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Insurer Assessment

Insurer Financial Strength / Rating	Notes: A++ A+ A A- B+
Insurer Experience & Claims Reputation	Notes: Exc VG G Avg P <input type="checkbox"/> Int'l presence / capabilities
Limit Review & Recommendations ***	Notes:

Limits / Retentions

Limits (Shared across D&O policy or Dedicated)	<input type="checkbox"/> Shared w/ D&O	<input type="checkbox"/> Dedicated
First Dollar Defense?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Defense Costs (Inside Or Outside)	<input type="checkbox"/> Inside	<input type="checkbox"/> Outside
Duty To Defend Or Indemnify	<input type="checkbox"/> Duty To Defend	<input type="checkbox"/> Duty To Indemnify
Defense Costs (Advanced Or Reimbursed)	<input type="checkbox"/> N/A	<input type="checkbox"/> Advanced <input type="checkbox"/> Reimbursed
Coverage Limits	Limit	Retention
Wage & Hour Defense Coverage	Limit	Retention
3rd Party Coverage	Limit	Retention
Are Risk Management / Loss Prevention Services Included	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Conditions/Terms

Is the Entity Included as an Insured	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage Territory (Worldwide w/ Foreign Suits)	<input type="checkbox"/> US	<input type="checkbox"/> Global <input type="checkbox"/> Foreign Claims Included
Prior Acts (Full Or Specified Retro Date)	<input type="checkbox"/> Full	<input type="checkbox"/> Specified Retro-Date:
Constant To Settle / Hammer Clause	<input type="checkbox"/> None	<input type="checkbox"/> Hard <input type="checkbox"/> Soft (Indicate %):
Approval For Settlements Within Retention	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Claim Made Reporting Period	<input type="checkbox"/> 30 days	<input type="checkbox"/> 60 days <input type="checkbox"/> 90 days
Automatic Coverage For New Subsidiaries/Organizations	<input type="checkbox"/> Yes	<input type="checkbox"/> No Notice Threshold:
Does Policy Contain A Restrictive "No Action" Clause	<input type="checkbox"/> Yes (Req's settling of claim)	<input type="checkbox"/> No (Standard wording)
Notice of Circumstances	<input type="checkbox"/> Permissive	<input type="checkbox"/> Mandatory
Exclusion Severability	<input type="checkbox"/> Yes	<input type="checkbox"/> No Imputation By:
Application Severability	<input type="checkbox"/> Yes	<input type="checkbox"/> No Imputation By:
Change in Control Clause	Notes:	
Non rescindable Coverage	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Void To Inception Clause