

PUBLIC OFFICIALS LIABILITY POLICY

THIS IS A CLAIMS MADE POLICY
DECLARATIONS

STOCK COMPANY

POL



TUDOR
INSURANCE COMPANY
KEENE, NEW HAMPSHIRE 03431

RENEWAL OF NUMBER _____

ITEM 1. INSURED AND ADDRESS

ITEM 2. POLICY PERIOD

12:01 AM, standard time at the address
stated in year herein

ITEM 3. LIMIT OF LIABILITY (Inclusive of Defense Costs)

ITEM 4. RETENTION (Applicable to Each Loss)

ITEM 5. PREMIUM

ITEM 6. RETROACTIVE DATE

ITEM 7. DESIGNEE OF PUBLIC ENTITY TO RECEIVE NOTICES FROM INSURER

ITEM 8. POLICY FORM AND ENDORSEMENTS ATTACHED AT INCEPTION

Specimen

The declaration page and endorsements and/or forms listed above and attached hereto together with the completed and signed application shall constitute the contract between the Insured and the Company.

Countersigned:

By _____
(Authorized Representative)