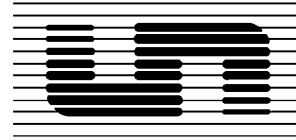




Underwriting Manager
 DORAN EXCESS UNDERWRITERS, INC.
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INSURANCE CONSULTING ACTIVITIES SUPPLEMENTAL QUESTIONNAIRE

1. Give a detailed explanation of your consulting activities (attach separate sheet if necessary) _____

2. Do you advertise these activities? Yes No If yes, please describe how: _____

3. Are these activities performed under a separate entity name? a separate division name?
 Yes No
 If yes, what name? _____
4. In what specific areas do you provide consulting or risk management services (i.e., property inspections, training, human resources, financial planning, work flow, etc.)

5. For how many customers is the service performed? _____
6. What is the revenue derived from the service? \$ _____
 How is the method of billing determined? (flat amount, hourly rate, per job rate, no charge) _____
7. Are services provided only to customers that also place insurance through the agency?
 Yes No
8. Attach a detailed supplement (include all professional designations) of the experience of the individual(s) doing consulting/risk management?
9. Are written contracts used to define the scope of the service performed? Yes No
 (please provide specimen contract)
10. Are written recommendations always provided to the customer? Yes No Are disclaimers included? Please provide a specimen of recommendations provided.
11. Does the agency provide specific training sessions for their customer? Yes No If yes, please describe _____
12. Are OSHA inspections performed? Yes No Please describe _____

13. Please provide a **detailed** job description of the individuals performing consulting activities.
 It is understood and agreed that this supplemental application shall become a part of the application for Professional Liability Errors and Omissions Insurance.

Name of Applicant: _____
 Signature - Authorized Representative: _____ Date: _____
 Please Print Name and Title: _____