

QUOTE - OPTIONAL EXTENDED REPORTING PERIOD ENDORSEMENT



DATE: July 14, 2020

INSURED'S NAME: NAME LAST1

POLICY NUMBER: IF-999999

INSURED'S ADDRESS:

POLICY EFFECTIVE DATE: July 01, 2020

ADD1
CITY,ST 00123

RETROACTIVE DATE: June 22, 2020

AGENCY: CARLOS M. BENITEZ

CANCELLATION DATE: December 18, 2020

QUOTE FOR ENDORSEMENT: \$1,065.00

AGENT: PEDRO A PAGAN ROSARIO

RIGHT TO PURCHASE EXTENDED REPORTING PERIOD ENDORSEMENT

In the event of termination of this policy by reason of non-renewal or cancellation the **Insured**, his heir or guardian, upon payment of an additional premium to be quoted by the **Company**, the **Insured** has the right, but not the obligation, to purchase an Extended Reporting Period Endorsement. The **Insured** must notify the **Company** in writing, and remit full payment within thirty (30) days of the termination date or thirty (30) days of the date the **Company** mailed notification of the **Insured's** option, whichever is greater. The **Insured** must also remit any earned but unpaid premium that may be due under the terminated policy. The policy language that applied immediately prior to the termination date will apply to all **Claims** submitted during the extended reporting period. Once the optional Extended Reporting Period is exercised as stated above, the endorsement may not be cancelled and will be valid for an unlimited duration of time. The premium for this option is non-refundable and considered fully earned.

The Extended Reporting Period does not extend the **Policy Period**, change the scope of coverage provided, or increase the limits of liability. The aggregate limits of liability applicable to the Extended Reporting Period will be reinstated once, to the same limits as those applicable to the terminating policy at the time of termination.

This endorsement applies to claims first made against the Insured subsequent to the effective date of the termination of the policy to which this endorsement is attached, but only by reason of claims because of injury to which said policy applies, arising out of the rendering of or failure to render professional services by the Insured on or after the retroactive date of the mentioned policy and prior to the effective date of such termination. This endorsement will be subject to separate per medical incident and aggregate liability limits equal to the 100 percent of the expiring policy's per medical incident and aggregate limits. Should you require additional information please contact our office at 787-999-7763.

Prepared by: VL-1

FORM: TAIL (12-12)

Authorized Representative
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