

SUPPLEMENTAL APPLICATION

1. Name of applicant or insured: _

Insurance Group

2. Please indicate the percentage of the applicant's total operations from the following services, total must equal 100%:

SERVICE	PERCENTAGE OF OPERATIONS
Architectural drawing, house plans, landscape design	%
Book, magazine, newspaper or other publication	%
Coupons	%
Films or commercials	%
Medical charts or graphs	%
Package design	%
Promotions	%
Prototypes	%
Sweepstakes	%
Webpage design	%
Mobile applications	%
Digital advertising	%
Other (please describe):	%

3.	3. Do the applicant's activities involve the design of logos or trademarks?		🗆 No
4.	4. Does the applicant require the client to sign off or approve in writing each phase of the design and development process?		□ No
5.	5. Does the applicant obtain releases for all content provided by third parties (if applicable)?		🗆 No
6.			□ No
7.	Which of the following does the applicant implement:		
	a. Customer sign off on deliverables?	□ Yes	□ No
	b. Contracts with indemnification clauses?	□ Yes	□ No
	c. Formal change management procedures?	🗆 Yes	🗆 No
	d. Legal review of contracts?	□ Yes	□ No
8.			□ No
9.	Does the applicant have a process in place to screen materials for potential libel, slander or advertising injury?	□ Yes	□ No

SIGNATURE IN FULL:	DATE:
PRINT NAME:	
ALL QUESTIONS MUST BE ANSWER	RED AND THE APPLICATION MUST BE SIGNED AND DATED
Agency Name and Address:	
Person Submitting Application:	
Telephone Number:	Email: