

WAIVER OF COVERAGE

New York Life Agent's Professional Liability Plan

New York Life Requirements for alternative coverage

E&O coverage obtained outside the New York Life PLP must provide a minimum of \$1 million per occurrence/\$3 million in the aggregate per year and must meet the following additional requirements:

- Coverage must be provided for "Professional Services" as defined in Section II (F) of the Plan Highlights.
- Coverage is not limited to New York Life products
- Coverage is underwritten by an insurance carrier rated "A" or higher by AM Best.

In addition, if the agent is a financial adviser registered with Eagle Strategies Corp., the coverage must also encompass the investment advisory services provided through Eagle Strategies Corp.

What do I need to do?

1. Attach a copy of your E&O policy declarations to this waiver of coverage form.
2. Name of current E&O insurer: _____
3. Limits of Liability: \$ _____
4. Expiration Date of coverage: ____/____/____

If your E&O policy is issued through an agency with whom you are affiliated, please include a copy of the declarations that states your name as an insured under the agency policy.

By providing the following information, I am electing to maintain outside coverage and not participate in the errors and omissions program available to agents of New York Life.

Agent Name: _____

Agent Code Number: _____

General Office Name and Code Number: _____

Signature: _____ **Date:** _____

Please submit declarations **and** this signed waiver form in the enclosed envelope or fax to:

Affinity Insurance Services
159 East County Line Road
Hatboro, PA 19040
Phone 800-509-6126
Fax 877-443-9183

Affinity Insurance Services, Inc.

159 East County Line Road • Hatboro, Pennsylvania 19040-1218 • toll-free: (800) 509-6126 • fax: (877) 443-9183