

SPECIALTY E & O PLAN

SPECIALTY ERRORS AND OMISSIONS LIABILITY INSURANCE POLICY APPLICATION PUBLIC RECORD SEARCH SUPPLEMENT

1. Name of **Your** firm: _____

2. Indicate the percentage of work done in each of the following areas:

Flood Plain Certification	_____%	Motor Vehicle Record	_____%
Credit History	_____%	Criminal Record	_____%
Employment Verification	_____%	Other (specify)	_____%
Title Search/Abstract	_____%	_____	

3. Do you perform any services as a licensed insurance agent? _____ Yes _____ No
If yes, provide evidence of current Insurance Agent Errors & Omissions Insurance.

4. List sources of data/information:

1) _____	4) _____	7) _____
2) _____	5) _____	8) _____
3) _____	6) _____	9) _____

5. Do **You** offer an opinion(s) regarding the results of **Your** search(es)? _____ Yes _____ No

6. Attach specimen reports.

THIS PUBLIC RECORD SEARCH 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.