

Robert A Schneider Agency
 5620 Smetata Dr # 350
 Minnetonka, Mn 55343
 612-938-0655

APPLICATION
CONSULTANTS ERRORS & OMISSIONS INSURANCE
CLAIMS MADE POLICY

THIS IS AN APPLICATION FOR A POLICY WITH LIMITS OF LIABILITY WHICH INCLUDE BOTH DAMAGES AND CLAIM EXPENSES. IF THERE ARE ANY QUESTIONS, PLEASE CONSULT WITH YOUR AGENT, BROKER, OR ATTORNEY.

| QUESTIONS | ANSWERS | | | | | | | | | | | | |
|---|---|------------------------------------|-----------------------------|------------------------------------|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| 1. Full name and address of Applicant. | 1. | | | | | | | | | | | | |
| 2. Address(es) of Branch Office(s). | 2. | | | | | | | | | | | | |
| 3. Date Established. | 3. | | | | | | | | | | | | |
| 4. The Applicant is: | 4. <input type="checkbox"/> Individual; <input type="checkbox"/> Partnership; <input type="checkbox"/> Corporation; <input type="checkbox"/> _____ . | | | | | | | | | | | | |
| 5. Furnish the number of Partners and Staff: a) Principals/Partners; b) Professional Staff; c) Other Employees. | 5. Full Time Part Time a) _____ _____ b) _____ _____ c) _____ _____ | | | | | | | | | | | | |
| 6. a) Furnish the following information on all principals and key employees: | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;"><u>Full Name</u></th> <th style="width: 15%;"><u>No. Years Experience</u></th> <th style="width: 25%;"><u>Professional Qualifications</u></th> <th style="width: 25%;"><u>How Long a Principal</u></th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table> | | <u>Full Name</u> | <u>No. Years Experience</u> | <u>Professional Qualifications</u> | <u>How Long a Principal</u> | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| <u>Full Name</u> | <u>No. Years Experience</u> | <u>Professional Qualifications</u> | <u>How Long a Principal</u> | | | | | | | | | | |
| _____ | _____ | _____ | _____ | | | | | | | | | | |
| _____ | _____ | _____ | _____ | | | | | | | | | | |
| b) Attach resumes of the principals and key employees. | | | | | | | | | | | | | |
| 7. a) Furnish estimated gross receipts for the NEXT fiscal year; | 7. a) \$ _____ | | | | | | | | | | | | |
| b) Furnish gross receipts for the current year and the past TWO years. | b) 19__ \$ _____ 19__ \$ _____ 19__ \$ _____ | | | | | | | | | | | | |