



# Specified Professions Professional Liability Product

## MANAGEMENT/HUMAN RESOURCES/MARKETING CONSULTANTS SUPPLEMENTAL

Please fill out the General Information section, along with the section(s) you are requesting coverage.

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

*If the Applicant is newly established, please provide best estimates.*

1. Provide the percentage of Applicant's current 12 month Gross Receipts from the following

*(Provide description of services for all that apply)*

|                            |         |       |
|----------------------------|---------|-------|
| Management Consulting      | _____ % | _____ |
| Human Resources Consulting | _____ % | _____ |
| Marketing Consulting       | _____ % | _____ |
| Other _____                | _____ % | _____ |

2. Does the Applicant provide:

*(If "yes", indicate percentage of revenue derived from services, where requested, and provide further details below.)*

- a. Services to any clients for whom the Applicant serves as an officer or as an interim manager or as a manager on a day-to-day basis? \_\_\_\_\_ %  Yes  No
- b. Turnaround management services? \_\_\_\_\_ %  Yes  No
- c. Business valuation services or services as a business broker?  Yes  No
- d. Services as an investment banker, directly raising capital, or managing or issuing public/private offerings of equity or debt?  Yes  No
- e. Investment advice?  Yes  No
- f. Due diligence services for commercial loans?  Yes  No
- g. Merger or acquisition services involving structuring transactions, performing due diligence, arranging financing or facilitating the purchase or sale of the company?  Yes  No
- h. Product design or testing of manufactured goods?  Yes  No
- i. Consulting regarding Sarbanes-Oxley compliance? \_\_\_\_\_ %  Yes  No
- j. Engineering consulting or construction project management?  Yes  No
- k. Terrorism-related or physical security consulting?  Yes  No
- l. Real estate development or land use consulting? \_\_\_\_\_ %  Yes  No
- m. Environmental, hazardous waste or pollution consulting?  Yes  No
- n. Peer review services or services affecting healthcare treatment?  Yes  No
- o. Clinical consulting in the areas of healthcare or pharmaceuticals?  Yes  No
- p. Counseling regarding the hiring or firing of specific employees for clients?  Yes  No
- q. Services as an interim human resources manager providing direct management of clients' employees?  Yes  No
- r. Payroll processing or benefit administration?  Yes  No
- s. Media planning/buying/production? \_\_\_\_\_ %  Yes  No
- t. Creation, production or placement of any paid form of communication about organizations, products, or services by an identified sponsor? \_\_\_\_\_ %  Yes  No
- u. Design of product packaging, logos or trademarks? \_\_\_\_\_ %  Yes  No

This Management/Human Resources/Marketing Consultants Supplemental application is attached to and forms part of the professional Liability application. This supplemental application is subject to the same provisions concerning representations made in the basic application.

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Signature

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Title

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Date

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Print Name