



ADDITIONAL QUESTIONNAIRE PROFESSIONAL LIABILITY/ERRORS AND OMISSIONS

CLAIMS/PUBLIC ADJUSTERS

1. Name of Applicant: _____

2. List all insurers for which claims are handled with approximate percentage of fees for each:

Name of Firm	% of Revenue	Years Engaged	Specialty

3. Do you provide services as a public adjuster? Yes No

If Yes, give details:

4. Do you provide any services other than claims adjusting? Yes No

If Yes, give details:

5. Please indicate approximate percentage of last year's revenue derived from:

Automobile	_____ %	Liability	_____ %
Aviation	_____ %	Marine	_____ %
Bonds	_____ %	Professional Liability	_____ %
Inland Marine	_____ %	Property	_____ %
Jewellers/Furriers Block	_____ %	Other (specify) _____	_____ %

6. Do you manage or provide services to any self-insurance program or group? Yes No

If Yes, give details including the name of the program or group:

7. Do you have the authority to settle claims on behalf of an Insurer(s)? Yes No

If Yes:

(a) what is the maximum settlement authority limit? \$ _____

(b) on behalf of whom do you hold that authority? _____

(c) in what classes of business do you have authority? _____

SIGNED AND DATED this _____ day of _____

Signature