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| Direct Reimbursables | = |

8. SUBCONSULTANTS/SUCBCONTRACTORS:

Does your firm collect certificates of insurance from your subs naming you as additional insured?

Yes No

9. Do you use a standard indemnity contract with your clients and subs? Yes No

If no, please detail your contract procedures:

10. Does the applicant provide laboratory or analytical services? Yes No

11. Does the applicant utilize written, in-house quality control procedures? Yes No

12. Prior Liability Carrier Information:

| Coverage Form | Carrier | Receipts | Limit of Liability | Deductible | Type of Policy | Rate | Premium |
|---------------|---------|----------|--------------------|------------|----------------|------|---------|
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Any policy or coverage declined, cancelled or non-renewed during the prior three years? Yes No

If yes, explain: _____

13. Are Certificates of Insurance from subcontractors reviewed? Yes No

14. Are Certificates of Insurance from subcontractors kept on file? Yes No

15. Are subcontractors hired under written subcontract? Yes No

16. Describe Minimum Insurance Requirements For Subcontractors:

General Liability: _____

Contractor' Pollution Legal Liability: _____

Professional Liability: _____

Workers Compensation: _____

17. Has any officer of the company ever been the subject of disciplinary action by authorities as an result of a professional or contracting activities?

Yes No

If yes, please explain: _____

18. Has any application for Professional Liability Insurance and/or Errors and Omissions and/or Pollution Insurance made on behalf of the applicant, and predecessors in business, present partners or officers ever been declined or has the Insurance ever been canceled or renewal refused?

Yes No

If yes, please give full details (use additional sheet of paper, if necessary): _____

19. Has any claim, suit or notice of incident been made against the applicant or any of the principals of the company?

Yes No

If yes, please give full details stating (use additional sheet of paper, if necessary):

- a) Date when claim, suite or notice was made;
 - b) Date the act giving rise to the claim, suite or notice was committed;
 - c) Name of claimant;
 - d) Nature of the claim, suite or notice;
 - e) Demand amount
 - f) Amount involved including reserves; and
 - g) Final disposition,
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20. Is the applicant aware of any circumstances which may result in any claim, suite or notice of incident against him, the firm, his predecessors in business, any of the present or past partners or officers, or any persons names in response to questions 1 or 10?

Yes No

If yes, please give full details on the same basis as Question 28 above (use additional sheet of paper, if necessary):

FRAUD WARNING: APPLICABLE TO ALL STATES

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.

WARRANTY STATEMENT

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 the application changes between the dates of the application and effective date of the insurance, he/she (undersigned) will immediately notify the insurer of such changes, and the insurer may withdraw or modify any outstanding

quotations and/or authorization or agreement to bind the insurance, signing of this application does not bind the applicant or the insurer to compete the insurance.

Notice to applicants: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning fact material thereto, commits a fraudulent insurance act, which is a crime.

Applicant: _____ Title: _____
Applicant's Signature: _____ Date: _____