

514410

## **Certificate of Insurance**

Professional Solutions Insurance Company
Occurrence Professional Liability Policy No.

AUSTIN, TEXAS
APPROVED
FEB 2 4 2015

This professional liability policy of insurance covers the Insured identified below for the policy period indicated. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this verification may be issued or may pertain, the insurance afforded by the policy described herein is subject to all the terms, exclusions and conditions of the policy.

Named Insured:

John Doe, DDS

Insured Practice Address:

Hometown, USA 54321

Insured:

John Doe, DDS

Limits of Liability:

\$1,100,000 Per Claim

\$3,000,000 Policy Aggregate

Policy Term:

From 7/24/2014 to 7/24/2015

Original Effective Date:

7/24/2014

Cyber Limits:

\$50,000 Each Claim

\$50,000 Annual Aggregate

The policy also covers the following types of employed ancillary providers for duties performed while working under the supervision of the Named Insured: Dental Hygienists, Dental Assistants and other ancillary providers as reviewed and approved by Professional Solutions Insurance Company.

This Certificate of Insurance is provided on behalf of the Insured and is for information purposes only and extends no rights to anyone other than the Insured. This Certificate of Insurance does not affirmatively or negatively amend, extend, or alter the coverage afforded by the Policy.

Dated at Clive, IA this day of: 7/22/2014

PROFESSIONAL SOLUTIONS INSURANCE CO.

Agent

923 - Joe Pal 14001 University Ave Clive, IA 50325 Authorized Representative