



ARCH SPECIALTY INSURANCE COMPANY
(A Missouri Corporation)

ARCH EXPRESS MISCELLANEOUS PRO[®]
ERRORS AND OMISSIONS LIABILITY POLICY SUPPLEMENTAL APPLICATION
FIELD INSPECTION SERVICES

Instructions for Completing This Supplemental Application

This Supplemental Application is in addition to the Policy Application. Please read this Supplemental Application carefully, fully answer all questions, and submit all requested information. Attach additional pages if more space is required to answer a question or respond to any information request. As used herein, "Applicant" means the Organization specified in item 1 below.

1. Name of Applicant (Named Organization): _____

2. Please provide a breakdown of the % of revenue for services for each category:
- a. Residential: _____
 - b. Commercial: _____
 - c. Other: _____

If "Other", please provide details:

3. Please provide a breakdown of the % of revenue for services performed for each client:
- a. Real Estate Agents & Brokers _____
 - b. Banks _____
 - c. Insurance Companies _____
 - d. Individuals _____
 - e. Other _____

If "Other", please provide an explanation as to who services are being provided for:

4. Does the Applicant take photographs during inspections? Yes No N/A

If No or N/A please provide an explanation:

5. Does the Applicant use pre-inspection agreements/contracts 100% of the time? Yes No

6. Does the Applicant offer any guarantees or warranties? Yes No

If Yes please explain:

7. Does the Applicant provide any of the following? Yes No

Home Inspections

Termite Inspections

Lead Inspections

Mold Inspections

Radon Inspections

8. Number of Inspections performed annually (if this is a new venture, please provide an estimate): _____

Date: _____

Signature: _____

Title: _____
(CEO, President or Principal)