies all agreements existing between the Insured and the Company or any of its representatives relating to this insurance.

**IN WITNESS WHEREOF, we have caused this policy to be signed by our President and Secretary.**

  
[Emily Miner]  
Secretary

  
[Stanley A. Galanski]  
President