

**SUPPLEMENTARY APPLICATION  
ERRORS & OMISSIONS LIABILITY INSURANCE**

**INSURANCE ADJUSTERS**

1. Name of Applicant																		
2. List all insurance companies for which claims are handled, with the approximate percentage for each:																		
3. State percentage of work done for:  <table style="width:100%; border: none;"> <tr> <td style="width: 80%;">Insurance Companies</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td>Insureds</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td>Others (please specify)</td> <td></td> </tr> <tr> <td>_____</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td>_____</td> <td style="text-align: right;">_____ %</td> </tr> </table>	Insurance Companies	_____ %	Insureds	_____ %	Others (please specify)		_____	_____ %	_____	_____ %								
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_____	_____ %																	
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4. Does Applicant have written settlement authorities? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, please state amount(s): \$ _____																		
5. Does the applicant provide any services other than insurance claims adjusting? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide details: _____																		
6. State percentage of fees for each  <table style="width:100%; border: none;"> <thead> <tr> <th style="text-align: left;">Personal Lines</th> <th style="text-align: left;">Commercial Lines</th> <th style="text-align: left;">Specialties</th> </tr> </thead> <tbody> <tr> <td>Property / Liability    _____ %</td> <td>Property    _____ %</td> <td>Ocean Marine    _____ %</td> </tr> <tr> <td>Automobile    _____ %</td> <td>General Liability    _____ %</td> <td>Errors &amp; Omissions    _____ %</td> </tr> <tr> <td></td> <td>Inland Marine    _____ %</td> <td>Jewellers Blocks    _____ %</td> </tr> <tr> <td>Others</td> <td>Bonds    _____ %</td> <td>Furriers    _____ %</td> </tr> <tr> <td>_____    _____ %</td> <td></td> <td>Aviation    _____ %</td> </tr> </tbody> </table>	Personal Lines	Commercial Lines	Specialties	Property / Liability    _____ %	Property    _____ %	Ocean Marine    _____ %	Automobile    _____ %	General Liability    _____ %	Errors & Omissions    _____ %		Inland Marine    _____ %	Jewellers Blocks    _____ %	Others	Bonds    _____ %	Furriers    _____ %	_____    _____ %		Aviation    _____ %
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<p><b>DECLARATION</b></p> <p>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.</p>  <table style="width:100%; border: none;"> <tr> <td style="width: 50%; border-top: 1px solid black;">Signature</td> <td style="width: 50%; border-top: 1px solid black;">Title or Position</td> </tr> <tr> <td style="border-top: 1px solid black;">Date</td> <td></td> </tr> </table>	Signature	Title or Position	Date															
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