

## Printers supplemental application

### GENERAL APPLICANT INFORMATION

Applicant Name: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Policy Effective Date: \_\_\_\_\_ Website Address: \_\_\_\_\_

### Processes

1. Which process/machinery does your company perform or use? (Check all that apply)
  - ☐ Digital Printing ☐ Flexography ☐ Gravure ☐ Letterpress ☐ Lithography ☐ Pad Printing ☐ Screen printing ☐ Waterless Offset
  - ☐ Thermography ☐ Xerography ☐ Bindery ☐ Quick Printing or copy shop ☐ Cylinder or Platemaking
  - ☐ Publishing of books, periodicals or newspapers ☐ Pre-Press for others ☐ Post-Press for others under contract, including bindery
  - ☐ Printing on substrate for others under contract other than paper ☐ Printing of labels for drugs, pharmaceuticals or medical products
2. Describe any other processes/services used by your company (e.g. website development, microsites, automated emails):  
\_\_\_\_\_
3. Which best describes your direct mail operations?
  - ☐ None ☐ Logistical operations only, including printing, finishing, sorting and mailing
  - ☐ Data Processing operations and/or produces or certifies mailing lists
4. Which best describes your mailing fulfillment operations?
  - ☐ None ☐ Mailing fulfilment is less than 20% of account's revenue
  - ☐ Mailing fulfillment is more than 20% of account's revenue

### Special Hazards & Controls

1. Special Hazards (Check all that apply)
  - a. Flammable/Combustible Liquids
    - Gallons stored \_\_\_\_\_ ☐ No Special Storage Requirements Apply
    - ☐ UL listed flammable liquid storage cabinets ☐ Flammable liquid storage room \_\_\_\_\_ sq. ft.
    - ☐ Other (please describe): \_\_\_\_\_
  - b. Which is the predominant kind of ink you use?
    - ☐ Water-based ☐ Soy-based ☐ Electron-beam or Ultraviolet cured ☐ Solvent-based
    - ☐ Other \_\_\_\_\_
  - c. How do you prevent an accumulation of ink and solvent soaked rags in your facility?
    - ☐ Rags are collected in a metal container ☐ Rags are collected in a non-metal container
    - ☐ Container is emptied daily ☐ Container is emptied less frequently
  - d. Paper Storage
    - Paper weight: ☐ Light ☐ Medium ☐ Heavy ☐ Extra Heavy
    - Rack storage (sheets): Storage height \_\_\_\_\_ ft. ☐ Open wire mesh shelving ☐ Solid shelving
    - Rolled paper storage: Storage height \_\_\_\_\_ ft. ☐ Rolls are banded ☐ Rolls are wrapped w/craft paper

e. Combustible Dusts

Do operations produce combustible dusts?

☐ Yes ☐ No

If yes, please describe operation: \_\_\_\_\_

If yes, how is combustible dust controlled?

☐ Dust collection system ☐ System vents outside building ☐ Spark arrestors in ducts

☐ Sprinklers ☐ Housekeeping/Employee training.

2. Private Protection:

Location Number: \_\_\_\_\_ Hours in operation per day \_\_\_\_\_ Days in operation per week \_\_\_\_\_

a. ☐ Automatic Sprinkler System

☐ Wet ☐ Dry ☐ Other Percentage of facility sprinklered \_\_\_\_\_ %

If coverage is less than 100% describe non-covered areas \_\_\_\_\_

b. ☐ Fire Alarms

☐ Heat or smoke detection ☐ Sprinkler water flow and valve tamper

☐ Local monitoring ☐ Central Station (constantly monitored)

Percentage of facility covered by alarms \_\_\_\_\_ %

If coverage is less than 100% describe non-covered areas \_\_\_\_\_

c. ☐ Security Alarms

☐ Exterior access points ☐ Motion detection ☐ Key card access ☐ CCTV

☐ Local monitoring ☐ Central Station (constantly monitored)

d. ☐ Other, please describe \_\_\_\_\_

**Facility and Equipment—General Information**

1. Property replacement cost estimate (Manufacturing facilities)

| Loc# | Street Address | City | Building Est | Machinery and Equip Est | Stock Est | Business Income Est |
|------|----------------|------|--------------|-------------------------|-----------|---------------------|
|      |                |      |              |                         |           |                     |
|      |                |      |              |                         |           |                     |
|      |                |      |              |                         |           |                     |

2. Building Updates—year of most recent updates

Roof \_\_\_\_\_ Electrical \_\_\_\_\_ Plumbing \_\_\_\_\_ HVAC \_\_\_\_\_

3. Which best describes the age of most of your presses:

☐ Presses were bought or rebuilt within 10 years ☐ Presses were bought or rebuilt within 20 years

☐ Presses are older than 20 years

Is there any foreign sourced machinery that requires long lead times for replacement?

☐ Yes ☐ No

If yes, please list machines/country of origin/est lead time \_\_\_\_\_

## PRINTERS ERRORS & OMISSION COVERAGE

### General Information

| Coverages Desired  | Limits of Liability  | Deductible (per claim)            |
|--|--|-----------------------------------|
| <input type="checkbox"/> Printers E&O                        | <input type="checkbox"/> \$300,000 each loss/\$600,000 Aggregate     | <input type="checkbox"/> \$1,000  |
| <input type="checkbox"/> Cost to Correct Endorsement         | <input type="checkbox"/> \$500,000 each loss/\$1,000,000 Aggregate   | <input type="checkbox"/> \$5,000  |
| <input type="checkbox"/> Direct Mailing Services Endorsement | <input type="checkbox"/> \$1,000,000 each loss/\$2,000,000 Aggregate | <input type="checkbox"/> \$10,000 |

1. Gross sales for prior 12 months: \_\_\_\_\_ Estimated sales for next 12 months: \_\_\_\_\_

2. Place a check next to the statements that describe the extent of your graphic design services.

- ☐ Most work is done to customers specifications with little or no design by the account
- ☐ Specifications are primarily done by customer with suggestions from the account
- ☐ Full prepress graphic design services are provided on most jobs
- ☐ Graphic design services are provided to others

3. Place a check next to any of the quality control procedures the applicant has in place:

- ☐ Customer proofreads final draft
- ☐ Sign-off on final draft required from customer prior to printing
- ☐ All jobs checked for appearance and accuracy before released to customer
- ☐ Production documents kept up-to-date
- ☐ Customers retain copy of material to be printed
- ☐ Changes in specifications are made in writing
- ☐ Hold harmless agreement included in contract (attach a copy)

4. Indicate percentage of total sales for the following four categories of printed materials

| Category A: _____ %   | Category B: _____ %   | Category C: _____ %  | Category D: _____ %   |
|---|---|--|---|
| <ul style="list-style-type: none"><li>• Bulletins</li><li>• Envelopes</li><li>• Folding paperboard boxes</li><li>• Newsletters</li><li>• Stationery</li></ul> | <ul style="list-style-type: none"><li>• Announcements/Invitations</li><li>• Blueprints</li><li>• Book Printing</li><li>• Booklet / Manuals</li><li>• Brochures</li><li>• Business Forms</li><li>• Calendars</li><li>• Data Sheets and Binders</li><li>• Decalcomanias Press Kits</li><li>• Die Cutting</li><li>• Embossing (matchbooks, mugs, napkins, t-shirts)</li><li>• Engraving</li><li>• Film Processing</li><li>• Greeting Cards / Postcards</li><li>• Letters</li><li>• Maps</li><li>• Menus</li><li>• Paper Packaging</li><li>• Presentation Folders</li><li>• Specialty Items</li><li>• Wallpaper</li></ul> | <ul style="list-style-type: none"><li>• Admission Tickets for Concerts, Sporting Events, etc.</li><li>• Advertising or promotional materials</li><li>• Bar codes, including UPC (Universal Product Code) or Optical Character Recognition</li><li>• Catalogues</li><li>• Labels with instructions or warnings</li><li>• Labels, stickers and wrapping tags</li><li>• News Supplements</li><li>• Periodicals</li><li>• Posters or Signs</li><li>• Products with a long product life</li><li>• Playing Cards</li><li>• Raffle Tickets</li><li>• Telephone Directories (except local)</li><li>• Trade Show materials</li><li>• Transportation tickets for air, train, boat or bus</li></ul> | <ul style="list-style-type: none"><li>• Direct Mail data processing</li><li>• Financial documents; annual and quarterly reports, bank checks, bonds, coupons, vouchers, negotiable instruments, money orders, drafts, travelers checks, financial statements, stock certificates, stock proxies or securities</li><li>• Legal documents: licenses, corporate legal stock, certificates of birth or death</li><li>• Lottery tickets (except local raffles)</li><li>• Reproduction or restoration of valuable or rare documents</li><li>• Stamps</li><li>• Web site design or development</li></ul> |
| <b>SERVICES:</b> 1. Direct Mail Data Processing: _____ %    2. Mailing Fulfillment: _____ %   |   |  |   |

5. Any changes in operation anticipated? ☐ Yes ☐ No
6. Any work subcontracted? ☐ Yes ☐ No  
If Yes, percent of work subcontracted? \_\_\_\_\_ %
7. Are certificates of insurance required from subcontractors? ☐ Yes ☐ No
8. Are hold harmless agreements required from subcontractors? ☐ Yes ☐ No
9. Has this coverage been declined, cancelled or non-renewed during the past 3 years? ☐ Yes ☐ No
10. Have you ever been sued or had to pay for the improper performance of any printing related services provided by you or your subcontractors? ☐ Yes ☐ No
11. Do you know of any pending losses which may result in claim or suit? ☐ Yes ☐ No

**Remarks** (Explain all "Yes" responses above):

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#### Present Carrier and Loss Information

| Policy Number and Expiration | Present Carrier | Premium | Date and Amount of Loss | Description and Cause of Loss |
|------------------------------|-----------------|---------|-------------------------|-------------------------------|
|                              |                 |         |                         |                               |
|                              |                 |         |                         |                               |
|                              |                 |         |                         |                               |
|                              |                 |         |                         |                               |
|                              |                 |         |                         |                               |
|                              |                 |         |                         |                               |

#### Mailing Fulfillment

1. Place a check next to any products for which the account fills orders:
- ☐ Drugs, health or natural food products, vitamins or health supplements
  - ☐ Tobacco/Cannabis products
  - ☐ Firearms or ammunition
  - ☐ Prescription drugs, medicines, or medical supplies
  - ☐ Sporting goods, exercise machinery, bows, arrows, skis or helmets
  - ☐ Food or beverage products
  - ☐ Cosmetics or beauty aids

## **DECLARATION AND SIGNATURE**

### **Authorized Entity Representative Designation**

The person named herein is authorized and designated to give and receive any and all notices on behalf of the entity and all Insureds from the entity or their authorized representative(s) concerning this insurance.

**Named Individual:** \_\_\_\_\_

**Title/Position:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **Attestation**

The authorized signer of this application represents to the best of his/her knowledge and belief that the statements and information set forth herein are true and include all material information. The authorized signer also represents that any fact, circumstance or situation indicating the probability of a claim or legal action now known to any entity official or employee has been declared, and it is agreed by all concerned that the omission of such information shall exclude any such claim or action from coverage under the insurance being applied for. Signing of this application does not bind The Hanover Insurance Group, Inc. to offer, nor the authorized signer to accept insurance, but it is agreed this application and any attachments hereto shall be the basis of the insurance and will be incorporated by reference and made part of the policy should a policy be issued.

**Signature of Authorized Entity Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**The Hanover Insurance Company**  
440 Lincoln Street, Worcester, MA 01653

**hanover.com**  
The Agency Place (TAP)—<https://tap.hanover.com>

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