



# Specified Professions Professional Liability Product

## INTERIOR/EXHIBIT/LIGHTING DESIGNERS SUPPLEMENTAL

Please fill out the General Information section, along with the section(s) you are requesting coverage.

1. Please indicate the percentage of Applicant's current 12 month Gross Receipts derived from the following. If the Applicant is newly established, please advise best estimates. Advise details next to each item which may help in understanding Applicant's operations.

Residential clients	_____ %	_____
Commercial clients	_____ %	_____
Other (specify) _____	% _____	_____
<b>Total</b>	<b>100%</b>	

2. Does the Applicant: *(Please provide details to all "Yes" answers below).*

	Yes	No
Prepare, review or approve architectural, engineering, or construction plans, designs, maps, opinions, estimates, or specifications?	<input type="checkbox"/>	<input type="checkbox"/>
Design, review, or approve work on load bearing walls?	<input type="checkbox"/>	<input type="checkbox"/>
Perform or subcontract construction, electrical or installation contracting?	<input type="checkbox"/>	<input type="checkbox"/>
Perform any work for clients without written formal client approval?	<input type="checkbox"/>	<input type="checkbox"/>
Perform appraisals or any services other than as an interior, exhibit or lighting designer?	<input type="checkbox"/>	<input type="checkbox"/>
_____		
_____		
_____		

3. Describe the procedures followed by the Applicant to ensure compliance with all applicable federal, state, and local regulations governing interior design work.

\_\_\_\_\_  
\_\_\_\_\_

THIS INTERIOR / EXHIBIT/ LIGHTING DESIGNERS SUPPLEMENTAL APPLICATION IS ATTACHED TO AND FORMS PART OF THE PROFESSIONAL LIABILITY APPLICATION. THIS SUPPLEMENTAL APPLICATION IS SUBJECT TO THE SAME PROVISIONS CONCERNING REPRESENTATIONS MADE IN THE BASIC APPLICATION.

_____	_____	_____
SIGNATURE	TITLE	DATE