

## ACORD 838 (2013/12) - Accountants Professional Liability Section

ACORD 838, Accountants Professional Liability Section, is used to apply for accountants professional liability coverage. The form was designed to be used in conjunction with ACORD 825 - Professional / Specialty Insurance Application.

In Montana, please refer to the Commissioner of Securities & Insurance (CSI) Advisory Memorandum, "Form Provisions Limiting Coverage of Defense Expenses, including Defense Within Limits Provisions", issued January 23, 2013.

### Form Page 1

Section Name	Field Name	Description
IDENTIFICATION SECTION	Agency Customer ID	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
IDENTIFICATION SECTION	Date	Enter date: The date on which the form is completed.
IDENTIFICATION SECTION	Agency	Enter text: The full name of the producer / agency.
IDENTIFICATION SECTION	Policy Number	Enter identifier: The identifier assigned by the insurer to the policy, or submission, being referenced exactly as it appears on the policy, including prefix and suffix symbols. If required for self-insurance, the self-insured license or contract number.
IDENTIFICATION SECTION	Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
IDENTIFICATION SECTION	Carrier	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	NAIC Code	Enter code: The identification code assigned to the insurer by the NAIC.
IDENTIFICATION SECTION	Named Insured	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
IDENTIFICATION SECTION	DBA	Enter text: The name by which an organization is doing business.
COVERAGE REQUESTED	Limit (per claim)	Enter limit: The limit amount for each claim.
COVERAGE REQUESTED	Limit (Aggregate)	Enter limit: The aggregate limit amount.
COVERAGE REQUESTED	Retention (check box)	Check the box (if applicable): Indicates if there is a retention limit.
COVERAGE REQUESTED	Deductible (check box)	Check the box (if applicable): Indicates if there is a deductible limit.
COVERAGE REQUESTED	Retention / Deductible (per claim \$ Amount)	Enter limit: The retained limit or deductible amount.
COVERAGE REQUESTED	Retention / Deductible (per claim Percentage)	Enter percentage: The retained limit or deductible expressed as a percent.

<b>COVERAGE REQUESTED</b>	<b>Retention / Deductible (Aggregate \$ Amount)</b>	Enter amount: The retained or deductible aggregate amount.
<b>COVERAGE REQUESTED</b>	<b>Retention / Deductible (Aggregate Percentage)</b>	Enter percentage: The current retained aggregate amount or deductible expressed as a percent.
<b>COVERAGE REQUESTED</b>	<b>Annual Premium</b>	Enter amount: The annual modified premium charged (not including taxes or service charges).
<b>COVERAGE REQUESTED</b>	<b>Effective Date</b>	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. As used here, 12:01 AM at the Principal Address of the Applicant.
<b>COVERAGE REQUESTED</b>	<b>Expiration Date</b>	Enter date: The date on which the terms and conditions of the policy will expire. As used here, 12:01 AM at the Principal Address of the Applicant.
<b>COVERAGE REQUESTED</b>	<b>Requested Retroactive Date</b>	Enter date: The retroactive date if the policy was issued on a Claims Made basis and there was a retroactive date.
<b>COVERAGE REQUESTED</b>	<b>Separate Defense Cost Limit</b>	Enter limit: The limit amount for separate defense costs.
<b>COVERAGE REQUESTED</b>	<b>Inside (check box)</b>	Check the box (if applicable): Indicates the defense limit is inside.
<b>COVERAGE REQUESTED</b>	<b>Outside (check box)</b>	Check the box (if applicable): Indicates the defense limit is outside.
<b>ADDITIONAL OFFICES</b>	<b>Name</b>	Enter text: The name of the branch office.
<b>ADDITIONAL OFFICES</b>	<b>Address Line 1</b>	Enter text: The street address of the branch office.
<b>ADDITIONAL OFFICES</b>	<b>City</b>	Enter text: The branch office's city name.
<b>ADDITIONAL OFFICES</b>	<b>State</b>	Enter code: The state or province code where the branch office is located.
<b>ADDITIONAL OFFICES</b>	<b>Zip Code</b>	Enter code: The postal code for the branch office.
<b>ADDITIONAL OFFICES</b>	<b>Name</b>	Enter text: The name of the branch office.
<b>ADDITIONAL OFFICES</b>	<b>Address Line 1</b>	Enter text: The street address of the branch office.
<b>ADDITIONAL OFFICES</b>	<b>City</b>	Enter text: The branch office's city name.
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<b>ADDITIONAL OFFICES</b>	<b>Zip Code</b>	Enter code: The postal code for the branch office.
<b>ADDITIONAL OFFICES</b>	<b>Name</b>	Enter text: The name of the branch office.
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<b>ADDITIONAL OFFICES</b>	<b>State</b>	Enter code: The state or province code where the branch office is located.
<b>ADDITIONAL OFFICES</b>	<b>Zip Code</b>	Enter code: The postal code for the branch office.

<b>ADDITIONAL OFFICES</b>	<b>Name</b>	Enter text: The name of the branch office.
<b>ADDITIONAL OFFICES</b>	<b>Address Line 1</b>	Enter text: The street address of the branch office.
<b>ADDITIONAL OFFICES</b>	<b>City</b>	Enter text: The branch office's city name.
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<b>ADDITIONAL OFFICES</b>	<b>City</b>	Enter text: The branch office's city name.
<b>ADDITIONAL OFFICES</b>	<b>State</b>	Enter code: The state or province code where the branch office is located.
<b>ADDITIONAL OFFICES</b>	<b>Zip Code</b>	Enter code: The postal code for the branch office.
<b>AREA(S) OF PRACTICE</b>	<b>Attest / Assurance Services Description</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Attest / Assurance Services - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Attest / Assurance Services.
<b>AREA(S) OF PRACTICE</b>	<b>Attest / Assurance Services - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Attest / Assurance Services.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Audit - Public Company Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Audit - Public Company - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Audit - Public Company

<b>AREA(S) OF PRACTICE</b>	<b>Audit - Public Company - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Audit - Public Company
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Audit - Other Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Audit - Other - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Audit - Other
<b>AREA(S) OF PRACTICE</b>	<b>Audit - Other - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Audit - Other
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Bookkeeping Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Bookkeeping - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Bookkeeping.
<b>AREA(S) OF PRACTICE</b>	<b>Bookkeeping - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Bookkeeping.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Business Planning Description</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Business Planning - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Business Planning.
<b>AREA(S) OF PRACTICE</b>	<b>Business Planning - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Business Planning.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Business Valuation Description (if applicable)</b>	Enter text: A brief description of the practice area.

<b>AREA(S) OF PRACTICE</b>	<b>Business Valuation - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Business Valuation.
<b>AREA(S) OF PRACTICE</b>	<b>Business Valuation - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Business Valuation.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Compilation Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Compilation - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Compilation
<b>AREA(S) OF PRACTICE</b>	<b>Compilation - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Compilation
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Consulting Services Description</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Consulting Services - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Consulting Services.
<b>AREA(S) OF PRACTICE</b>	<b>Consulting Services - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Consulting Services.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Fiduciary Services Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Fiduciary Services - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Fiduciary Services.
<b>AREA(S) OF PRACTICE</b>	<b>Fiduciary Services - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Fiduciary Services.

<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Forecasts / Projections Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Forecasts / Projections - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Forecasts / Projections.
<b>AREA(S) OF PRACTICE</b>	<b>Forecasts / Projections - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Forecasts / Projections.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Investment Advisory Services Description</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Investment Advisory Services - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Investment Advisory Services.
<b>AREA(S) OF PRACTICE</b>	<b>Investment Advisory Services - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Investment Advisory Services.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Litigation Support Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Litigation Support - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Litigation Support.
<b>AREA(S) OF PRACTICE</b>	<b>Litigation Support - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Litigation Support.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Personal Financial Planning Description (if applicable)</b>	Enter text: A brief description of the practice area.

<b>AREA(S) OF PRACTICE</b>	<b>Personal Financial Planning - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Personal Financial Planning.
<b>AREA(S) OF PRACTICE</b>	<b>Personal Financial Planning - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Personal Financial Planning.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Review Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Review - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Review.
<b>AREA(S) OF PRACTICE</b>	<b>Review - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Review.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Securities Activities Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Securities Activities - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Securities Activities.
<b>AREA(S) OF PRACTICE</b>	<b>Securities Activities - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Securities Activities.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Tax - Business Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Tax - Business - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Tax - Business.
<b>AREA(S) OF PRACTICE</b>	<b>Tax - Business - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Tax - Business.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.

<b>AREA(S) OF PRACTICE</b>	<b>Tax - Estate Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Tax - Estate - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Tax - Estate.
<b>AREA(S) OF PRACTICE</b>	<b>Tax - Estate - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Tax - Estate.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Tax - Individual Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Tax - Individual - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for Tax - Individual.
<b>AREA(S) OF PRACTICE</b>	<b>Tax - Individual - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for Tax - Individual.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area</b>	Enter text: The area of practice other than those listed.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for other activities not listed.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for other activities not listed.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates if an engagement letter is applicable.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area</b>	Enter text: The area of practice other than those listed.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for other activities not listed.



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<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area Description (if applicable)</b>	Enter text: A brief description of the practice area.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area - Percentage of Gross Income Last Year</b>	Enter percentage: The percentage breakdown last year for other activities not listed.
<b>AREA(S) OF PRACTICE</b>	<b>Other Practice Area - Percentage of Gross Income This Year</b>	Enter percentage: The percentage breakdown this year for other activities not listed.
<b>AREA(S) OF PRACTICE</b>	<b>Engagement Letters (Y /N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if an engagement letter is applicable.
<b>REMARKS</b>	<b>Remarks</b>	Enter text: The remarks associated with the accountants professional liability line of business. Use this section to list any additional, pertinent information that the underwriter should know about the overall exposures of this risk. ACORD 101, Additional Remarks Schedule, may be attached if more space is required.

**Form Page 2**

<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
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<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>FINANCIAL INFORMATION</b>	<b>Ending Date (MM/DD/YYYY) Projected - Current Year</b>	Enter date: The end date of the financial information (MM/DD/YYYY). As used here, this represents the end date for the current fiscal year.
<b>FINANCIAL INFORMATION</b>	<b>Ending Date (MM/DD/YYYY) Latest Fiscal Year</b>	Enter date: The end date of the financial information (MM/DD/YYYY). As used here, this represents the end date for the latest fiscal year.
<b>FINANCIAL INFORMATION</b>	<b>Ending Date (MM/DD/YYYY) First Prior Fiscal Year</b>	Enter date: The end date of the financial information (MM/DD/YYYY). As used here, this represents the end date for the first prior fiscal year.
<b>FINANCIAL INFORMATION</b>	<b>Gross Revenues Projected - Current Year</b>	Enter amount: The total revenue for the organization for the current year. As used here, this represents projected gross revenues for the current year.
<b>FINANCIAL INFORMATION</b>	<b>Gross Revenues - Latest Fiscal Year</b>	Enter amount: The total revenue for the organization for the prior year. As used here, this represents gross revenues for the latest fiscal year.
<b>FINANCIAL INFORMATION</b>	<b>Gross Revenues - First Prior Fiscal Year</b>	Enter amount: The total revenue for the organization for the prior year. As used here, this represents gross revenues for the first prior fiscal year.
<b>FINANCIAL INFORMATION</b>	<b>Total number of clients served in the past twelve (12) months</b>	Enter number: The total number of clients served in the past twelve months.
<b>EMPLOYMENT INFORMATION</b>	<b>Current Number of Full Time Equivalent CPAs</b>	Enter number: The number of employees that are CPAs (Certified Public Accountants).
<b>EMPLOYMENT INFORMATION</b>	<b>Current Number of Full Time Equivalent Non-CPA Accountants</b>	Enter number: The number of employees that are accountants and assistants.
<b>EMPLOYMENT INFORMATION</b>	<b>Current Number of Full Time Equivalent Support Staff</b>	Enter number: The number of employees that are support staff.
<b>PREDECESSOR FIRM(S)</b>	<b>Firm Name</b>	Enter text: The name of the predecessor firm.
<b>PREDECESSOR FIRM(S)</b>	<b>Date Formed</b>	Enter date: The date the firm was formed.
<b>PREDECESSOR FIRM(S)</b>	<b>Percent Owned</b>	Enter percentage: The percent of the firm that is owned.
<b>PREDECESSOR FIRM(S)</b>	<b>Date Dissolved</b>	Enter date: The dissolution date of the predecessor firm.
<b>PREDECESSOR FIRM(S)</b>	<b>Date of Name Change</b>	Enter date: The date the firm name was changed.
<b>PREDECESSOR FIRM(S)</b>	<b>Firm Name</b>	Enter text: The name of the predecessor firm.
<b>PREDECESSOR FIRM(S)</b>	<b>Date Formed</b>	Enter date: The date the firm was formed.
<b>PREDECESSOR FIRM(S)</b>	<b>Percent Owned</b>	Enter percentage: The percent of the firm that is owned.

PREDECESSOR FIRM(S)	Date Dissolved	Enter date: The dissolution date of the predecessor firm.
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PREDECESSOR FIRM(S)	Firm Name	Enter text: The name of the predecessor firm.
PREDECESSOR FIRM(S)	Date Formed	Enter date: The date the firm was formed.
PREDECESSOR FIRM(S)	Percent Owned	Enter percentage: The percent of the firm that is owned.
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PREDECESSOR FIRM(S)	Date Dissolved	Enter date: The dissolution date of the predecessor firm.
PREDECESSOR FIRM(S)	Date of Name Change	Enter date: The date the firm name was changed.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>1. Has any member of the applicant firm or any predecessor firm been the subject of a complaint, disciplinary action or reprimand by any state board, the SEC, IRS, governmental regulatory or tax authorities, or any accounting society?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates a response to the question, "Has any member of the applicant firm or any predecessor firm been the subject of a complaint, disciplinary action or reprimand by any state board, the SEC, I.R.S., governmental, regulatory or tax authorities, or any accounting society?"

<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>An explanation as to whether any member of the applicant firm or any predecessor firm has been the subject of a complaint, disciplinary action or reprimand by any state board, the SEC, IRS, governmental regulatory or tax authorities, or any accounting society.</b>	Enter text: An explanation as to whether any member of the applicant firm or any predecessor firm has been the subject of a complaint, disciplinary action or reprimand by any state board, the SEC, I.R.S, governmental regulatory or tax authorities, or any accounting society.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>2. Does the applicant firm share office space with professionals / firms other than those listed in the ADDITIONAL OFFICES section?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates a response to the question, "Does the applicant firm share office space with professionals / firms other than those listed in the additional offices section?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>2a. If "YES", does your firm separate files, employ separate support staff and present itself as an independent practice to the public?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates a response to the question, "Does your firm separate files, employ separate support staff and present itself as an independent practice to the public?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>2b. Name of the Professionals / Firm</b>	Enter text: The name of the other firm in which office space is shared. If applicable, the name of the other professionals that share the space.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>3. In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided regulatory, securities or compliance services to any financial institution client?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates a response to the question, "In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided regulatory, securities or compliance services to any financial institution client"

<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>An explanation as to whether any individuals in the applicant firm or predecessor firm have provided regulatory, securities or compliance services to any financial institution client in the past two (2) years.</b>	Enter text: An explanation as to whether any member of the applicant firm or predecessor firm provided regulatory, securities or compliance services to any financial institution client in the last mandated number of years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>4. In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided services for an institution in which the applicant member held an equity or management interest?</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates the response to the question, "In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided services for an institution which an applicant member held an equity or management interest?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>An explanation as to whether any individuals in the applicant firm or predecessor firm have provided services for an institution in which the applicant member held an equity or management interest in the past two (2) years.</b>	Enter text: An explanation as to whether any individuals in the applicant firm or predecessor firm provided services for an institution in which the applicant member held an equity or management interest in the last mandated number of years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>5. In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided services for an institution whose deposits are not insured by a government agency, such as the FDIC or NCUA?</b>	Enter Y for a “Yes” response. Input N for “No” response. Indicates the response to the question, "In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided services for an institution whose deposits are not insured by a government agency, such as the FDIC of NCUA?"

<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>An explanation as to whether any individuals in the applicant firm or predecessor firm have provided services for an institution whose deposits are not insured by a government agency, such as the FDIC or NCUA in the past two (2) years.</b>	Enter text: An explanation as to whether any individuals in the applicant firm or predecessor firm provided services for an institution whose deposits are not insured by a government agency, such as the FDIC or NCUA in the last mandated number of years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>6. In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided services for an institution which was either in its formative stage or which has at any point been insolvent?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided services for an institution which was either in its formative stage or which has at any point since been insolvent?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>An explanation as to whether any individuals in the applicant firm or predecessor firm have provided services for an institution which was either in its formative stage or which has at any point been insolvent in the past two (2) years.</b>	Enter text: An explanation as to whether any individuals in the applicant firm or predecessor firm provided services for an institution which was either in its formative stage or which has at any point since been insolvent in the last mandated number of years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>7. In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided services for an institution for which they were an officer, director or general counsel?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "In the past two (2) years, have any individuals in the applicant firm or predecessor firm provided services for an institution for which they were an officer, director or general counsel?"

<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>An explanation as to whether any individuals in the applicant firm or predecessor firm have provided services for an institution for which they were an officer, director or general counsel in the past two (2) years.</b>	Enter text: An explanation as to whether any individuals in the applicant firm or predecessor firm provided services for an institution for which they were an officer, director or general counsel in the last mandated number of years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>8. Have any suits for collection fees been filed by the applicant or predecessor firms during the past two (2) years?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Have any suits for collection of fees been filed by the applicant or predecessor firms during the past two (2) years?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>Number of Suits</b>	Enter number: The total number of suits.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>Number Resolved Successfully</b>	Enter number: The total number of law suits resolved successfully.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>Dollar Amount of Fee Suits Last Year</b>	Enter amount: The dollar amount of fee suits last year.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>Dollar Amount of Fee Suits Previous Year</b>	Enter amount: The dollar amount of fee suits previous year.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>9. Has any applicant firm or any predecessor firm ever conducted SEC services or audits for any publically held companies?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Has any applicant firm or any predecessor firm ever conducted SEC services or audits for any publically held companies?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>An explanation as to whether any applicant firm or any predecessor firm ever conducted SEC services or audits for any publically held companies.</b>	Enter text: An explanation as to whether any applicant firm or any predecessor firm ever conducted SEC services or audits for any publically held companies.

<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>10. Has any applicant firm or any predecessor firm received equity or any other non-monetary compensation for the rendering of accounting services?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Has any applicant firm or any predecessor firm received equity or any other non-monetary compensation for the rendering of accounting services?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>10a. If "YES", was this only on tax engagements?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Was this only on non-tax engagements?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>11. Has the applicant firm arranged, coordinated or managed any investment venture?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Has the applicant firm arranged, coordinated or managed any investment venture?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION</b>	<b>An explanation as to whether the applicant firm arranged, coordinated or managed any investment venture.</b>	Enter text: An explanation as to whether the applicant firm arranged, coordinated or managed any investment venture.

**Form Page 3**

<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>12. Within the past six (6) years, have any of the applicant firm's accountants served as a director, officer or an employee of any client; owned an equity interest in any client; or does any client represent more than twenty-five percent of the applicant firm's revenues? (If "YES", provide the following for each)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Within the past six (6) years, have any of the applicant firm's accountants served as a director, officer or an employee of any client; owned an equity interest in any client; or does any client represent more than twenty-five percent of the applicant firm's revenues?"



<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Client</b>	Enter text: The name of client for whom the applicant firms accountants have had a business interest within the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Nature of Business</b>	Enter text: The nature of the business of the client for whom the applicant firm's accountants have had a business interest in the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Services Provided</b>	Enter text: The services provided by the client for whom the applicant firm's accountants have had a business interest within the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>% of Firm's Revenue</b>	Enter percentage: The percentage of the firm's revenue.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Equity Interest %</b>	Enter percentage: The percentage of equity interest.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dollar Value of Interest</b>	Enter amount: The dollar value of interest.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Person Holding a Position for this Client</b>	Enter text: The name of the employee holding a position for this client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Title</b>	Enter text: The title of the employee holding a position for the client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Client</b>	Enter text: The name of client for whom the applicant firms accountants have had a business interest within the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Nature of Business</b>	Enter text: The nature of the business of the client for whom the applicant firm's accountants have had a business interest in the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Services Provided</b>	Enter text: The services provided by the client for whom the applicant firm's accountants have had a business interest within the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>% of Firm's Revenue</b>	Enter percentage: The percentage of the firm's revenue.

<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Equity Interest %</b>	Enter percentage: The percentage of equity interest.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dollar Value of Interest</b>	Enter amount: The dollar value of interest.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Person Holding a Position for this Client</b>	Enter text: The name of the employee holding a position for this client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Title</b>	Enter text: The title of the employee holding a position for the client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Client</b>	Enter text: The name of client for whom the applicant firms accountants have had a business interest within the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Nature of Business</b>	Enter text: The nature of the business of the client for whom the applicant firm's accountants have had a business interest in the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Services Provided</b>	Enter text: The services provided by the client for whom the applicant firm's accountants have had a business interest within the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>% of Firm's Revenue</b>	Enter percentage: The percentage of the firm's revenue.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Equity Interest %</b>	Enter percentage: The percentage of equity interest.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dollar Value of Interest</b>	Enter amount: The dollar value of interest.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Person Holding a Position for this Client</b>	Enter text: The name of the employee holding a position for this client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Title</b>	Enter text: The title of the employee holding a position for the client.

<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Client</b>	Enter text: The name of client for whom the applicant firms accountants have had a business interest within the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Nature of Business</b>	Enter text: The nature of the business of the client for whom the applicant firm's accountants have had a business interest in the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Services Provided</b>	Enter text: The services provided by the client for whom the applicant firm's accountants have had a business interest within the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>% of Firm's Revenue</b>	Enter percentage: The percentage of the firm's revenue.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Equity Interest %</b>	Enter percentage: The percentage of equity interest.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dollar Value of Interest</b>	Enter amount: The dollar value of interest.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Person Holding a Position for this Client</b>	Enter text: The name of the employee holding a position for this client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Title</b>	Enter text: The title of the employee holding a position for the client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>13. Does any member of the applicant firm hold any professional license other than for accounting?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does any member of the applicant firm hold any professional license other than for accountancy?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Individual</b>	Enter text: The name of the individual holding this position.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Profession</b>	Enter text: The name of the other profession.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Annual Income from Profession</b>	Enter amount: The annual income from other profession.

<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Insurance Carrier</b>	Enter text: The name of the insurer providing coverage for the other profession.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Individual</b>	Enter text: The name of the individual holding this position.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Profession</b>	Enter text: The name of the other profession.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Annual Income from Profession</b>	Enter amount: The annual income from other profession.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Insurance Carrier</b>	Enter text: The name of the insurer providing coverage for the other profession.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Individual</b>	Enter text: The name of the individual holding this position.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Profession</b>	Enter text: The name of the other profession.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Annual Income from Profession</b>	Enter amount: The annual income from other profession.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Insurance Carrier</b>	Enter text: The name of the insurer providing coverage for the other profession.

<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>14. Within the past three (3) years has the applicant firm or predecessor firm or any affiliated entity thereof rendered audit or attest services for a business client, for which either the client or a parent of the client subsequently declared or filed bankruptcy, defaulted on a debt obligation or became insolvent?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Within the past three (3) years, has the applicant firm or predecessor firm or any affiliated entity thereof rendered audit or attest services for a business client, for which either the client or a parent of the client subsequently declared or filed bankruptcy, defaulted on a debt obligation or became insolvent?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Client</b>	Enter text: The name of the client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Client Industry</b>	Enter text: The name of the client industry.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Type of Service Rendered</b>	Enter text: The name of the type of service rendered.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dates of Service</b>	Enter date: The dates of the service rendered. As used here, this is the start date.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dates of Service</b>	Enter date: The dates of the service rendered. As used here, this is the completion date.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Going Concern (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. The going concern indicator.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Date of Bankruptcy / Insolvency / Default</b>	Enter date: The date of the bankruptcy, insolvency or default.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Client</b>	Enter text: The name of the client.

<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Client Industry</b>	Enter text: The name of the client industry.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Type of Service Rendered</b>	Enter text: The name of the type of service rendered.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dates of Service</b>	Enter date: The dates of the service rendered. As used here, this is the start date.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dates of Service</b>	Enter date: The dates of the service rendered. As used here, this is the completion date.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Going Concern (Y / N)</b>	Enter Y for a “Yes” response. Input N for “No” response. The going concern indicator.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Date of Bankruptcy / Insolvency / Default</b>	Enter date: The date of the bankruptcy, insolvency or default.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Name of Client</b>	Enter text: The name of the client.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Client Industry</b>	Enter text: The name of the client industry.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Type of Service Rendered</b>	Enter text: The name of the type of service rendered.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dates of Service</b>	Enter date: The dates of the service rendered. As used here, this is the start date.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Dates of Service</b>	Enter date: The dates of the service rendered. As used here, this is the completion date.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Going Concern (Y / N)</b>	Enter Y for a “Yes” response. Input N for “No” response. The going concern indicator.

<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Date of Bankruptcy / Insolvency / Default</b>	Enter date: The date of the bankruptcy, insolvency or default.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>15. During the past six (6) years, has any insurer of the applicant firm, predecessor firm or prior firm canceled or refused to renew professional liability insurance for any reason other than the carrier's withdrawal from the market? (Missouri Applicants – Do not answer this question)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "During the past six (6) years, has any insurer of the applicant firm, predecessor firm or prior firm cancelled or refused to renew professional liability insurance for any reason other than the carrier's withdrawal from the market?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>An explanation as to whether any insurer of the applicant firm, predecessor firm or prior firm canceled or refused to renew professional liability insurance for any reason other than the carrier's withdrawal from the market during the past six (6) years.</b>	Enter text: An explanation as to whether any insurer of the applicant firm, predecessor firm or prior firm canceled or refused to renew professional liability insurance for any reason other than the carrier's withdrawal from the market in the past six (6) years.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>16. In the past three (3) years, has the applicant firm undergone any peer or quality review sponsored by the AICPA or any state society of CPAs?</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "In the past three (3) years, has the applicant firm undergone any peer or quality review sponsored by AICPA or any state society of CPAs?"
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>The results were unqualified.</b>	Check the box (if applicable): Indicates the results from the peer quality review are unqualified.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>The results were qualified, modified or adverse.</b>	Check the box (if applicable): Indicates the results from the peer quality review are qualified, modified or adverse.
<b>PRIOR COVERAGE</b>	<b>Prior Carrier</b>	Enter text: The name of the previous insurer.
<b>PRIOR COVERAGE</b>	<b>Eff Date (MM/DD/YYYY)</b>	Enter date: The effective date of the prior policy.

<b>PRIOR COVERAGE</b>	<b>Exp Date (MM/DD/YYYY)</b>	Enter date: The expiration date of the previous coverage.
<b>PRIOR COVERAGE</b>	<b>Limits of Liability</b>	Enter limit: The limits of liability on the policy (per claim or aggregate).
<b>PRIOR COVERAGE</b>	<b>Defense Limits Inside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit.
<b>PRIOR COVERAGE</b>	<b>Defense Limits Outside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit.
<b>PRIOR COVERAGE</b>	<b>Retention (check box)</b>	Check the box (if applicable): Indicates if there is a retention limit.
<b>PRIOR COVERAGE</b>	<b>Deductible (check box)</b>	Check the box (if applicable): Indicates if there is a deductible limit.
<b>PRIOR COVERAGE</b>	<b>Retention / Deductible Amount</b>	Enter limit: The retained limit or deductible amount.
<b>PRIOR COVERAGE</b>	<b>Number of Accountants</b>	Enter number: The number of accountants on prior coverage.
<b>PRIOR COVERAGE</b>	<b>Annual Premium</b>	Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business.
<b>PRIOR COVERAGE</b>	<b>Prior Carrier</b>	Enter text: The name of the previous insurer.
<b>PRIOR COVERAGE</b>	<b>Eff Date (MM/DD/YYYY)</b>	Enter date: The effective date of the prior policy.
<b>PRIOR COVERAGE</b>	<b>Exp Date (MM/DD/YYYY)</b>	Enter date: The expiration date of the previous coverage.
<b>PRIOR COVERAGE</b>	<b>Limits of Liability</b>	Enter limit: The limits of liability on the policy (per claim or aggregate).
<b>PRIOR COVERAGE</b>	<b>Defense Limits Inside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit.
<b>PRIOR COVERAGE</b>	<b>Defense Limits Outside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit.
<b>PRIOR COVERAGE</b>	<b>Retention (check box)</b>	Check the box (if applicable): Indicates if there is a retention limit.
<b>PRIOR COVERAGE</b>	<b>Deductible (check box)</b>	Check the box (if applicable): Indicates if there is a deductible limit.
<b>PRIOR COVERAGE</b>	<b>Retention / Deductible Amount</b>	Enter limit: The retained limit or deductible amount.
<b>PRIOR COVERAGE</b>	<b>Number of Accountants</b>	Enter number: The number of accountants on prior coverage.
<b>PRIOR COVERAGE</b>	<b>Annual Premium</b>	Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business.
<b>PRIOR COVERAGE</b>	<b>Prior Carrier</b>	Enter text: The name of the previous insurer.
<b>PRIOR COVERAGE</b>	<b>Eff Date (MM/DD/YYYY)</b>	Enter date: The effective date of the prior policy.



<b>PRIOR COVERAGE</b>	<b>Exp Date (MM/DD/YYYY)</b>	Enter date: The expiration date of the previous coverage.
<b>PRIOR COVERAGE</b>	<b>Limits of Liability</b>	Enter limit: The limits of liability on the policy (per claim or aggregate).
<b>PRIOR COVERAGE</b>	<b>Defense Limits Inside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit.
<b>PRIOR COVERAGE</b>	<b>Defense Limits Outside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit.
<b>PRIOR COVERAGE</b>	<b>Retention (check box)</b>	Check the box (if applicable): Indicates if there is a retention limit.
<b>PRIOR COVERAGE</b>	<b>Deductible (check box)</b>	Check the box (if applicable): Indicates if there is a deductible limit.
<b>PRIOR COVERAGE</b>	<b>Retention / Deductible Amount</b>	Enter limit: The retained limit or deductible amount.
<b>PRIOR COVERAGE</b>	<b>Number of Accountants</b>	Enter number: The number of accountants on prior coverage.
<b>PRIOR COVERAGE</b>	<b>Annual Premium</b>	Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business.
<b>PRIOR COVERAGE</b>	<b>Prior Carrier</b>	Enter text: The name of the previous insurer.
<b>PRIOR COVERAGE</b>	<b>Eff Date (MM/DD/YYYY)</b>	Enter date: The effective date of the prior policy.
<b>PRIOR COVERAGE</b>	<b>Exp Date (MM/DD/YYYY)</b>	Enter date: The expiration date of the previous coverage.
<b>PRIOR COVERAGE</b>	<b>Limits of Liability</b>	Enter limit: The limits of liability on the policy (per claim or aggregate).
<b>PRIOR COVERAGE</b>	<b>Defense Limits Inside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit.
<b>PRIOR COVERAGE</b>	<b>Defense Limits Outside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit.
<b>PRIOR COVERAGE</b>	<b>Retention (check box)</b>	Check the box (if applicable): Indicates if there is a retention limit.
<b>PRIOR COVERAGE</b>	<b>Deductible (check box)</b>	Check the box (if applicable): Indicates if there is a deductible limit.
<b>PRIOR COVERAGE</b>	<b>Retention / Deductible Amount</b>	Enter limit: The retained limit or deductible amount.
<b>PRIOR COVERAGE</b>	<b>Number of Accountants</b>	Enter number: The number of accountants on prior coverage.
<b>PRIOR COVERAGE</b>	<b>Annual Premium</b>	Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business.
<b>PRIOR COVERAGE</b>	<b>Prior Carrier</b>	Enter text: The name of the previous insurer.
<b>PRIOR COVERAGE</b>	<b>Eff Date (MM/DD/YYYY)</b>	Enter date: The effective date of the prior policy.

<b>PRIOR COVERAGE</b>	<b>Exp Date (MM/DD/YYYY)</b>	Enter date: The expiration date of the previous coverage.
<b>PRIOR COVERAGE</b>	<b>Limits of Liability</b>	Enter limit: The limits of liability on the policy (per claim or aggregate).
<b>PRIOR COVERAGE</b>	<b>Defense Limits Inside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit.
<b>PRIOR COVERAGE</b>	<b>Defense Limits Outside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit.
<b>PRIOR COVERAGE</b>	<b>Retention (check box)</b>	Check the box (if applicable): Indicates if there is a retention limit.
<b>APPLICANT / PREDECESSOR FIRM INFORMATION (continued)</b>	<b>Deductible (check box)</b>	Check the box (if applicable): Indicates if there is a deductible limit.
<b>PRIOR COVERAGE</b>	<b>Retention / Deductible Amount</b>	Enter limit: The retained limit or deductible amount.
<b>PRIOR COVERAGE</b>	<b>Number of Accountants</b>	Enter number: The number of accountants on prior coverage.
<b>PRIOR COVERAGE</b>	<b>Annual Premium</b>	Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business.
<b>PRIOR COVERAGE</b>	<b>Prior Carrier</b>	Enter text: The name of the previous insurer.
<b>PRIOR COVERAGE</b>	<b>Eff Date (MM/DD/YYYY)</b>	Enter date: The effective date of the prior policy.
<b>PRIOR COVERAGE</b>	<b>Exp Date (MM/DD/YYYY)</b>	Enter date: The expiration date of the previous coverage.
<b>PRIOR COVERAGE</b>	<b>Limits of Liability</b>	Enter limit: The limits of liability on the policy (per claim or aggregate).
<b>PRIOR COVERAGE</b>	<b>Defense Limits Inside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit.
<b>PRIOR COVERAGE</b>	<b>Defense Limits Outside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit.
<b>PRIOR COVERAGE</b>	<b>Retention (check box)</b>	Check the box (if applicable): Indicates if there is a retention limit.
<b>PRIOR COVERAGE</b>	<b>Deductible (check box)</b>	Check the box (if applicable): Indicates if there is a deductible limit.
<b>PRIOR COVERAGE</b>	<b>Retention / Deductible Amount</b>	Enter limit: The retained limit or deductible amount.
<b>PRIOR COVERAGE</b>	<b>Number of Accountants</b>	Enter number: The number of accountants on prior coverage.
<b>PRIOR COVERAGE</b>	<b>Annual Premium</b>	Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business.
<b>PRIOR COVERAGE</b>	<b>Prior Carrier</b>	Enter text: The name of the previous insurer.

<b>PRIOR COVERAGE</b>	<b>Eff Date (MM/DD/YYYY)</b>	Enter date: The effective date of the prior policy.
<b>PRIOR COVERAGE</b>	<b>Exp Date (MM/DD/YYYY)</b>	Enter date: The expiration date of the previous coverage.
<b>PRIOR COVERAGE</b>	<b>Limits of Liability</b>	Enter limit: The limits of liability on the policy (per claim or aggregate).
<b>PRIOR COVERAGE</b>	<b>Defense Limits Inside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit.
<b>PRIOR COVERAGE</b>	<b>Defense Limits Outside (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit.
<b>PRIOR COVERAGE</b>	<b>Retention (check box)</b>	Check the box (if applicable): Indicates if there is a retention limit.
<b>PRIOR COVERAGE</b>	<b>Deductible (check box)</b>	Check the box (if applicable): Indicates if there is a deductible limit.
<b>PRIOR COVERAGE</b>	<b>Retention / Deductible Amount</b>	Enter limit: The retained limit or deductible amount.
<b>PRIOR COVERAGE</b>	<b>Number of Accountants</b>	Enter number: The number of accountants on prior coverage.
<b>PRIOR COVERAGE</b>	<b>Annual Premium</b>	Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business.
<b>PRIOR COVERAGE</b>	<b>Indicate Applicant Firm's Retroactive Date of Their Current Policy</b>	Enter date: The date of the applicant firm's first claim's made policy.

**Form Page 4**

<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>LOSS HISTORY</b>	<b>Check if None</b>	Check the box (if applicable): Indicates there are no prior losses or occurrences that may give rise to claims for the mandated number of years.

<b>LOSS HISTORY</b>	<b>1. After inquiry, are any individuals or the applicant firm aware of any professional liability claims made against them, the applicant firm or a predecessor firm in the past six (6) years, including those which may have been made against them while with prior firm(s)? (If "YES", provide details in the table below)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "After inquiry, are any individuals of the applicant firm aware of any professional liability claims made against them, the applicant firm or a predecessor firm in the past six (6) years, including those which may have been made against them while with prior firm(s)?"
<b>LOSS HISTORY</b>	<b>2. After inquiry, are any individuals of the applicant firm aware of any actual or alleged act, error, omission, incident or circumstance, which might reasonably result in a claim against them, the applicant firm or against any members of a predecessor firm in the past six (6) years? )? (If "YES", provide details in the table below)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "After inquiry, are any individuals of the applicant firm aware of any actual or alleged act, error, omission, incident or circumstance, which might reasonably result in a claim against them, the applicant firm or against any members of a predecessor firm in the past six (6) years?"
<b>LOSS HISTORY</b>	<b>Total Losses</b>	Enter amount: The amount that has been paid on all losses to date.
<b>LOSS HISTORY</b>	<b>Date of Occurrence (MM/DD/YYYY)</b>	Enter date: The date when the accident or incident occurred that resulted in the filing of a claim.
<b>LOSS HISTORY</b>	<b>Type / Description of Occurrence or Claim</b>	Enter text: A brief description of the loss.
<b>LOSS HISTORY</b>	<b>Date of Claim (MM/DD/YYYY)</b>	Enter date: The date the claim was filed.
<b>LOSS HISTORY</b>	<b>Amount Paid</b>	Enter amount: The amount that has been paid on this claim to date.
<b>LOSS HISTORY</b>	<b>Amount Reserved</b>	Enter amount: The reserve amount the previous carrier is holding open for this claim.
<b>LOSS HISTORY</b>	<b>Subrogation (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation.
<b>LOSS HISTORY</b>	<b>Claim Open (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open.

<b>LOSS HISTORY</b>	<b>Date of Occurrence (MM/DD/YYYY)</b>	Enter date: The date when the accident or incident occurred that resulted in the filing of a claim.
<b>LOSS HISTORY</b>	<b>Type / Description of Occurrence or Claim</b>	Enter text: A brief description of the loss.
<b>LOSS HISTORY</b>	<b>Date of Claim (MM/DD/YYYY)</b>	Enter date: The date the claim was filed.
<b>LOSS HISTORY</b>	<b>Amount Paid</b>	Enter amount: The amount that has been paid on this claim to date.
<b>LOSS HISTORY</b>	<b>Amount Reserved</b>	Enter amount: The reserve amount the previous carrier is holding open for this claim.
<b>LOSS HISTORY</b>	<b>Subrogation (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation.
<b>LOSS HISTORY</b>	<b>Claim Open (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open.
<b>LOSS HISTORY</b>	<b>Date of Occurrence (MM/DD/YYYY)</b>	Enter date: The date when the accident or incident occurred that resulted in the filing of a claim.
<b>LOSS HISTORY</b>	<b>Type / Description of Occurrence or Claim</b>	Enter text: A brief description of the loss.
<b>LOSS HISTORY</b>	<b>Date of Claim (MM/DD/YYYY)</b>	Enter date: The date the claim was filed.
<b>LOSS HISTORY</b>	<b>Amount Paid</b>	Enter amount: The amount that has been paid on this claim to date.
<b>LOSS HISTORY</b>	<b>Amount Reserved</b>	Enter amount: The reserve amount the previous carrier is holding open for this claim.
<b>LOSS HISTORY</b>	<b>Subrogation (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation.
<b>LOSS HISTORY</b>	<b>Claim Open (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open.
<b>LOSS HISTORY</b>	<b>Date of Occurrence (MM/DD/YYYY)</b>	Enter date: The date when the accident or incident occurred that resulted in the filing of a claim.
<b>LOSS HISTORY</b>	<b>Type / Description of Occurrence or Claim</b>	Enter text: A brief description of the loss.
<b>LOSS HISTORY</b>	<b>Date of Claim (MM/DD/YYYY)</b>	Enter date: The date the claim was filed.
<b>LOSS HISTORY</b>	<b>Amount Paid</b>	Enter amount: The amount that has been paid on this claim to date.
<b>LOSS HISTORY</b>	<b>Amount Reserved</b>	Enter amount: The reserve amount the previous carrier is holding open for this claim.
<b>LOSS HISTORY</b>	<b>Subrogation (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation.
<b>LOSS HISTORY</b>	<b>Claim Open (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open.

<b>LOSS HISTORY</b>	<b>Date of Occurrence (MM/DD/YYYY)</b>	Enter date: The date when the accident or incident occurred that resulted in the filing of a claim.
<b>LOSS HISTORY</b>	<b>Type / Description of Occurrence or Claim</b>	Enter text: A brief description of the loss.
<b>LOSS HISTORY</b>	<b>Date of Claim (MM/DD/YYYY)</b>	Enter date: The date the claim was filed.
<b>LOSS HISTORY</b>	<b>Amount Paid</b>	Enter amount: The amount that has been paid on this claim to date.
<b>LOSS HISTORY</b>	<b>Amount Reserved</b>	Enter amount: The reserve amount the previous carrier is holding open for this claim.
<b>LOSS HISTORY</b>	<b>Subrogation (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation.
<b>LOSS HISTORY</b>	<b>Claim Open (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open.
<b>LOSS HISTORY</b>	<b>Date of Occurrence (MM/DD/YYYY)</b>	Enter date: The date when the accident or incident occurred that resulted in the filing of a claim.
<b>LOSS HISTORY</b>	<b>Type / Description of Occurrence or Claim</b>	Enter text: A brief description of the loss.
<b>LOSS HISTORY</b>	<b>Date of Claim (MM/DD/YYYY)</b>	Enter date: The date the claim was filed.
<b>LOSS HISTORY</b>	<b>Amount Paid</b>	Enter amount: The amount that has been paid on this claim to date.
<b>LOSS HISTORY</b>	<b>Amount Reserved</b>	Enter amount: The reserve amount the previous carrier is holding open for this claim.
<b>LOSS HISTORY</b>	<b>Subrogation (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation.
<b>LOSS HISTORY</b>	<b>Claim Open (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open.
<b>LOSS HISTORY</b>	<b>Date of Occurrence (MM/DD/YYYY)</b>	Enter date: The date when the accident or incident occurred that resulted in the filing of a claim.
<b>LOSS HISTORY</b>	<b>Type / Description of Occurrence or Claim</b>	Enter text: A brief description of the loss.
<b>LOSS HISTORY</b>	<b>Date of Claim (MM/DD/YYYY)</b>	Enter date: The date the claim was filed.
<b>LOSS HISTORY</b>	<b>Amount Paid</b>	Enter amount: The amount that has been paid on this claim to date.
<b>LOSS HISTORY</b>	<b>Amount Reserved</b>	Enter amount: The reserve amount the previous carrier is holding open for this claim.
<b>LOSS HISTORY</b>	<b>Subrogation (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation.
<b>LOSS HISTORY</b>	<b>Claim Open (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open.

<b>LOSS HISTORY</b>	<b>Date of Occurrence (MM/DD/YYYY)</b>	Enter date: The date when the accident or incident occurred that resulted in the filing of a claim.
<b>LOSS HISTORY</b>	<b>Type / Description of Occurrence or Claim</b>	Enter text: A brief description of the loss.
<b>LOSS HISTORY</b>	<b>Date of Claim (MM/DD/YYYY)</b>	Enter date: The date the claim was filed.
<b>LOSS HISTORY</b>	<b>Amount Paid</b>	Enter amount: The amount that has been paid on this claim to date.
<b>LOSS HISTORY</b>	<b>Amount Reserved</b>	Enter amount: The reserve amount the previous carrier is holding open for this claim.
<b>LOSS HISTORY</b>	<b>Subrogation (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation.
<b>LOSS HISTORY</b>	<b>Claim Open (Y / N)</b>	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open.
<b>REMARKS / ATTACHMENTS</b>	<b>Letterhead (check box)</b>	Check the box (if applicable): Indicates if company letterhead is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Current Retroactive Date Endorsement (check box)</b>	Check the box (if applicable): Indicates if current retroactive date endorsement is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Current Declarations Page (check box)</b>	Check the box (if applicable): Indicates if current declarations page is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Claims Information (check box)</b>	Check the box (if applicable): Indicates if claims information is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Organizational Chart (check box)</b>	Check the box (if applicable): Indicates if organizational chart is attached.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Attachment (check box)</b>	Check the box (if applicable): Indicates there is an attachment other than those listed on the application.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Attachment Description</b>	Enter text: The description of the other attachment.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Attachment (check box)</b>	Check the box (if applicable): Indicates there is an attachment other than those listed on the application.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Attachment Description</b>	Enter text: The description of the other attachment.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Attachment (check box)</b>	Check the box (if applicable): Indicates there is an attachment other than those listed on the application.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Attachment Description</b>	Enter text: The description of the other attachment.

<b>REMARKS / ATTACHMENTS</b>	<b>Other Attachment (check box)</b>	Check the box (if applicable): Indicates there is an attachment other than those listed on the application.
<b>REMARKS / ATTACHMENTS</b>	<b>Other Attachment Description</b>	Enter text: The description of the other attachment.
<b>REMARKS / ATTACHMENTS</b>	<b>Remarks</b>	Enter text: The remarks associated with the accountants professional liability line of business. Use this section to list any additional, pertinent information that the underwriter should know about the overall exposures of this risk. ACORD 101, Additional Remarks Schedule, may be attached if more space is required.

**Form Page 5**

<b>Section Name</b>	<b>Field Name</b>	<b>Description</b>
<b>IDENTIFICATION SECTION</b>	<b>Agency Customer ID</b>	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
<b>SIGNATURE</b>	<b>Producer's Signature</b>	Sign here: Accommodates the signature of the authorized representative (e.g., producer, agent, broker, etc.) of the company(ies) listed on the document. This is required in most states.
<b>SIGNATURE</b>	<b>Producer's Name</b>	Enter text: The name of the authorized representative of the producer, agency and/or broker that signed the form.
<b>SIGNATURE</b>	<b>State Producer License No</b>	Enter identifier: The State License Number of the producer.
<b>SIGNATURE</b>	<b>Applicant's Signature</b>	Sign here: Accommodates the signature of the applicant or named insured.
<b>SIGNATURE</b>	<b>Date</b>	Enter date: The date the form was signed by the named insured.
<b>SIGNATURE</b>	<b>National Producer Number</b>	Enter identifier: The National Producer Number (NPN) as defined in the National Insurance Producer Registry (NIPR). Note: The NPN is not the same as the producer state license number.