

## DETECTIVE OR INVESTIGATIVE AGENCY (PRIVATE) & PROCESS SERVERS SUPPLEMENTAL APPLICATION

(Complete in addition to ACORD General Liability Application)

Applicant's Name: \_\_\_\_\_ Producer's Name: \_\_\_\_\_

**Location of Operations**

	Street & City	State	License Number
1.	<input type="checkbox"/> same as mailing address		
2.			
3.			

1. Errors & Omissions (E&O) Coverage:     Limited E&O     Full E&O  
(limit will match CGL Limit of Liability)
2. How long has applicant been in business? \_\_\_\_\_ years     Full Time     Part Time
3. Are armed personnel certified for use of firearms?     Yes     No     N/A
4. Are background checks completed on new employees prior to employment?     Yes     No  
If yes, describe procedures used for pre-employment screening:  
\_\_\_\_\_
5. List applicant's five largest clients and the operations performed for each:  
\_\_\_\_\_
6. Is applicant involved in any other operations or business?     Yes     No  
If yes, describe:  
\_\_\_\_\_

Operations and Percentage of Receipts (Percentages should total to 100%)	
_____ % Arson investigation	_____ % Legal
_____ % Bail Bond Operations	_____ % Mission Person
_____ % Body Guard	_____ % Polygraph Work
_____ % Computer Fraud	_____ % Process Servers
_____ % Consulting	_____ % Records Check
_____ % Corporate—Employee dishonesty	_____ % Surveillance (describe)
_____ % Drug Surveillance	
_____ % Drug Testing	_____ % Undercover operations (describe)
_____ % Personal Property (autos, etc.) Repossession	
_____ % Pre-employment screening	
_____ % Domestic	_____ % Other operations (describe)
_____ % Insurance Claim Investigating	
_____ % Insurance Adjusters (draft authority \$_____)	

Employee Data	Number	Annual Payroll	Leased or Subcontracted	Number	Annual Cost
Owner(s) only		\$	Leased employees		\$
Employees: Full Time		\$	Independent Contractors		\$
Part Time		\$			

(Include cost of uninsured subcontractors as employee payroll)

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_