



THE STATE  
of **ALASKA**

Department of Commerce, Community, and Economic Development  
Division of Corporations, Business and Professional Licensing

**REC**

FOR DIVISION USE ONLY

**Real Estate Commission**

550 West 7th Avenue, Suite 1500, Anchorage, AK 99501

Phone: (907) 269-8160

Email: RealEstateCommission@Alaska.Gov

Website: *ProfessionalLicense.Alaska.Gov/RealEstateCommission*

## Affidavit of E & O Insurance Equivalent Coverage

You must complete this form and return it to the Real Estate Commission if you are claiming an exception under 12 AAC 02.530(1) Standards of Equivalent Coverage.

NOTE: A broker employing other real estate licensees is NOT required to complete this affidavit.

### PART I Personal Information

<b>Full Legal Name:</b>			
<b>Provide all other names used (maiden, nicknames, aliases). Attach documentation of all legal name changes.</b> <input type="checkbox"/> Not Applicable <input type="checkbox"/> Other Names Used: _____			
<b>License Number:</b>			
<b>Mailing Address:</b>	P.O. Box or Street	City	State Zip
<b>Email Address:</b>		<b>Contact Phone:</b>	

### PART II Agreement

Per 12 AAC 02.530, I certify that I have an E & O insurance policy with a deductible of MORE THAN \$5,000 or self-insured retention and have attached or submitted a certificate of insurance from my insurance provider.

Alaska Statute 11.56.210 states that any person who knowingly furnishes false or fraudulent information in this application is subject to imprisonment for not more than one year, a fine of not more than \$5,000, or both.

Per 12 AAC 64.160, making false or fraudulent representation or material misstatement on an application for license, renewal or examination is grounds for revocation, suspension or denial of a license.

I, the licensee, certify the information in this affidavit to be true and correct to the best of my knowledge. I understand that any false or misleading information may result in failure to obtain, or subsequent suspension of, my license.

<b>Applicant's Printed Name:</b>			
<b>Applicant's Signature:</b>		<b>Date:</b>	