**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.**

(a capital stock insurance company)

**ADMINISTRATIVE OFFICES:175 WATER STREET**

**NEW YORK, NEW YORK 10038**

**MARYLAND**

**PSYCHIATRISTS PROFESSIONAL LIABILITY INSURANCE POLICY**

**OCCURRENCE DECLARATIONS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Policy Number: | |  | Producer: |  | | |
| Renewal of: | |  | Address: |  | | |
|  | |  |  |  | | |
| Item 1. | Named Insured and Mailing Address: | | | | Item 2. | Policy Period:  From 12:01 a.m.       Standard Time  To 12:01 a.m.       Standard Time |

Item 3. Limits of Liability**:**

|  |  |  |
| --- | --- | --- |
| Professional Liability and Premises Liability Aggregate Limit | | $ |
|  | EachPsychiatric Service IncidentLimit  Sexual Misconduct Aggregate Sublimit  Each Occurrence Limit | $  $  $ |

Item 4.

Defense Costs and Other Expenses Each event, if applicable Aggregate for Policy Period

|  |  |  |  |
| --- | --- | --- | --- |
| B. Loss of Earnings for Defense Assist | | $ per day | $ |
|  | |  |  |
|  | |  |  |
| E. Assault Upon You Personal Expenses | | $ | $ |
| Item 5. | Forms and Endorsements attached at issuance: | | | |

Item 6. Premium $      (State Surcharge/Tax) $      Fund $     Total Annual Premium $

AUTHORIZED REPRESENTATIVE

|  |
| --- |
| Issued: |