



<<Date of Mailing>>

<<FirstName>> <<LastName>>

<<Address1>>

<<Address2>>

<<City>>, <<State>> <<Zip>>

RE: Agents, Registered Representatives and Investment Advisor Representatives of Protective Life & ProEquities, Inc.  
Sponsored Errors and Omissions (E&O) Program - Open Enrollment  
Policy Period: February 15, 2020 – March 1, 2021

Dear <<FirstName>> <<LastName>>:

Starting with the 2020 upcoming renewal, the Protective Life & ProEquities Sponsored E&O program will be brokered and administered by Aon. The E&O program carrier has also changed to Markel American, an admitted carrier rated A (Excellent) with a financial strength rating of XV.

With the change in carrier, Aon negotiated some significant coverage enhancements:

- Enhanced cyber liability coverage to include business interruption, data restoration, data reconstruction and network extortion as well as increased aggregate limit for the cyber liability extension from \$500K to \$2M all Insureds
- Pre-Claims Assistance with defense costs up to policy limits
- Subpoena Assistance coverage up to policy limits
- Regulatory Matters at sublimit of \$50K per Insured
- Reimbursement of Expenses for you to attend a trial, mediation etc. involving a covered E&O Claim at sublimit of \$250 per day/\$2,500 per Claim
- In the event of midterm contract termination, coverage will now cease on the date of your termination (vs. continuing until the end of the policy period)
- New Policy Expiration Date, the current master policy is effective 2/15/2020-3/1/2021

Please see the E&O Highlights Guide posted online at <https://protective.agents-eo.com/> for additional details about the changes taking effect in 2020 and other program details.

An important part of running a successful business is ensuring that you are protected from the unexpected. For this reason, Protective Life & ProEquities sponsor a competitively priced E&O program for its agents, registered representatives and investment advisor representatives. The Protective Life/ProEquities Sponsored Errors & Omissions (E&O) Insurance Program (the "E&O Program") provides industry-leading coverage at a competitive premium and is available exclusively to Agents, Registered Representatives and Investment Advisor Representatives contracted with ProEquities, Inc. and/or Protective Life.

Enrollment for the 2020 policy term is available now, please enroll through Affinity Insurance Services, Inc. (Aon) no later than **February 15, 2020, the deadline to enroll.**

**IMPORTANT** - Enclosed in this packet, you will also find a Polling Notice & Claim Reporting Form. Due to the change in E&O carriers, and to ensure you do not have a gap in coverage, it is imperative that if you are aware of any claims or circumstances which may reasonably develop into a claim, that you report any such matters to Zurich, the former insurer of the E&O Program, immediately. See enclosed notice for additional details.

Enclosed you will find an enrollment which outlines the annual E&O cost by coverage and limit option available to you. To enroll, please complete the enrollment form and return to Aon Affinity on or prior to February 15, 2020. Affinity Insurance Services, Inc. will email and mail a certificate to you once your payment has been processed.

After your enrollment has been processed, you will have access to the online self-service center which features "My Account". Access and register for "My Account", by visiting: <https://protective.agents-eo.com/>

“My Account” allows you to do the following online 24/7:

- **Print Certificate/Coverage History:** Print a certificate of insurance online.
- **Edit Contact Information:** Update your personal profile information – change your address, phone/fax numbers, email address or contract/office code information.
- **Change Password:** Modify your password as needed.
- **Payment History:** View payment history and print confirmation of payment.

This coverage is placed through Agents Professional Liability Service Organization (APLSO), a risk purchasing group duly organized under the Federal Risk Retention Act of 1986 and registered in all states. Enrollment in this E&O program automatically includes membership in APLSO. The total E&O cost includes premium and a program administration fee.

Thank you for your business. If you have any questions, please do not hesitate to contact us on your dedicated Protective Life & ProEquities Hotline at (800) 539-9284.

Sincerely,

Affinity Insurance Services, Inc.

Hotline: (800) 539-9284 | Fax: 215-293-1248 | Email: [info@agents-eo.com](mailto:info@agents-eo.com) | Website: <https://protective.agents-eo.com/>

**Protective Life Insurance Company Sponsored Agents  
Errors & Omissions (E&O) Enrollment Form**



**Insurance Company: Markel American Insurance Company**

**Policy Period: February 15, 2020 to March 1, 2021**

Enrollment Questions? Contact Aon Affinity: By phone at: 800-539-9284 | By email at: info@agents-eo.com | By Fax at: 215-293-1248

**SECTION 1: YOUR INFORMATION**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**SECTION 2: LIMIT SELECTION (please select your desired limit of liability below)**

Coverage	Limit Options (select one) (Each Claim/Aggregate each Agent)	Annual E&O Cost
Includes fixed insurance products only (excluding variable products, mutual funds and Securities)	<input type="checkbox"/> \$1,000,000 / \$1,000,000	\$ 738.00
	<input type="checkbox"/> \$2,000,000 / \$2,000,000	\$ 877.00
	<input type="checkbox"/> \$3,000,000 / \$3,000,000	\$1,084.00
<b>Total Amount Due:</b>		

*Annual E&O Cost includes premium and program administration fee.*

**SECTION 3: PAYMENT METHOD SELECTION**

☐ **Payment in Full by Check**

Please make your check payable to Affinity Insurance Services, Inc. for the full E&O cost and mail this form with your check to Affinity/Agents P.O. Box 392071, Pittsburgh, PA 15251

**SECTION 4: WARRANTY STATEMENT & SIGNATURE**

I understand and acknowledge the following: 1) I have no knowledge, as of today's date, of any negligent act, error, or omission, or personal injury, which could reasonably be expected to result in a claim that has not already been reported to the E&O Insurer. 2) To be eligible for coverage under the Protective Life Sponsored E&O Program, I must be legally contracted to represent Protective Life Insurance Company or its affiliates as of my coverage effective date. 3) If my contract to represent Protective Life terminates, my coverage ceases that same date. 4) All payments are fully earned, and I am responsible to pay the full annual E&O cost. 5) There are no refunds of premium for any reason. 6) I authorize Aon Affinity to process my renewal. 7) Your submission of this form or our preliminary acceptance of payment does not guarantee coverage. Should this submission be deemed ineligible for coverage, your payment will be refunded. 8) This coverage is placed through Agents Professional Liability Service Organization (APLSO), a risk purchasing group duly organized under the Federal Risk Retention Act of 1986 and registered in all states. Enrollment in this E&O Program automatically includes membership in APLSO.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**DEADLINE TO ENROLL IS: FEBRUARY 15, 2020**

**IMPORTANT NOTICE TO ADVISORS PARTICIPATING IN THE PROTECTIVE LIFE/PROEQUITIES,  
INC. SPONSORED ERRORS & OMISSIONS (E&O) PROGRAM**

The E&O program sponsored by Protective Life/ProEquities, Inc. (hereinafter “The Program”) renews February 15, 2020. In preparation of the renewal, ProEquities instructed its broker, Aon, to solicit bids from the major E&O carriers in this space. After careful consideration and analysis of quotes from several markets, ProEquities has decided to move The Program to a new insurer, Markel. Markel American is an admitted, A (Excellent) rated company by A.M. Best.

As part of this transition, you must put Zurich on notice of any actual “Claim” or any circumstance that you think may result in a “Claim.” A “Claim” is generally defined as a demand for money damages related to your services to a customer.

This is extremely important because Zurich’s policy is a claims-made and reported policy. Therefore, as long as you report any Claims, circumstances or potential Claims to Zurich **on or before March 15, 2019**, there will be no gap in your E&O insurance coverage as a result of this change in carrier.

Any Notice of Claim, circumstance or potential Claim should be sent to ProEquities, who will put Zurich on notice, as follows:

Protective Life Insurance Company; ProEquities, Inc.  
Attention: Katie Kimbrell, Legal Department  
2801 Highway 280 S., Legal 3-4, Birmingham, AL 35223  
Email: Katie.Kimbrell@proequities.com

Failure to properly and timely place Zurich on notice of known Claims, circumstances or potential Claims will result in the denial of coverage under both the Zurich program as well as the program with the new carrier, Markel.

For your convenience, a Claim Report Form is attached to this Notice. If you have any questions, please contact Aon Affinity by phone at 800-539-9284 or via email at [info@agents-eo.com](mailto:info@agents-eo.com).

Thank you for your attention to this important matter.

<b>Agents of Protective Life Insurance Company &amp; West Coast Life Insurance Company and the Registered Representatives of ProEquities, Inc.</b> <b>E&amp;O Program Claim Report Form</b> <b>Policy No. EOC-6556117-09   February 15, 2019 – February 15, 2020</b>	
Today’s Date:	Date you became aware of this Claim:

Name:	Rep ID#:	Branch #:
Business Address:		
Email Address:		
Phone Number:	Fax Number:	
What type of business does this claim involve? If written through any company other than Protective Life, West Coast Life or ProEquities, Inc., provide the name of the company, policy number, and policy dates:		
<b>Please attach a description of the circumstances leading to this Claim including copies of all pertinent correspondence. If you have been served with a lawsuit, a copy of the suit <u>must</u> be enclosed.</b>		
Alleged Amount in Controversy (if any): \$		
Who is making this Claim against you: Name: Address:		
If you have discussed this matter with anyone at Protective Life/ProEquities, Inc.'s Home Office, please identify the individual below: Name: Phone Number: Email Address:		
Besides the policy referenced above, do you have any other Errors and Omissions Insurance? If yes, provide requested details below: Insurer Name: Policy Number: Limits of Liability:		
<p align="center"> <b>SEND THIS COMPLETED FIRST REPORT FORM TO:</b>            Protective Life Insurance Company; ProEquities, Inc.            Attention: Katie Kimbrell, Legal Department            2801 Highway 280 S., Legal 3-4, Birmingham, AL 35223            Email: Katie.Kimbrell@proequities.com         </p>		

**DO NOT DISCUSS THIS MATTER WITH ANYONE OTHER THAN A REPRESENTATIVE OF ZURICH, AON, OR PROEQUITIES**