

MISCELLANEOUS PROFESSIONAL LIABILITY APPLICATION

NOTICE: THE POLICY FOR WHICH THIS APPLICATION IS SUBMITTED IS WRITTEN ON A CLAIMS MADE BASIS AND COVERS ONLY CLAIMS FIRST MADE AGAINST THE INSUREDS DURING THE POLICY PERIOD OR EXTENDED REPORTING PERIOD IF APPLICABLE, AND REPORTED IN WRITING TO THE INSURER PURSUANT TO THE TERMS THEREIN. THE AMOUNT AVAILABLE TO PAY DAMAGES AND CLAIM EXPENSES IS SUBJECT TO A MAXIMUM AGGREGATE LIMIT OF LIABILITY AND SUBJECT TO A RETENTION AMOUNT. PLEASE READ THE POLICY CAREFULLY.

Please fully answer all questions and submit all requested information.

Applicant Name:

(Whenever used in this Application, the term "Applicant" shall mean the Named Insured, unless otherwise indicated.)

Address Line 1:

Address Line 2:

Address Line 3:

City, State, Zip Code: Telephone Number:

Does the Applicant have a website address? Yes No

If YES above, what is the web address? HTTP://

1. Please select a class of service and Schedule of Insured Services that the applicant wishes to insure: (Note - only one primary class can be chosen but multiple schedules under that class are available.)

- | | |
|---|---|
| <input type="checkbox"/> ADJUSTERS
<input type="checkbox"/> Automobile damage appraiser services for others
<input type="checkbox"/> Claims adjusting services for others | <input type="checkbox"/> LITERARY AGENTS
<input type="checkbox"/> Literary agents consulting services for others |
| <input type="checkbox"/> ARCHEOLOGISTS
<input type="checkbox"/> Archaeological/historical preservation consulting services for others | <input type="checkbox"/> MARKETING SERVICES
<input type="checkbox"/> Direct mail services for others
<input type="checkbox"/> Direct email marketing services for others |
| <input type="checkbox"/> ANSWERING SERVICE
<input type="checkbox"/> Answering services and paging services for others | <input type="checkbox"/> Lead generation services for others
<input type="checkbox"/> List management services for others
<input type="checkbox"/> Media buying services for others
<input type="checkbox"/> Market research services for others
<input type="checkbox"/> Telemarketing services for others
<input type="checkbox"/> Technical writing services for others
<input type="checkbox"/> Marketing consulting services for others
<input type="checkbox"/> Printing, mailing, graphic design and website design services for others |
| <input type="checkbox"/> AUDIO/VIDEO
<input type="checkbox"/> Audio/video consulting services for others | <input type="checkbox"/> NOTARY PUBLIC
<input type="checkbox"/> Notary public services for others |
| <input type="checkbox"/> BOOKKEEPER/RECORD KEEPING
<input type="checkbox"/> Bookkeeping and record keeping services for others | <input type="checkbox"/> OFFICE MANAGEMENT
<input type="checkbox"/> Bill payment services for others
<input type="checkbox"/> Courier/messenger services for others
<input type="checkbox"/> Billing audit services, copy/scanning services, data compilation, data entry services, data compilation, data entry services, documentation services, records services and transcription services for others.
<input type="checkbox"/> Office management services for others |
| <input type="checkbox"/> BILLING SERVICES
<input type="checkbox"/> Billing services for others | <input type="checkbox"/> PET RELATED SERVICES
<input type="checkbox"/> Pet groomer/sitter/walker services for others |
| <input type="checkbox"/> CALL CENTER
<input type="checkbox"/> Inbound, outbound and customer service call center services for others | <input type="checkbox"/> PREMIUM FINANCE
<input type="checkbox"/> Premium finance services for others |
| <input type="checkbox"/> CONSULTANTS
<input type="checkbox"/> Coaching services for others
<input type="checkbox"/> Conservation management services for others
<input type="checkbox"/> Ergonomic consultant services for others | <input type="checkbox"/> PHOTOGRAPHERS
<input type="checkbox"/> Commercial/industrial photography services for others
<input type="checkbox"/> Wedding/portrait photography services for others |
| <input type="checkbox"/> Expert witness services for others
<input type="checkbox"/> Foodservice consultant services for others
<input type="checkbox"/> Forensic investigator services for others
<input type="checkbox"/> Fund raising consultant services for others
<input type="checkbox"/> Genealogist services for others
<input type="checkbox"/> Human Resource/personnel services for others
<input type="checkbox"/> Information technology services for others
<input type="checkbox"/> Management/strategic planning services for others
<input type="checkbox"/> Office management services for others
<input type="checkbox"/> Operations improvement consulting services for others
<input type="checkbox"/> Regulatory compliance services for others
<input type="checkbox"/> Research & development services for others | <input type="checkbox"/> PUBLIC RELATIONS
<input type="checkbox"/> Business/commercial public relations services for others
<input type="checkbox"/> Public relations services for others
<input type="checkbox"/> Lobbyist services for others |
| <input type="checkbox"/> DANCE INSTRUCTOR
<input type="checkbox"/> Dance instructor services for others | <input type="checkbox"/> PROCESS SERVERS
<input type="checkbox"/> Process server services for others |
| <input type="checkbox"/> DECORATOR/INTERIOR DESIGN
<input type="checkbox"/> Exhibit designer services for others | <input type="checkbox"/> PRINTERS
<input type="checkbox"/> Coupons/sweepstakes/advertising printing services for others
<input type="checkbox"/> Documents/business forms printing services for others
<input type="checkbox"/> Directory printing and publishing services for others
<input type="checkbox"/> Printing fulfillment services for others
<input type="checkbox"/> Financial printing services for others
<input type="checkbox"/> Résumé services for others |
| <input type="checkbox"/> Interior design services for others
<input type="checkbox"/> Landscape architect services for others
<input type="checkbox"/> Lighting design consultant services for others
<input type="checkbox"/> Space planning services for others | |
| <input type="checkbox"/> DOCUMENT SHREDDER | |

- Document shredding for others
- DATA SERVICES**
 - Data/record storage services for others
- EVENT PLANNER**
 - Concierge services for others
 - Event planning services for others
 - Wedding planning services for others
- GRAPHIC DESIGN**
 - Graphic design and/or website design services for others
- INSURANCE SERVICES**
 - Insurance inspector services for others
 - Premium audit services for others
- JANITORIAL**
 - Cleaning services for others
- Stationary/business cards printing services for others
- Typesetting services for others
- RELOCATION**
 - Relocation consulting services for others
- SEMINARS**
 - Education/professional seminars services for others
 - Management/administration seminars services for others
 - Seminar training services for others
- TRANSLATOR**
 - Translation services for others
- TUTOR**
 - Tutoring services for others
- TAX PREPARER/BOOKKEEPER**
 - Tax preparer/bookkeeper services for others

2. Number of years in business
 Less than 1 year 1-3 years 3-5 years More than 5 years Don't know

3. Annual Gross Revenues based on last annual statement: \$

4. Please verify the revenues from the Applicant below for requested service or amend the revenues if there are revenues not related to the Insured Services selected in Question 1.

Please list full names of subsidiaries with revenues related to Insured Services selected in Question 1.

Please list Retroactive dates for each entity. If no prior acts coverage please leave field blank.

PARENT/SUBSIDIARY NAME	ANNUAL GROSS REVENUE	RETROACTIVE DATE (M/D/YYYY)	
	\$		<input type="checkbox"/> Don't Know
	\$		<input type="checkbox"/> Don't Know
	\$		<input type="checkbox"/> Don't Know
	\$		<input type="checkbox"/> Don't Know
TOTAL REVENUE:	\$		

5. Limit Requested:

- \$250,000/\$250,000 \$1,000,000/\$1,000,000
- \$250,000/\$500,000 \$1,000,000/\$2,000,000
- \$300,000/\$300,000 \$1,000,000/\$3,000,000
- \$500,000/\$500,000 \$2,000,000/\$2,000,000
- \$500,000/\$1,000,000 \$3,000,000/\$3,000,000

6. Retention Requested:

- \$500 \$10,000
- \$750 \$15,000
- \$1,000 \$25,000
- \$1,500 \$50,000
- \$2,500 \$75,000
- \$5,000 \$100,000
- \$7,500

7. Has the Applicant transacted in the last 12 months, or does the Applicant anticipate in the next 12 months, any restructuring or legal or financial reorganization, or filing for bankruptcy? Or has any auditor in the last 3 fiscal years rendered a "going concern" opinion for the financial statements of the Applicant? Yes No Don't Know

8. If yes, please provide details:

9. Is the Applicant requesting any entities be added as Additional Insureds? Yes No Don't Know

10. If yes, please list their full name(s) below:

11. Please enter the start and end date for the policy period requested. Both days are 12:01 A.M. at the principal address of the Applicant. From Date: To Date:

12. If date range above is other than one year (12 months), please explain:

13. Have any claims been made or has there been any inquiry, investigation or communication that could give rise to a claim against any person(s) or entities proposed for this insurance (including loss payment and defense costs)? Yes No Don't Know

14. If YES, please explain:

15. Is/was there insurance in place? Yes No Don't Know

16. If YES, what was the policy period?

From Date: To Date:

17. Applicant's retroactive date, if applicable: Don't Know

18. If insurance is/was in place, please select the limits:

- | | |
|--|--|
| <input type="checkbox"/> \$250,000/\$250,000 | <input type="checkbox"/> \$1,000,000/\$1,000,000 |
| <input type="checkbox"/> \$250,000/\$500,000 | <input type="checkbox"/> \$1,000,000/\$2,000,000 |
| <input type="checkbox"/> \$300,000/\$300,000 | <input type="checkbox"/> \$1,000,000/\$3,000,000 |
| <input type="checkbox"/> \$500,000/\$500,000 | <input type="checkbox"/> \$2,000,000/\$2,000,000 |
| <input type="checkbox"/> \$500,000/\$1,000,000 | <input type="checkbox"/> \$3,000,000/\$3,000,000 |

19. Have any of the policyholder's prior carriers indicated an intent not to offer renewal terms? Yes No Don't Know

20. If yes, please explain:

21. Is copyright infringement coverage requested? (An additional premium of approximately 15% will apply.)

Yes No Don't Know

**NOTE: QUESTIONS 22 and 23. ONLY APPLY TO THE FOLLOWING SERVICES:
PRINTERS, MARKETING SERVICES, GRAPHIC DESIGN AND PUBLIC RELATIONS**

22. Is the Applicant involved in the development or design of copyrighted materials? Yes No Don't Know

23. Does the Applicant utilize legal counsel for review and/or consultation of copyrighted material? Yes No Don't Know

24. What is the average years of experience by your staff in this industry?

Less than 3 years 3-5 years More than 5 years Don't Know

NOTICES

The undersigned authorized officer of the Applicant declares that the statements set forth herein are true. The undersigned authorized officer agrees that if the information supplied on this Application changes between the date of this Application and the effective date of the insurance, he/she shall, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations or authorizations or agreements to bind the insurance.

Signing of this Application does not bind the Applicant or the Insurer to complete the insurance contract, but it is agreed that this Application shall be the basis of the contract should a policy be issued, and it will be attached to and become part of the Policy.

All written statements and materials (including any information provided in the attached Appendices) furnished to the Insurer in conjunction with this Application are hereby incorporated by reference into this Application and made a part hereof.

The undersigned authorized officer of the Applicant hereby acknowledges that some Coverage Parts of this Policy applies to Claims first made or deemed made, during the Policy Period or Extended Reporting Period, if purchased.

WARNING

ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT S(HE) IS FACILITATING A FRAUD AGAINST THE INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT MAY BE GUILTY OF INSURANCE FRAUD.

Please sign and date this application by entering your full licensed name:

Signature

Date

Please have an authorized representative of the Applicant sign and date:

Signature

Date

Please select the title of authorized representative:

- Chief Financial Officer Chief Operating Officer Chief Executive Officer President
 Chairperson of the Board of Directors Risk Manager In House Counsel

NOTICE TO ARKANSAS APPLICANTS:

ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO COLORADO APPLICANTS:

IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FROM INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AGENCIES.

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS:

WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

NOTICE TO FLORIDA APPLICANTS:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

NOTICE TO KENTUCKY APPLICANTS:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.

NOTICE TO LOUISIANA APPLICANTS:

ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO MAINE APPLICANTS:

IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES OR A DENIAL OF INSURANCE BENEFITS.

NOTICE TO MARYLAND APPLICANTS:

ANY PERSON WHO KNOWINGLY AND WILLFULLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR WHO KNOWINGLY AND WILLFULLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO NEW JERSEY APPLICANTS:

ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO NEW MEXICO APPLICANTS:

ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.

NOTICE TO NEW YORK APPLICANTS:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

NOTICE TO OHIO APPLICANTS:

ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

NOTICE TO OKLAHOMA APPLICANTS:

WARNING: ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY.

NOTICE TO PENNSYLVANIA APPLICANTS:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

SURPLUS LINES NOTICE FOR RHODE ISLAND APPLICANTS:

THIS INSURANCE CONTRACT HAS BEEN PLACED WITH AN INSURER NOT LICENSED TO DO BUSINESS IN THE STATE OF RHODE ISLAND BUT APPROVED AS A SURPLUS LINES INSURER. THE INSURER IS NOT A MEMBER OF THE RHODE ISLAND INSURERS INSOLVENCY FUND. SHOULD THE INSURER BECOME INSOLVENT, THE PROTECTION AND BENEFITS OF THE RHODE ISLAND INSURERS INSOLVENCY FUND ARE NOT AVAILABLE.

SURPLUS LINES NOTICE FOR SOUTH CAROLINA APPLICANTS:

THIS COMPANY HAS BEEN APPROVED BY THE DIRECTOR OR HIS DESIGNEE OF THE SOUTH CAROLINA DEPARTMENT OF INSURANCE TO WRITE BUSINESS IN THIS STATE AS AN ELIGIBLE SURPLUS LINES INSURER, BUT IT IS NOT AFFORDED GUARANTY FUND PROTECTION.

NOTICE TO TENNESSEE, VIRGINIA AND WASHINGTON APPLICANTS:

IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.