

**SUPPLEMENTARY APPLICATION  
ERRORS & OMISSIONS LIABILITY INSURANCE**

**REAL ESTATE AGENTS**

1. Name of Applicant _____			
2. State percentage of gross receipts in:			
Residential Real Estate	_____ %	Property Valuation	_____ %
Commercial Real Estate	_____ %	Consulting on land assembly / land development	_____ %
Industrial Real Estate	_____ %	Offering financing*	_____ %
Investment Real Estate	_____ %	Selling insurance*	_____ %
Rural Real Estate (including Farms & Resorts)	_____ %	Acting as General Manager for construction projects*	_____ %
Property Management	_____ %		
*If percentage is shown, please explain fully:			
_____			
_____			
_____			
_____			
_____			
_____			
<b>DECLARATION</b>			
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		_____ Title or Position	
_____ Date			