

**Application for Liability Insurance Revised 8/16/10  
for Court Directed Foreclosure by Sale Committee Deed  
CATIC Endorsed Program**

Limit of Liability: \$1,000,000 Per Location

Attorney Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Fax #: \_\_\_\_\_

Superior Court for the Judicial District of: \_\_\_\_\_

Date of Sale: \_\_\_\_\_ Date of Court Appointment: \_\_\_\_\_

Docket No: \_\_\_\_\_ CV: \_\_\_\_\_

Property Known as: \_\_\_\_\_

Location of Property: \_\_\_\_\_  
Include Complete Street Address, City, ST, Zip

I, \_\_\_\_\_, the Committee do covenant with the Grantee(s),  
Print Name of Signer

his/her/their successors and assigns forever, that I have full power and authority as a committee to grant and convey the above described premises.

Name of Committee: \_\_\_\_\_

Signature of Signer: \_\_\_\_\_ Date: \_\_\_\_\_

**Payment Method** Premium: \$200 Per Location

Check enclosed made payable to Smith Brothers Insurance

Credit Card:  Mastercard  Visa

Name on Credit Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CSC: \_\_\_\_\_

\*Email this application to: [CATIC@SmithBrothersUSA.com](mailto:CATIC@SmithBrothersUSA.com) or Fax to: (860) 657-1813

You will receive a Binder and a Paid Receipt showing that coverage has been bound.

Send Binder via:  Email  Fax  U.S. Mail

Insurance | Surety | Risk Management | Benefits | Financial



An Assurex Global Partner

Smith Brothers Insurance, Inc.  
68 National Drive  
Glastonbury, CT 06033

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Toll Free: 800 426-6946  
Fax: 860 652-3236  
SmithBrothersUSA.com