

NEW YORK LIFE PROFESSIONAL LIABILITY PLAN ("PLP") PROGRAM PARTICIPATION WAIVER APPLICATION

POLICY PERIOD: SEPTEMBER 1, 2020 TO SEPTEMBER 1, 2021

New York Life ("NYL") requires all Registered Representatives and most Agents to carry errors and omissions (E&O) insurance. For your convenience, NYL sponsors an E&O program (referred to as the "Professional Liability Plan" or "PLP") which provides broad coverage at a competitive price. If you elect to *not* enroll in the PLP, the alternative coverage must satisfy certain minimum requirements (listed below) and be pre-approved by Aon prior to purchase. It is imperative that you do not purchase alternative coverage until Aon has determined that it meets all requirements. Please complete the form below as instructed and submit the quote/certificate of insurance to Aon.

ALL AGENTS COMPLETE THE FOLLOWING

First Name: _____ NYL Agent Code: _____
Last Name: _____ General Office Code: _____
Phone Number: _____ Email Address: _____

Expected or Actual Contract Date (MM/DD/YYYY): _____

Agent Type (select one): ☐ PTAS ☐ TAS ☐ TEA ☐ PEA ☐ N9 ☐ Other: _____

Newly Contracting Agents Only - Hiring Classification (select one): ☐ Category 1 ☐ Category 2 ☐ Category 3

FOR EXISTING E&O COVERAGE (PROSPECTIVE / NEWLY CONTRACTED AGENTS ONLY)

If you are a Category 1 or Category 2 Agent who is initially contracting with NYL, you must submit your already purchased E&O coverage to Aon. Once the existing E&O coverage expires, your subsequent coverage must meet the ALTERNATIVE E&O COVERAGE REQUIREMENTS below.

If you are a Category 3 Agent who is initially contracting with NYL, you must submit your already purchased E&O coverage to Aon and meet the ALTERNATIVE E&O COVERAGE REQUIREMENTS below from the first day of your contract.

ALTERNATIVE E&O COVERAGE REQUIREMENTS

Any alternative E&O coverage must meet all of the following criteria:

- ☐ Provide annual liability limits of at least \$1M per Claim/\$3M Aggregate or \$2M per Claim/\$2M Aggregate each Insured
- ☐ Cover all "Professional Services" that are covered under the NYL-sponsored PLP plan. Refer to Section II (F) of the Plan Highlights
- ☐ Cover New York Life products and products of other companies
- ☐ Be underwritten by an insurance carrier rated "A" or higher by A.M. Best
- ☐ **Include New York Life as an Additional Insured for Vicarious Liability** (must be listed on proof of E&O)

Note: If you are a financial adviser registered with Eagle Strategies Corp., your alternative E&O policy must also include coverage for investment advisor services provided through Eagle Strategies Corp.

SIGNATURE OF ACKNOWLEDGMENT

By signing below and submitting this E&O program participation waiver application, I understand that should my request to waive the New York Life sponsored E&O program be approved, I will not be considered an Insured and no coverage will apply under the New York Life sponsored PLP program if a claim is brought against me. I also understand that I am required to submit proof of sufficient alternative E&O coverage on an annual basis to remain contracted with NYL.

Signature: _____ Date: _____

PLEASE SEND YOUR COMPLETED, SIGNED & DATED APPLICATION ALONG WITH A COPY OF YOUR CURRENT CERTIFICATE OR DECLARATIONS PAGE TO AFFINITY INSURANCE SERVICES VIA ONE OF THE FOLLOWING METHODS:

BY EMAIL: INFO@AGENTS-EO.COM OR BY FAX: 215-293-1248

INCOMPLETE SUBMISSIONS WILL NOT BE REVIEWED. AON WILL RESPOND TO COMPLETE SUBMISSIONS WITHIN 5 BUSINESS DAYS OF RECEIPT. PROOF OF INSURANCE MUST INCLUDE YOUR NAME AS AN INSURED.