APPLICATION

AFSA Professional Liability Insurance Plan

THE HIRSHORN COMPANY

Premiums

Your coverage will go into effect on the first day of the month following receipt of your completed and signed application. All certificates are issued with a common expiration date, April 1. The chart below displays premiums for the first year, as determined by your start date. For example, at the $100,000 Administrative Defense level, if we receive your signed and completed application on August 23, your coverage will go into effect on September 1, and your premium for that first year would be $160.65. Subsequent years will be billed at the normal full year rate.

$1,000,000 Liability
$250 deductible

includes renewal premium*

$100,000 Administrative Defense		$250,000 Administrative Defense	
Start of Coverage	**Premium (first year)**	**Start of Coverage**	**Premium (first year)**
April 1	$275.40	April 1	$326.40
May 1	$252.45	May 1	$298.86
June 1	$229.50	June 1	$271.32
July 1	$206.55	July 1	$243.78
August 1	$183.60	August 1	$216.24
September 1	$160.65	September 1	$188.70
October 1	$137.70	October 1	$161.16
November 1	$114.75	November 1	$133.62
December 1	$91.80	December 1	$106.08
January 1	$68.85	January 1	$79.56
February 1	$321.30*	February 1	$379.44*
March 1	$298.35*	March 1	$353.94*

Select one: ☐ **$100,000 Administrative Defense** ☐ **$250,000 Administrative Defense**

NAME

ADDRESS

GOVERNMENT AGENCY

DATE OF BIRTH SEX

PHONE NO. EMAIL ADDRESS

AFSA MEMBERSHIP NUMBER

I attest that, as of this date, I have no knowledge of any allegation, claim or suit, or any act, error or omission which might reasonably be expected to result in a claim or suit.

SIGNATURE DATE

Mail your completed application form with check (payable to the Hirshorn Company) to:
The Hirshorn Company • 14 East Highland Avenue • Philadelphia, PA, 19118

(click to) visit us on the web at www.hirshorn.com