



Servicing/Processing Program Supplement

(Required for all OnePac policies written in the Servicing/Processing Program)
(If any information varies by building or premises, please use the "Notes" section to provide details)

Applicant's Name:	Agency Name:
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General Eligibility Questions – All Applicants

Is the applicant in full compliance with all life safety requirements and applicable building ordinances and laws?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does applicant store any chemicals, explosives, flammables, fuels or solvents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, are they stored in approved containers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is security provided at any building? If yes, check all that apply:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Security Guard <input type="checkbox"/> Guard Dog <input type="checkbox"/> Other <input type="checkbox"/> (describe type in "Notes" section)	

General Underwriting Information – All Applicants

Does applicant own premises or conduct operations not described in this application? If yes, give details in "Notes" section.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have there been any operations sold, acquired or discontinued in the last five years? If yes, give details in "Notes" section.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has any policy been declined, canceled or non-renewed during the prior three years? If yes, give details in "Notes" section.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have there been any bankruptcies, tax or credit liens against the applicant in the past five years? If yes, give details in "Notes" section.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant been convicted of arson or any other crime in the past five years? If yes, give details in "Notes" section.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant have any past, present or discontinued operations involving storing, treating, discharging, applying, disposing or transporting of hazardous materials? If yes, give details in "Notes" section.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is any building located less than one mile from the coast (ocean, gulf or bay)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant ever been fined by any federal, state or local governmental agency or entity related to any past or current business operations?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Eligibility Questions – All Servicing/Processing Classifications

Do any buildings contain any of the following occupancies: bars, lounges, taverns; electroplating; welding; woodworking operations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Underwriting Information – All Servicing/Processing Classifications

Is this business conducted from an owned condominium unit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a restaurant occupancy at any building?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Underwriting Information – Specific Servicing/Processing Classifications

Locksmiths – Are the applicant's employees bonded? <input type="checkbox"/> Yes <input type="checkbox"/> No Does the applicant design building security systems? <input type="checkbox"/> Yes <input type="checkbox"/> No
Pet Training – Does the applicant provide obedience/house breaking training and/or specialized training such as attack/guard dogs, police work, sight or hearing impaired guide assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No
Theaters—NOC (Not for Profit) – Does the applicant rent facilities to outside organizations? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, does the applicant obtain Hold Harmless Agreements and Certificates of Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No
Veterinarians – Does the applicant operate a humane society, animal shelter and/or animal research laboratory? <input type="checkbox"/> Yes <input type="checkbox"/> No Does the applicant specialize in race or show animals, attack or patrol dogs, zoo and/or other unusually valuable exotic animals? <input type="checkbox"/> Yes <input type="checkbox"/> No
Barber Shops; Beauty Parlors and Hair Styling Salons – Are services provided in the applicant's private residence? <input type="checkbox"/> Yes <input type="checkbox"/> No Are all barbers/cosmetologists licensed as required by state law? <input type="checkbox"/> Yes <input type="checkbox"/> No
Beauty Parlors and Hair Styling Salons – Does the applicant perform hair transplants or implants, chemical skin peeling or pedicures; and/or offer tanning booths or diet reducing programs? <input type="checkbox"/> Yes <input type="checkbox"/> No
Carpet, Rug or Upholstery Cleaning—Shop Only – Does the applicant loan or rent cleaning equipment to customers? <input type="checkbox"/> Yes <input type="checkbox"/> No
Laundries—Coin Operated—Attended; laundries—Coin Operated—Unattended – Are telephones available and emergency numbers posted in a visible location? <input type="checkbox"/> Yes <input type="checkbox"/> No
Laundry and Dry Cleaners; Laundry and Dry Cleaning—Receiving Stations – Does the applicant store high value items such as furs? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lawn Care Services – Does the applicant apply chemicals, pesticides or fertilizers? <input type="checkbox"/> Yes <input type="checkbox"/> No Does the applicant's operations include snow removal? <input type="checkbox"/> Yes <input type="checkbox"/> No

Optional Policy Level Coverages

<input type="checkbox"/> Barbers Professional Liability – Number of Full Time Barbers: _____; Number of Part Time Barbers: _____
<input type="checkbox"/> Beauticians Professional Liability – Number of Full Time Beauticians: _____; Number of Part Time Beauticians: _____
<input type="checkbox"/> Extended Broad Form Property Damage Liability – Limit: <input type="checkbox"/> \$50,000 <input type="checkbox"/> \$100,000 <input type="checkbox"/> \$300,000 <input type="checkbox"/> \$500,000
<input type="checkbox"/> Funeral Directors Professional Liability – Annual Number of Bodies: _____
<input type="checkbox"/> Printers Errors and Omissions
<input type="checkbox"/> Veterinarians Professional Liability – Number of Full Time Veterinarians: _____; Number of Part Time Veterinarians: _____

Optional Coverages by Building

<input type="checkbox"/> Animal Coverage – <input checked="" type="checkbox"/> Each Animal Limit: \$2,000 ; Aggregate Limit: <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$20,000 <input type="checkbox"/> \$35,000 <input type="checkbox"/> \$50,000

Continued on Reverse

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