

SUPPLEMENTARY APPLICATION ERRORS & OMISSIONS LIABILITY INSURANCE

SURVEYORS

1.	Name of Applicant									
2.	List provinces in which you perform professional services									
3.	List total number of staff									
	Land Surveyor (licensed)	Draftsmen								
	Fieldmen	Professional Engineers								
4.	State percentage of work done:									
	Seismics		%	Construction Layouts				%		
	Geocletic		%	Oil / Mining				%		
	Mapping		%	Mortgage Cert.				%		
	Engineering Surveys		%	Legal Surveys				%		
	Marine Surveys		%	Concrete Testing				%		
	Others (please specify)		%							
									_	
State percentage of work performed for the following types of clients:										
	Municipalities	%	Resource Cor	mpanies		_ %	Lawyers		%	
	Government	%	Residential			_ %	Engineers		%	
	Commercial	%	Agricultural			_%	Industrial		%	
DECLARATION										
The undersigned declares that all statements made in the Supplementary Application are true. Signing of this document does not bind the Applicant to complete the insurance, but it is agreed that the Application and Supplementary Application shall be the basis of the contract, should a policy be issued.										
_	Signature				Title or Position					
Da	ite									