

SUPPLEMENTARY APPLICATION

Errors & Omissions/Professional Liability Insurance

Accountants/Bookkeepers

THIS SUPPLEMENTARY APPLICATION SHALL FORM PART OF ANY ERRORS & OMISSIONS OR PROFESSIONAL LIABILITY POLICY WHICH MAY BE ISSUED BY ROYAL & SUN ALLIANCE INSURANCE COMPANY OF CANADA TO THE PROPOSED APPLICANT.

1. THE APPLICANT

Name of Applicant: _____

2. OPERATIONS

A. Please indicate the approximate percentage of last year's revenue derived from:

| | | |
|---|-------|---|
| a) Bookkeeping services | _____ | % |
| b) Audit engagements | _____ | % |
| c) Review engagements | _____ | % |
| d) Non-review preparation of financial statements | _____ | % |
| e) Tax return preparation: | _____ | % |
| Personal: | % | |
| Corporate: | % | |
| f) Estate planning | _____ | % |
| g) Liquidation or receivership | _____ | % |
| h) Mergers/Acquisitions/Divestitures | _____ | % |
| i) Business Valuations | _____ | % |
| j) Investment Management | _____ | % |
| k) Investment Management | _____ | % |
| l) Management consulting | _____ | % |
| m) Estate Planning | _____ | % |

B. Financial Interests: If "Yes" please provide details

| | | | |
|--|------------------------------|-----------------------------|-------|
| a) Does the applicant have financial interest in any client? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| b) Do any clients have a financial interest in the Applicant's firm? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| c) Does the Applicant enter into "Joint Ventures" with clients? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| d) Does the Applicant enter into "Joint Ventures" with other firms? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |

3. SIGNATURE

Date: _____ * Signed: _____

Corporation: _____ Name & Title (please print): _____

***Please Note: The application must be signed by a Principal, Partner or Executive Officer**