

**RCW 18.44.251 Waiver—Affidavit.** A request for a waiver of the required errors and omissions policy may be accomplished under the statute by submitting to the director an affidavit that substantially addresses the following:

REQUEST FOR WAIVER OF  
ERRORS AND OMISSIONS POLICY

I, . . . . ., residing at . . . . ., City of . . . . .,  
County of . . . . ., State of Washington, declare the  
following:

(1) An errors and omissions policy is not reasonably  
available to a substantial number of licensed escrow  
officers; and

(2) Purchasing an errors and omissions policy is  
cost-prohibitive at this time; and

(3) I have not engaged in any conduct that resulted  
in the termination of my escrow certificate; and

(4) I have not paid, directly or through an errors and  
omissions policy, claims in excess of ten thousand  
dollars, exclusive of costs and attorneys' fees, during the  
calendar year preceding submission of this affidavit; and

(5) I have not paid, directly or through an errors and  
omissions policy, claims, exclusive of costs and  
attorneys' fees, totaling in excess of twenty thousand  
dollars in the three calendar years immediately preceding  
submission of this affidavit; and

(6) I have not been convicted of a crime involving  
honesty or moral turpitude during the calendar year  
preceding submission of this application.

THEREFORE, in consideration of the above, I,  
. . . . ., respectfully request that the director of financial  
institutions grant this request for a waiver of the  
requirement that I purchase and maintain an errors and  
omissions policy covering my activities as an escrow  
agent licensed by the state of Washington for the period  
from . . . . ., (year) . . . . ., to . . . . ., (year) . . . . .

Submitted this day of . . . . . day of . . . . .,  
(year) . . . . .

(signature)

State of Washington,  
County of . . . . .

ss.

I certify that I know or have satisfactory evidence  
that . . . . ., signed this instrument and  
acknowledged it to be . . . . . free and voluntary act  
for the uses and purposes mentioned in the instrument.

Dated . . . . .  
Signature of  
Notary Public . . . . .  
Title . . . . .  
My appointment expires . . . . .

(Seal or stamp)

[2016 c 202 § 21; 2011 1st sp.s. c 21 § 47; 1995 c 238 § 5; 1987 c 471  
§ 10. Formerly RCW 18.44.380.]

**Effective date—2011 1st sp.s. c 21:** See note following RCW  
72.23.025.

**Effective date—1995 c 238:** See note following RCW 18.44.011.

**Effective date—Severability—1987 c 471:** See notes following RCW 18.44.231.