

REAL ESTATE APPRAISER ERRORS & OMISSIONS RENEWAL APPLICATION

Hanover Insurance / Norman-Spencer Agency

SECTION A: APPLICANT INFORMATION

1. Full Legal Name of Applicant Firm:

2. DBA / Trade Name(s) if different:

3. Business Address:

Street:

City:

State:

ZIP:

4. Contact Information:

Phone:

Email:

Website:

Entity Type: Sole Prop LLC Corporation Partnership Other:

Have there been any ownership changes since last application? Yes No

If yes, explain:

SECTION B: PERSONNEL & STAFF COUNT

5. Number of individuals in each category working for your firm:

Licensed/Certified Appraisers (including yourself):

Independent Subcontractors WITHOUT their own E&O:

Independent Contractors WITH their own E&O:

Trainees/Apprentices:

Office/Admin Support Staff:

* Attach copies of E&O declaration pages for all independent contractors with their own coverage

PRODUCTION DATA

6. Three Highest Value Appraisals in Past 12 Months:

Client Name	Appraised Value	Property Description
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7. Appraisal Production by Category:

Category	Last 12 Mo. Count	Last 12 Mo. Revenue	Projected Next 12 Mo.
Single Family (1-4 Units)			
Multi-Family (5+ Units)			
Vacant Land			
New Construction			
Condos/Townhomes			
Commercial/Industrial			
Farm/Agricultural			
REO/Foreclosure			
Relocation			
Other			
TOTALS:			

SECTION C: CLAIMS & DISCIPLINARY HISTORY

8. Since your last application, have any claims or suits been made against you or any person proposed for coverage? Yes No

9. Are you aware of any incident that could result in a claim against you? Yes No

10. Have you or anyone proposed for coverage had any license disciplinary action, revocation, suspension, or other regulatory action? Yes No

If YES to any of the above, attach a detailed explanation.

SECTION D: ADDITIONAL QUESTIONS

- | | | |
|---|-----|----|
| 11. Do you appraise properties in which you have an ownership interest? | Yes | No |
| 12. Do you appraise for clients who are family members or close associates? | Yes | No |
| 13. Are your computer systems protected with firewall and antivirus software? | Yes | No |
| 14. Do you use encrypted email for transmitting confidential client information? | Yes | No |
| 15. Do you maintain backup copies of appraisal files? | Yes | No |

SECTION E: COVERAGE SELECTION

16. Requested Limits of Liability:

\$300,000 / \$300,000 \$500,000 / \$500,000 \$1,000,000 / \$1,000,000

17. Requested Deductible:

\$1,000 \$2,500 \$5,000 \$10,000

18. List all states where you hold an appraiser license:

19. Primary License Number: _____ **Expiration:** _____

CERTIFICATION & SIGNATURE

By signing below, I certify that the statements made in this application are true and complete to the best of my knowledge. I understand that any material misrepresentation or omission may void coverage or result in denial of claims. I authorize the insurer to obtain additional information as necessary to evaluate this application and any claims. I agree that this application shall be the basis of the contract should a policy be issued.

Signature of Owner/Principal: _____

Date: _____

Print Name: _____

Title: _____

*Return completed application to your insurance agent or broker
Questions? Contact Norman-Spencer Agency at (800) 555-1234*