

**SUPPLEMENTARY APPLICATION  
 ERRORS & OMISSIONS LIABILITY INSURANCE**



**ELECTRONIC DATA PROCESSING**

1. Name of Applicant		
2. Attach copies of your standard contracts		
Do they include clauses such as:	Yes	No
Hold harmless/indemnity agreements to the Applicant's benefit	<input type="checkbox"/>	<input type="checkbox"/>
Force majeure	<input type="checkbox"/>	<input type="checkbox"/>
Disclaimer of warranties	<input type="checkbox"/>	<input type="checkbox"/>
Limitation of liabilities	<input type="checkbox"/>	<input type="checkbox"/>
Limitation of liabilities for CONSEQUENTIAL DAMAGES	<input type="checkbox"/>	<input type="checkbox"/>
Conditions of product acceptance	<input type="checkbox"/>	<input type="checkbox"/>
Do you ever use contracts accepting liability for CONSEQUENTIAL DAMAGES?	<input type="checkbox"/>	<input type="checkbox"/>
3. a) What is acceptable downtime for your product/service according to your average customer's requirements?		
<input type="checkbox"/> No downtime <input type="checkbox"/> Less than 1 day <input type="checkbox"/> Less than 2 days <input type="checkbox"/> More than 2 days		
b) What is the worst thing that could happen to your customer's operations if your product/service were to fail or stop working?		
_____		
4. State percentage of work done:		
Conversion of data from source material	_____ %	State percentage of revenues:
Consulting service	_____ %	_____ %
Writing, testing	_____ %	_____ %
Installing computer programs	_____ %	_____ %
Recommending, planning	_____ %	_____ %
Research and development	_____ %	_____ %
Sale of hardware	_____ %	_____ %
Installing hardware	_____ %	_____ %
Others (please specify)	_____ %	_____ %
_____		
5. Any hardware or software installed on mainframe computers? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6. Any mass produced software? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, provide details. _____		
_____		
7. Any design work? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, provide details. _____		
_____		

8. State type of data you handle and explain final end use of service/data handled for each (including but not limited to security controls, manufacturing process control):

	Percentage of Work Done	Percentage of Revenues	Final End Use
Aviation/aerospace	_____ %	_____ %	_____
Engineering	_____ %	_____ %	_____
Scientific	_____ %	_____ %	_____
Marine or Naval	_____ %	_____ %	_____
Medical	_____ %	_____ %	_____
Nuclear	_____ %	_____ %	_____
Pollution/ Environmental	_____ %	_____ %	_____
Other	_____ %	_____ %	_____

9. If yes to following (a), (b) or (c), please attach copy of Quality Control Program.

- (a) Do you keep a record of all computer input data?  Yes  No If yes, for how long: \_\_\_\_\_
- (b) Do you document and test all programs and program changes?  Yes  No
- (c) What safeguards are in effect to prevent inadvertent release of confidential information? \_\_\_\_\_
- (d) Do you have a contingency plan in writing in the event of computer failure?  Yes  No
- (e) Do clients have responsibility for determining the accuracy of results?  Yes  No

10. a) Do you operate a time sharing facility?  Yes  No
- b) Do you have remote terminals?  Yes  No

11. Do you perform or plan to perform work for any bank, financial institution, money lending or finance company, stock broker or mutual fund?  
 Yes  No If yes, provide details.

12. What new products/services are to be released within the next 12 month period?

13. a) Does the Applicant subcontract the rendering of professional services to subcontractors?  Yes  No
- b) If yes, what percentage of the work and what type of work is subcontracted? \_\_\_\_\_
- c) Does the Applicant request proof of insurance from subcontractors?  Yes  No

**DECLARATION**

The undersigned declares that all statements made in the Supplementary Application are true. Signing of this document does not bind the Applicant to complete the insurance, but it is agreed that the Application and Supplementary Application shall be the basis of the contract, should a policy be issued.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title or Position

**Must be signed by a Principal, Partner, Controller, Executive Officer or Director.**