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SPECIALTY E&O PLAN

**SPECIALTY ERRORS AND OMISSIONS LIABILITY INSURANCE POLICY APPLICATION
GRAPHIC DESIGNER SUPPLEMENT**

1. Name of Your firm _____

2. Please indicate the percentages of Your total operations involving: (Must total 100%)

- _____ % Book or Magazine Illustrations
- _____ % Animated Films or Commercials
- _____ % Landscape Design
- _____ % Medical Charts or Graphs
- _____ % Architectural Drawings or House Plans
- _____ % Prototypes
- _____ % Other (Describe) _____

Total 100%

3. Do Your services require approval by a licensed architect or engineer? Yes No

4. Do You design logos or trademarks? Yes No

If yes, please advise:

(a) Number of logos/trademarks developed per year _____

(b) Description of Your legal review procedures used for clearing trademarks/copyrights

5. Do You require your clients to approve proof copies? Yes No

If yes, is approval given in writing? Yes No

THIS GRAPHIC DESIGNER SUPPLEMENT IS ATTACHED TO AND FORMS A PART OF THE SPECIALTY ERRORS AND OMISSIONS LIABILITY INSURANCE POLICY APPLICATION. IT IS SUBJECT TO THE SAME PROVISIONS CONCERNING REPRESENTATIONS MADE AS IN THE BASIC APPLICATION.

Date

Your Signature/Title

NOTE: THE SIGNATURE MUST BE THAT OF AN ACTIVE OWNER, PARTNER OR EXECUTIVE OFFICER OF YOUR FIRM.