

Everest Reinsurance (Bermuda), Ltd.
Seon Place, 4th Floor
141 Front Street
P.O. Box HM 845
Hamilton HM DX, Bermuda.
Tel: 441.295.0006 Fax: 441.295.4828



DECLARATION OF COMPLIANCE
(Prepared in accordance with Section 15A of the Insurance Act 1978)
For the Year-Ending – December 31, 2018

We, the undersigned Directors of EVEREST REINSURANCE (BERMUDA), LTD. ("the Company") declare that to the best of our knowledge and belief that the Company has:

- (a) complied with all requirements of the minimum criteria applicable to it;
- (b) complied with the minimum margin of solvency as at December 31, 2018;
- (c) complied with applicable enhanced capital requirements as at December 31, 2018;
- (d) complied with all conditions and regulatory approvals imposed on the Company's certificate of registration; and
- (e) complied with the minimum liquidity ratio for general business as at its financial year end.

DIRECTORS:



Director: Sanjoy Mukherjee

4/29/19

Date



Director: Craig Howie

Apr. 29, '19

Date