

# SPECIALTY E & O PLAN

## SPECIALTY ERRORS AND OMISSIONS LIABILITY INSURANCE POLICY APPLICATION PUBLIC RELATIONS/PROMOTION/MARKETING FIRMS SUPPLEMENT

1. Name of **Your** firm: \_\_\_\_\_

2. List **Your** major clients: \_\_\_\_\_  
\_\_\_\_\_

3. Please complete the appropriate sections indicating the approximate percentages of **Your** total operation involving: (Must total 100%)

- \_\_\_\_\_ % Marketing Consulting
- \_\_\_\_\_ % Direct Mail design and distribution
- \_\_\_\_\_ % Mailing list brokering
- \_\_\_\_\_ % Mailing list creation and maintenance
- \_\_\_\_\_ % Data Warehousing/Data Processing
- \_\_\_\_\_ % Desk top publishing design/layout
- \_\_\_\_\_ % Graphic Design
- \_\_\_\_\_ % Promotion/Sweepstakes/Contests/Coupon Design
- \_\_\_\_\_ % Promotion/Sweepstakes/Contests/Coupon Administration
- \_\_\_\_\_ % Fulfillment Services
- \_\_\_\_\_ % Commercial Printing
- \_\_\_\_\_ % Catalog Design/Publishing/Distribution
- \_\_\_\_\_ % Advertising Agency Services
- \_\_\_\_\_ % Public Relations Consulting
- \_\_\_\_\_ % Package/Custom Software Development
- \_\_\_\_\_ % Telemarketing
- \_\_\_\_\_ % Investor Relations
- \_\_\_\_\_ % Other (Describe) \_\_\_\_\_

4. Do **You** use subcontractors? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, advise:

(a) For what services: \_\_\_\_\_  
\_\_\_\_\_

(b) Approximate percentage of time subcontractors are utilized: \_\_\_\_\_ %

(c) Do **You** require they maintain E&O insurance? Yes No

(d) Please attach copy of contract used with subcontractors.

5. (a) Are **You** involved in the development or design of copyrighted materials, trademarks, logos, packaging or display design? \_\_\_\_\_ Yes \_\_\_\_\_ No

(b) The total number of trademarks you develop each year \_\_\_\_\_.  
Attach description of **Your** legal review or other procedures used for clearing trademarks, copyrighted material or other intellectual property.

6. Do **You** utilize outside legal counsel for review and/or consultation on personal injury and intellectual property matters? \_\_\_\_\_Yes \_\_\_\_\_No If yes, please advise name of attorney and firm.
7. Do **Your** activities involve set-up and/or management of promotional games, contests, lotteries, sweepstakes, or other games of chance? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please provide details including specific contracts.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Do **Your** contracts always require **Your** client to sign off on all press releases, advertising or promotional materials prior to dissemination? \_\_\_\_\_ Yes \_\_\_\_\_ No

**THIS PUBLIC RELATIONS/PROMOTION/MARKETING FIRMS 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.**