/ SUPPLEMENTAL APPLICATION

Miscellaneous Professional Liability Supplemental

Errors & omissions for miscellaneous professional services.

Please complete this supplement in full and return it with a signed ACORD application. Submit to submissions@hedgespecialty.com or through the Hedge broker portal. Answer every question — incomplete applications delay quoting.

GENERAL INFORMATION

NAMED INSURED / APPLICANT

DBA / TRADE NAME

BROKERAGE / BROKER

AGENCY / AGENT

PROPOSED EFFECTIVE DATE

NEW OR RENEWAL?

POLICY / QUOTE NUMBER

FEIN

ENTITY TYPE (LLC, CORP, ETC.)

YEARS IN BUSINESS

YEARS UNDER CURRENT MGMT

EMPLOYEES (FT / PT)

PROFESSIONAL SERVICES PROVIDED

WEBSITE

MAILING & RISK ADDRESS

MAILING ADDRESS

CITY

STATE

ZIP

COUNTY

OF LOCATIONS

PRIMARY RISK / PREMISE ADDRESS (IF DIFFERENT)

CITY

STATE

ZIP

COUNTY

CONTACTS

PRIMARY CONTACT NAME

TITLE

EMAIL

PHONE

AUDIT / INSPECTION CONTACT

INSPECTION PHONE

INSPECTION EMAIL

CURRENT / EXPIRING CARRIER INFORMATION

CURRENT / EXPIRING CARRIER

POLICY NUMBER

ANNUAL PREMIUM $

LIMIT(S) OF INSURANCE

DEDUCTIBLE / SIR

RETROACTIVE DATE (IF ANY)

Is the current carrier offering renewal? ☐ YES ☐ NO

Is the expiring / current coverage written on a claims-made basis? ☐ YES ☐ NO

PROFESSIONAL DISCIPLINE

Check every professional service or discipline the applicant provides, then describe the predominant service. This is an application for a claims-made-and-reported policy.

Profession / discipline (check all that apply)

☐ Management / business consultant	☐ Real estate agent / broker	☐ Property / community manager
☐ Real estate appraiser	☐ Insurance agent / broker	☐ Surplus-lines / wholesale broker
☐ MGA / MGU / program administrator	☐ Third-party administrator (TPA)	☐ Accountant / bookkeeper / tax
☐ Auditor	☐ Marketing / advertising / PR	☐ Media / publishing
☐ Staffing / recruiting / PEO	☐ Inspector (home / building / property)	☐ Travel agent / tour operator
☐ Notary / signing agent	☐ Title / escrow / settlement	☐ Coach / trainer / instructor
☐ Photographer / videographer	☐ Event planner	☐ Technology / IT / software / SaaS
☐ Engineer / design (E&O only)	☐ Mortgage broker / loan originator	☐ Expert witness / litigation support
☐ Process server / paralegal	☐ Translation / interpretation	☐ Other (describe)

PREDOMINANT PROFESSIONAL SERVICE / SPECIALTY

YEARS PROVIDING THIS SERVICE

PROFESSIONAL LICENSE / REGISTRATION #(S)

LICENSING BODY / STATE(S)

PROFESSIONAL DESIGNATIONS HELD

PROFESSIONAL / TRADE ASSOCIATIONS / MEMBERSHIPS

ARE SERVICES WARRANTED OR GUARANTEED? (Y/N)

PERSONNEL

Staff Count by Category

CATEGORY	# OWNERS / PARTNERS / OFFICERS	# PROFESSIONAL STAFF	# ADMIN / CLERICAL	# INDEPENDENT CONTRACTORS	AVG YRS EXPERIENCE
Licensed / credentialed professionals					
Non-licensed professionals					
TOTAL					

TOTAL # PROFESSIONALS

TOTAL STAFF HEADCOUNT

STATES WHERE SERVICES PERFORMED

STATES OF OPERATION

1. Are services provided over the internet or to clients outside the United States? ☐ YES ☐ NO

2. Has the staff or professional headcount changed by 25% or more in the past year? ☐ YES ☐ NO

% REVENUE FROM SERVICES PERFORMED OUTSIDE US

% REVENUE DELIVERED ONLINE / REMOTELY

SERVICES RENDERED & REVENUE

For each service line, give the % of total revenue and whether a written engagement letter / contract is used. Complete only the lines that apply.

Revenue by Service Type

SERVICE LINE	% OF REVENUE	ENGAGEMENT LETTER USED? (Y/N)	ANNUAL REVENUE $
Consulting / advisory			

SERVICE LINE	% OF REVENUE	ENGAGEMENT LETTER USED? (Y/N)	ANNUAL REVENUE $
Real estate sales / brokerage			
Property / association management			
Appraisal / valuation / BPO			
Insurance placement / brokerage			
MGA / program administration			
Claims handling / TPA			
Accounting / bookkeeping / tax			
Audit / review / attest			
Marketing / advertising / creative			
Staffing / recruiting / placement			
Inspection / testing			
Title / escrow / settlement			
Coaching / training / instruction			
Technology / software / IT services			
Design / engineering (E&O)			
Mortgage / loan origination			
Notary / signing			

LARGEST CLIENT — % OF REVENUE

2ND LARGEST CLIENT — % OF REVENUE

SINGLE CLIENT > 25% OF REVENUE? (Y/N)

SERVICES DETAIL

DESCRIBE THE TYPICAL SCOPE OF SERVICES, DELIVERABLES, AND HOW CLIENTS USE THE APPLICANT'S WORK PRODUCT

3. Does the applicant give advice, recommendations, projections, or representations clients rely upon? ☐ YES ☐ NO

IF YES, DESCRIBE HOW INDEPENDENCE / OBJECTIVITY IS MAINTAINED

4. Does the applicant warrant, guarantee, or promise a specific result, rate of return, or future value? ☐ YES ☐ NO

5. Does the applicant select, recommend, or have authority over third-party products, vendors, or carriers? ☐ YES ☐ NO

6. Does the applicant hold or have authority over client funds, premiums, escrow, or trust accounts? ☐ YES ☐ NO

IF YES, DESCRIBE CONTROLS / RECONCILIATION

7. Does the applicant act as a trustee, executor, fiduciary, director, or officer for any client? ☐ YES ☐ NO

IF YES, DESCRIBE

8. Has the type, mix, or geographic scope of services changed materially in the past 5 years? ☐ YES ☐ NO

9. Does the applicant provide services to any affiliated entity or one in which it has a financial interest? ☐ YES ☐ NO

IF YES, DESCRIBE

10. Does the applicant perform any work outside the professional disciplines disclosed above? ☐ YES ☐ NO

IF "YES" TO ANY OF THE ABOVE, EXPLAIN (REFERENCE QUESTION NUMBER)

CLIENT CONTRACTS & LOSS PREVENTION

% WORK UNDER WRITTEN CONTRACT / ENGAGEMENT LETTER

CONTRACT BASIS (YOUR FORM / CLIENT'S FORM / EITHER)

11. Is a written contract or engagement letter used on all engagements before work begins? ☐ YES ☐ NO

12. Do the contracts define the scope of services and limit/exclude services not contracted for? ☐ YES ☐ NO

13. Do contracts contain a limitation-of-liability clause capping the applicant's exposure? ☐ YES ☐ NO

14. Do contracts contain a mutual indemnity / hold-harmless and a disclaimer of consequential damages? ☐ YES ☐ NO

15. Do contracts require alternative dispute resolution (mediation / arbitration)? ☐ YES ☐ NO

16. Are engagement letters reviewed and updated by, or with the guidance of, legal counsel? ☐ YES ☐ NO

17. Are declination / non-engagement letters issued for matters the applicant declines? ☐ YES ☐ NO

18. Are deliverables peer-reviewed or approved by a second qualified person before release? ☐ YES ☐ NO

19. Are written client-acceptance / screening procedures used before taking on new clients? ☐ YES ☐ NO

20. Are client files, contracts, and work product retained for a defined record-retention period? ☐ YES ☐ NO

LIABILITY CAP IN CONTRACTS $ (IF ANY)

RECORD-RETENTION PERIOD (YRS)

WHO REVIEWS / APPROVES DELIVERABLES

FEE, ESCROW & FIDUCIARY HANDLING

21. Are client funds / premiums held in a separate trust, escrow, or fiduciary account (not commingled)? ☐ YES ☐ NO

22. Are fiduciary / escrow accounts reconciled at least monthly by someone independent of the depositor? ☐ YES ☐ NO

23. Are dual-authorization / dual-signature controls required for disbursements above a set threshold? ☐ YES ☐ NO

24. Has the applicant filed any fee-collection suit against a client in the past 5 years? ☐ YES ☐ NO

IF YES, # FILED / # THAT DREW A COUNTER-CLAIM

LARGEST SINGLE AMOUNT OF CLIENT FUNDS HELD AT ONE TIME $

DUAL-AUTHORIZATION THRESHOLD $

LARGEST CLIENTS / PROJECTS

List the largest current clients or engagements by revenue.

Top Clients / Engagements

CLIENT / PROJECT	SERVICE PROVIDED	LENGTH OF RELATIONSHIP	ANNUAL REVENUE / CONTRACT VALUE

PRIOR ACTS, RETROACTIVE COVERAGE & SUBCONTRACTED PROFESSIONALS

25. Is prior-acts (full retroactive) coverage requested, with no gap in continuous claims-made cover? ☐ YES ☐ NO

26. Has continuous professional liability coverage been maintained without lapse? ☐ YES ☐ NO

EARLIEST RETRO / FIRST COVERAGE DATE

27. Does the applicant subcontract or outsource any professional services to others? ☐ YES ☐ NO

IF YES, % SUBCONTRACTED AND DISCIPLINES

28. Are subcontracted professionals required to carry their own professional liability insurance? ☐ YES ☐ NO

29. Are certificates of insurance obtained, and is the applicant named additional insured, from all subcontracted professionals? ☐ YES ☐ NO

30. Are signed contracts with indemnification / hold-harmless obtained from all subcontracted professionals? ☐ YES ☐ NO

31. Does the applicant assume liability under contract for the work of its subcontracted professionals? ☐ YES ☐ NO

IF "YES" TO ANY OF THE ABOVE, EXPLAIN (REFERENCE QUESTION NUMBER)

Professional Revenue — Five-Year History

PROFESSIONAL REVENUE	UPCOMING YR (EST.) $	LAST 12 MONTHS $	1 YEAR PRIOR $	2 YEARS PRIOR $	3 YEARS PRIOR $
Professional Fees / Commissions					
Subcontracted / Outsourced Cost					
TOTAL					

COVERAGE REQUESTED

EACH-CLAIM LIMIT

AGGREGATE LIMIT

RETROACTIVE DATE REQUESTED

DEDUCTIBLE / SIR PER CLAIM

DEFENSE INSIDE / OUTSIDE LIMITS?

REQUESTED EFFECTIVE DATE

DISCIPLINARY & CIRCUMSTANCE HISTORY

32. Has any professional license, certificate, or registration ever been denied, limited, suspended, or revoked? ☐ YES ☐ NO

33. Is any owner or professional currently under investigation or subject to a pending disciplinary action? ☐ YES ☐ NO

34. Has any regulatory, licensing, or self-regulatory body taken action or levied a fine against the applicant? ☐ YES ☐ NO

35. Has the applicant or any professional been charged with or convicted of a crime (other than minor traffic)? ☐ YES ☐ NO

36. Has any agency / carrier appointment or program been cancelled or terminated for reasons other than production? ☐ YES ☐ NO

37. After inquiry, is anyone aware of any act, error, omission, fact, or circumstance that may give rise to a claim? ☐ YES ☐ NO

38. Does any proposed insured have knowledge of an actual or alleged error that has not yet become a claim? ☐ YES ☐ NO

IF "YES" TO ANY OF THE ABOVE, EXPLAIN (REFERENCE QUESTION NUMBER)

LOSS HISTORY

List all claims and losses for the past 5 years, regardless of fault or payment. Attach currently-valued (within 90 days) loss runs for all lines.

39. Has the applicant had any claims, losses, or incidents in the past 5 years? ☐ YES ☐ NO

40. Are there any known incidents, facts, or circumstances that may result in a claim? ☐ YES ☐ NO

41. Has any coverage been declined, cancelled, or non-renewed in the past 5 years? ☐ YES ☐ NO

Loss Detail

DATE OF LOSS	LINE / COVERAGE	CLAIMANT	DESCRIPTION	PAID $	RESERVED $	STATUS (O/C)

APPLICANT STATEMENT & SIGNATURE

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 (in some states a fine and/or imprisonment). The applicant represents that the statements and answers given are true, complete, and accurate to the best of their knowledge and will be relied upon by the insurer. Completion of this application does not bind coverage.

SIGN

SIGNATURE OF APPLICANT

DATE

PRINTED NAME

TITLE

PRODUCER / AGENCY

HEDGE SUBMISSION #