

COMPUTER/ELECTRONIC DATA PROCESSING SUPPLEMENTAL APPLICATION

1. Please complete the appropriate sections indicating the approximate percentages of your total operation:

Electronic Data Processing	_____ %	EDP Consulting	_____ %
Custom Software Development	_____ %	Time-sharing	_____ %
Packaged Software Development	_____ %	E-Commerce	_____ %
Sale of Software for others	_____ %	Computer Security	_____ %
Sale of Hardware for others	_____ %	Website Design	_____ %
System Analysis/Design	_____ %	Website Hosting	_____ %
Other (Describe: _____)	_____ %		

2. List of major software applications (i.e., inventory control, payroll, fund transfer, engineering, educational, etc.)

3. Is the applicant an Internet Service Provider and/or does it provide any internet access, online publishing, and/or services as a web portal, web host, web search engine, e-mail service, chat room, online database or bulletin board?

If YES please provide details on a separate sheet and percentage of receipts.

() YES () NO % Receipts _____

4. Does the applicant provide any consulting services which enable or affect any of the following:

- CAD/CAM design or control, robotics or process control of industrial equipment? () YES () NO % Receipts _____

- Mechanical, electrical, chemical, civil or architectural design or engineering? () YES () NO % Receipts _____

- Fund transfers or financial transactions? () YES () NO % Receipts _____

- Aircraft, air-ground equipment, military defense and/or weaponry of any kind? () YES () NO % Receipts _____

- Medical, dental or healthcare diagnosis, monitoring or treatment? () YES () NO % Receipts _____

- 911 or other emergency response and/or dispatch? () YES () NO % Receipts _____

- Energy, power plant, utility or pollution monitoring, supply or distribution? () YES () NO % Receipts _____

- Computer security services intended to protect financial assets or privileged government information not intended for public usage/consumption? () YES () NO % Receipts _____

- Financial trading platforms? () YES () NO % Receipts _____

It is understood and agreed that this supplemental application shall become a part of the application for Professional Liability Errors & Omissions Insurance.

Date

Name of Applicant

Signature of person authorized
to execute on behalf of the Applicant

WORLD-WIDE WEB ADDRESS