



**PetPro Supplemental Questionnaire
D&O, EPLI, ERISA, CRIME**

Risk Name: _____ **Date Business Started:** _____

Total Assets \$ _____ Total Liabilities \$ _____

Total Revenues/Contributions \$ _____ Net Income or Loss \$ _____

Cashflow from Operations \$ _____

COVERAGE TYPE AND LIMITS:

D&O Limit \$ _____ Retention \$ _____ EPLI Limit \$ _____ Retention \$ _____

ERISA Limit \$ _____ Retention \$ _____ Crime Limit \$ _____ Retention \$ _____

Total Number of Employees: _____ Full Time _____ Part Time _____ Unionized: _____

GENERAL INFORMATION

Is the applicant a Not-For-Profit Non-Taxable organization under the US IRS or state code? Yes No

Does this risk provide childcare services? Yes No

Has the applicant or its subsidiaries had any mergers, acquisitions or consolidations in the past 24 months? Yes No

Are there any plans for a future merger or acquisition in the next 12 months? Yes No

Has any carrier refused, canceled or non-renewed D&O or EPLI, ERISA or CRIME coverage? Yes No

Have there been any claims, suits, investigations or actions against the applicant regarding:

D&O and Private Company Liability Yes No N/A

Employment Practices Liability Yes No N/A

Does the applicant know of any act, error or omission which may give rise to a claim or suit under the proposed policy with regard to:

D&O and Private Company Liability Yes No

Employment Practices Liability Yes No

Current Insurance Details:

D&O Limit \$ _____ Retention \$ _____ Policy Period _____ Carrier _____

EPLI Limit \$ _____ Retention \$ _____ Policy Period _____ Carrier _____

ERISA Limit \$ _____ Retention \$ _____ Policy Period _____ Carrier _____

Crime Limit \$ _____ Retention \$ _____ Policy Period _____ Carrier _____

EMPLOYMENT PRACTICES LIABILITY (answer only if applicable)

Does the applicant have a human resource department? Yes No

Does the applicant distribute an employee handbook or maintain an employee intranet informing employees of their employment rights? Yes No

Is there a formalized process in place for reporting complaints/harassment? Yes No

Is the applicant currently undergoing or contemplating any employee layoffs or early retirements in the next 12 months? Yes No



DIRECTORS & OFFICERS (answer only if applicable)

Are Board members elected? Yes No Does the board hold meeting more than three times per year? Yes No

Does the applicant participate in a risk management program? Yes No

Has the applicant or its subsidiaries had or will be having any non-taxable bond issuance? Yes No

Does the applicant have any of the following committees: Audit Compensation Nominating

ERISA (Pension Trust Liability/Fiduciary) (answer only if applicable)

In the past 24 months has there been any amendment that has resulted in any reductions of benefits? (including but not limited to an increase in participant's share of cost) Yes No

In the next 12 months is there any anticipated amendment that is expected to result in any reduction of benefits? (including but not limited to an increase in participant's share of cost) Yes No

Has any plan for which coverage is requested been (sold) or terminated, or is any such transaction contemplated? Yes No

CRIME (answer only if applicable)

Has the Applicant experienced any of the following losses in the past 6 years?

Employee Theft Yes No

Forgery or Alteration Yes No

Theft of Monies/Securities Yes No

Other crime or fidelity loss Yes No

Are all checks countersigned? Yes No

Are bank accounts reconciled monthly? Yes No

Are those who reconcile bank accounts prohibited from handling deposits in the accounts they reconcile? Yes No

Are those who reconcile bank accounts prohibited from signing checks? Yes No

How often are audits of cash and accounts performed? _____

Are there any sponsored employee welfare or retirement plans required to be bonded by ERISA? Yes No

Producer's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____