Errors & Omissions Application

Canada

1. Please provide the following details (including all trading names and subsidiaries):

|  |  |
| --- | --- |
| Name: | Date of establishment: |
| Address |  |
| Website address: |

1. Please supply details of all principals, directors, partners:

|  |  |  |
| --- | --- | --- |
| Name: | Qualifications: | How long with the company? |
|  |  |  |
|  |  |  |
|  |  |  |

1. Please complete the following:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Canada** | **USA** | **Rest of World** | **Total** |
| Total Turnover / Fees in last financial year |  $ |  $ |  $ | $ |
| Estimated Turnover / Fees for next financial year |  $ |  $ |  $ | $ |
| Largest Fee from any one client |  $ |  $ |  $ | $ |

|  |
| --- |
| 1. Split of activities in the last complete financial year:
 |
|  |  % |  |
|  |  % |  |
|  |  % |  |
|  |  % |  |
| **Total**  |  **100%** |  |

|  |  |
| --- | --- |
| 1. Please give details of your three largest contracts in the last five financial years (give details of current projects if new start-up):
 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Year** | **Client Name** | **Industry of Client** | **Nature of Contract** | **Contract Value** |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
| 1. For what limits of indemnity are quotations required?
 |  $ |
| 1. In respect of any of the risks to which this application relates:
 |
| 1. Has any claim been made (whether successful or not) against you, any predecessor, any past or present principals, directors, partners?
 | 🞏 Yes 🞏 No |
| 1. Has any loss been suffered by you or any predecessor as a result of the dishonesty or malice of any past or present principals, directors, partners, employees or self-employed person?
 | 🞏 Yes 🞏 No |
| 1. Are you aware of any circumstance which is likely give rise to a claim or loss against you, any predecessor or any past or present principals, directors, partners?
 | 🞏 Yes 🞏 No |
|

|  |  |
| --- | --- |
| 1. Are you aware of any shortcoming in your work for a client which is likely to give rise to a claim against you?
 |  |

If **YES** to any of the above, please provide details: | 🞏 Yes 🞏 No |
| Date of claim/loss: | Brief details of each claim/loss: | Total cost of claim/loss paid | Estimated total cost of claim/loss: |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Declaration

On behalf of the Applicant/s, I/we declare that, after full enquiry, the contents of this application are true and that I/we have not misstated, omitted or suppressed any material fact or information. If there is any material alteration to the facts and information which I/we have provided or any new material matter arises before the completion of the contract of insurance, I/we undertake to inform the Insurer.

## Signature of Principal / Director / Partner: ­­­­­­­

Date: