

MAILING ADDRESS:
TEXAS REAL ESTATE COMMISSION
P.O. Box 12188
Austin, Texas 78711-2188



STREET ADDRESS:
TEXAS REAL ESTATE COMMISSION
1101 Camino La Costa
Austin, Texas 78752
Telephone: (512) 459-6544/1-800-250-TREC(8732)

CERTIFICATE OF INSURANCE

The Inspector shall furnish the Texas Real Estate Commission a new Certificate of Insurance not later than 15 days after the expiration of this Certificate of Insurance. This Certificate of Insurance expires on the date that the below named policy expires. This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This Certificate of Insurance neither affirmatively or negatively amends, extends, or alters the coverage afforded by the policy specified herein.

1. Inspector's Name <input type="text"/>	4. TREC Inspector License # <input type="text"/>
2. Permanent Mailing Address <input type="text"/> Physical Number and Street <input type="text"/> Mailing Address (if different) <input type="text"/> City State Zip Code	5. Insurance Company <input type="text"/>
3. Business Phone <input type="text"/>	6. Policy Number <input type="text"/> (Binders not accepted)
	7. Name of Policy Holder (if group policy) <input type="text"/>
	8. Term Dates Effective <input type="text"/> Expired <input type="text"/>

TEXAS ADMITTED CARRIER NO. <input type="text"/>	OR TEXAS SURPLUS LINE CO. NO. <input type="text"/>
1. Name of Insurance Agency <input type="text"/>	3. Name of Agent <input type="text"/>
2. Insurance Agency Address <input type="text"/> Number and Street <input type="text"/> City State Zip Code	4. Agent Phone <input type="text"/>
	5. Policy Type: OCCURRENCE <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/>

By my signature below, as an authorized insurance agent licensed to do business in the State of Texas, I hereby certify that the above policy meets the following minimum standards:

- (1) provides for professional liability insurance for the above named Inspector for claims for property damage or bodily injury, regardless of whether the claim arises from a negligence claim or a contract claim; and
- (2) is in a coverage amount of not less than \$100,000 per occurrence.

Signature of insurance agent licensed to do business in Texas

Printed Name _____ Date _____

CERTIFICATE HOLDER
TEXAS REAL ESTATE COMMISSION
P.O. Box 12188
Austin, Texas 78711-2188
PHONE 512-459-6544 FAX 512-465-3913

CANCELLATION
Should any of the above described policies be cancelled or reduced the insurance agent shall notify the Texas Real Estate Commission (Certificate Holder) not more than 10 days after non-renewal or cancellation by the insured.