

**SUPPLEMENTARY APPLICATION
ERRORS & OMISSIONS LIABILITY INSURANCE**

SURVEYORS

1. Name of Applicant _____												
2. List provinces in which you perform professional services 												
3. List total number of staff <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Land Surveyor (licensed) _____</td> <td style="width: 33%;">Draftsmen _____</td> </tr> <tr> <td>Fieldmen _____</td> <td>Professional Engineers _____</td> </tr> </table>	Land Surveyor (licensed) _____	Draftsmen _____	Fieldmen _____	Professional Engineers _____								
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5. State percentage of work performed for the following types of clients: <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Municipalities _____ %</td> <td style="width: 33%;">Resource Companies _____ %</td> <td style="width: 33%;">Lawyers _____ %</td> </tr> <tr> <td>Government _____ %</td> <td>Residential _____ %</td> <td>Engineers _____ %</td> </tr> <tr> <td>Commercial _____ %</td> <td>Agricultural _____ %</td> <td>Industrial _____ %</td> </tr> </table>	Municipalities _____ %	Resource Companies _____ %	Lawyers _____ %	Government _____ %	Residential _____ %	Engineers _____ %	Commercial _____ %	Agricultural _____ %	Industrial _____ %			
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<p>DECLARATION</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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