



JOSEPH KRAR & ASSOCIATES, INC.

STATE OF RHODE ISLAND

AFFIDAVIT BY BROKER

I _____ swear under penalty of perjury as follows. I am a Surplus Lines Broker licensed pursuant to R.I. Gen. Laws §§ 27-3-1 et seq. with an office at:

_____ (street) (city or town) (state) (zip code)

The following information is true and correct and made in conjunction with my responsibilities as a licensed Surplus Lines Broker.

On _____, 2____, as a licensed Surplus Lines Broker, I was engaged by the insured named herein, either directly or by a licensed Rhode Island producer, to obtain insurance against the risk described in this document. A diligent effort has been made, but neither the insured nor their producer were able to obtain the required insurance with insurers licensed to transact business in the State of Rhode Island. The following insurers, licensed to write the type of insurance which is the subject of this affidavit within the State of Rhode Island, have declined the risk described (please note that the underwriter or producer who declined the risk must be identified):

Insurer	Underwriter or Producer who Declined Risk
1. _____	_____
2. _____	_____
3. _____	_____

As a licensed Surplus Lines Broker I have obtained the insurance from the surplus lines insurer indicated at the bottom of the second page of this form.

I hereby certify under penalty of perjury that the foregoing is true and correct.

Jeffrey Krar

Surplus Lines Broker