



DIRECTORS AND OFFICERS LIABILITY RENEWAL APPLICATION (CLAIMS MADE POLICY)

- 1. Name of Organization: Address: City: State: Zip:
2. State of Incorporation:
3. Nature of Operations:

4. Has the organization under consideration at the present time any mergers, acquisitions or consolidations: (If yes, give details) Yes No

5. Number of individuals employed by the organization:

6. Subsidiary Companies:

Table with 4 columns: NAME, NON-PROFIT OR FOR-PROFIT, PERCENTAGE OF OWNERSHIP, DATE ACQUIRED

7. Is the organization presently engaged in any construction, expansion or renovation, or is it contemplated? (If yes, give details) Yes No

\*ANSWER ITEMS 8 AND 9 ONLY IF APPLICABLE\* (If not applicable, go to Item 10)

8. Has the company filed or contemplated filing any registration statement with the Securities and Exchange Commission within the past eighteen (18) months or within the next twelve (12) months for a public offering of securities? (If yes, give details) Yes No

9. Stock Ownership:
- A) Number of Common Shares Outstanding: \_\_\_\_\_
  - B) Number of Common Stock Shareholders: \_\_\_\_\_
  - C) Number of shares of the company's Common Stock owned directly or beneficially by its Directors and Officers: \_\_\_\_\_
  - D) Does any shareholder own directly or beneficially ten (10) percent or more of the Common Shares? (If yes, give details)  Yes  No  
 \_\_\_\_\_  
 \_\_\_\_\_
10. Attached and made a part of this Application by reference is one copy of each of the following:
- A) Schedule of Directors, Trustees and Officers including the outside affiliations of each.
  - B) IRS Tax-Exempt Letter or update thereof.
  - C) Annual Report or CPA Audit, inclusive of Balance Sheet and Income Statement, for most recent fiscal year-end.
  - D) Copy of By-Laws and Brochures descriptive of operations and purpose, if changes within the past twelve (12) months.
11. IT IS AGREED THAT THIS RENEWAL APPLICATION IS A SUPPLEMENT TO THE APPLICATION(S) ATTACHED TO THE CURRENT POLICY AND SAID APPLICATIONS TOGETHER WITH THIS RENEWAL APPLICATION CONSTITUTE THE COMPLETE APPLICATION WHICH SHALL BE THE BASIS OF THE CONTRACT SHOULD A POLICY BE ISSUED AND WILL BE ATTACHED TO AND BECOME PART OF THE POLICY.

**NEW YORK APPLICANTS: PLEASE READ THE FOLLOWING STATEMENT CAREFULLY AND SIGN BELOW WHERE INDICATED. IF A POLICY IS ISSUED, NEW YORK INSURANCE DEPARTMENT REGULATIONS REQUIRE THAT THIS SIGNED STATEMENT BE ATTACHED TO THE POLICY.**

The insured hereby acknowledges that he/she/it is aware that the limit of liability contained in this policy shall be reduced and may be completely exhausted, by the costs of legal defense and, in such event, the insurer shall not be liable for the costs of legal defense or for the amount of any judgment or settlement to the extent that such exceeds the limit of liability of this policy.

The insured hereby further acknowledges that he/she/it is aware that legal defense costs that are incurred shall be applied against the retention amount.

**WARNING**

*Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent act, which is a crime.*

Signed: \_\_\_\_\_  
*(Must be signed by Chairman of the Board or President)*

Title: \_\_\_\_\_ Date: \_\_\_\_\_