

SPECIALTY E & O PLAN

SPECIALTY ERRORS AND OMISSIONS LIABILITY INSURANCE POLICY APPLICATION INTERIOR DESIGN/DECORATION SUPPLEMENT

1. Name of **Your** firm: _____
2. Please complete the following indicating the approximate percentage of involvement by project type in relation to **Your** total operation:
- _____ % Residential
_____ % Commercial
_____ % Industrial

3. Briefly describe any areas in which **Your** firm specializes:
- _____

4. (a) Do **You** employ any architects or engineers? _____ Yes _____ No.

- (b) Do employed architects or engineers have separate Professional Liability Insurance in force?
_____ Yes _____ No

Please note: Claims from services which can only be performed by a registered architect or engineer will be excluded.

5. Do **Your** services involve the ordering and/or supplying of any furnishings, art work, antiques?
_____ Yes _____ No. If yes, please provide details including a sample contract used with the manufacturer/distributor:

6. Do **You** offer any appraisal services? _____ Yes _____ No. If yes, please provide a narrative description of those services along with a sample appraisal:

THIS INTERIOR DESIGN/DECORATION SUPPLEMENT IS ATTACHED TO AND FORMS A PART OF THE SPECIALTY ERRORS AND OMISSIONS LIABILITY INSURANCE POLICY APPLICATION. IT IS SUBJECT TO THE SAME PROVISIONS CONCERNING REPRESENTATIONS MADE AS IN THE BASIC APPLICATION.

Date

Your Signature/Title

NOTE: THE SIGNATURE MUST BE THAT OF AN ACTIVE OWNER, PARTNER OR EXECUTIVE OFFICER OF YOUR FIRM.