

S.M.E. PROFESSIONAL LIABILITY CONSULTANTS SUPPLEMENT



NOTICE: This Application is for a CLAIMS-MADE AND REPORTED COVERAGE FORM. The Coverage Form you are applying for is limited to liability for only those "claims" that are first made against you and reported to us during the policy period.

APPLICANT INFORMATION

Name of Applicant: _____

1. Does the applicant provide Safety consulting services? ☐ Yes ☐ No
If "Yes":
 - Are the Applicant's procedures and guidelines in compliance with OSHA and/or other government safety requirements? ☐ Yes ☐ No
 - Does the Applicant offer Terrorism Safety/Security services? ☐ Yes ☐ No
 - Does the Applicant perform Onsite Safety Surveys/Inspections/Audits? ☐ Yes ☐ No
 - Does the Applicant provide consulting services to the following industries: Chemical, Hazardous Waste, Mining, Aviation? ☐ Yes ☐ No
2. Does the applicant provide Marketing or Advertising consulting services? ☐ Yes ☐ No
If "Yes":
 - Does the Applicant have a process to screen materials for any potential copyrights, trademarks or intellectual property rights? ☐ Yes ☐ No
 - Does the Applicant have a process to screen materials for potential libel, slander or advertising injury? ☐ Yes ☐ No
 - Does the Applicant's contract include provisions re: ownership rights, licensing, and use of intellectual property created for an engagement? ☐ Yes ☐ No
 - Does the Applicant's contracts state that any intellectual property created are original & do not infringe on intellectual property rights of others? ☐ Yes ☐ No
3. Does the applicant provide Agribusiness consulting services? ☐ Yes ☐ No
If "Yes", does the applicant provide services as a Seedsman? ☐ Yes ☐ No
4. Does the applicant provide any of the following consulting services:
 - Engineering, aviation, M&A, Geotechnical? ☐ Yes ☐ No
 - Investment banking, finance or funding methods, or business valuation? ☐ Yes ☐ No
 - Phase 1 site assessments, Flood risk/mapping? ☐ Yes ☐ No
 - Financial audit or financial attestation services? ☐ Yes ☐ No
5. Does the Applicant design/develop copyrighted material, trademarks, logos, packaging or display design? ☐ Yes ☐ No
6. Does the Applicant maintain security measures to protect the confidentiality and integrity of data and their clients? ☐ Yes ☐ No

FRAUD WARNING: 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 IS GUILTY OF INSURANCE FRAUD. THIS IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.
(FOR NEW YORK INSUREDS: AN ACT OF INSURANCE FRAUD SHALL BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED \$5,000 AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.)

YOU HEREBY DECLARE that the above statements and particulars are true and that you have not suppressed or misstated any material facts and you agree that this Application will be the sole basis of any subsequent contract or insurance with us. Signature on the Application does not bind you or us to complete the insurance. Application must be signed and dated by principal, partner, officer or director of the firm.

_____	_____	_____
Date	Signature of Applicant	Title