



ERRORS & OMISSIONS
INSURANCE
CLAIM / INCIDENT
SUPPLEMENT

KING SUPPORT SYSTEMS
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APPLICANT: \_\_\_\_\_

Table with 6 columns: DATE OF CLAIM, DATE OF REPORT, AMOUNT PAID, TOTAL PAID/RSRV, OPEN / CLOSED, CLAIM / INCIDENT. Each column has a blank line for input.

Insurance Carrier: \_\_\_\_\_ Attorney Involved: \_\_\_\_\_

Claimant: \_\_\_\_\_ Attorney designated by carrier?..... YES [ ] NO [ ]

Claimant's Demand: (\$ + other) \_\_\_\_\_ (please estimate if unknown)

Was there a contractual relationship? YES [ ] NO [ ] Was there an alleged breach of that contract? YES [ ] NO [ ]

If yes, please attach a copy of the signed and dated contract If no, was the contract fulfilled? YES [ ] NO [ ]

What is the current status of the claim?: \_\_\_\_\_

Has there been a procedure implemented to avoid a similar claim? YES [ ] NO [ ]

If yes, describe procedure: \_\_\_\_\_

Please provide description of claim / complaint: \_\_\_\_\_

Please attach any documentation related to this claim: Demand letter, Lawsuit, Written complaint from customer, etc.

The unqualified word "Claim" wherever used in the Policy shall mean a demand received by the Insured for money or services, including the service of suit or institution of arbitration proceedings against the Insured.

Please provide details regarding any known Circumstance that could give rise to a claim: \_\_\_\_\_

For example, but not by way of limitation, we consider it reasonable for you to foresee that a claim and/or allegation may be brought against you if a current or former customer has expressed dissatisfaction with the professional services rendered, by:

- 1) Making frequent or formal complaints to an employee of the applicant regarding quality of goods or service;
2) Threatening to hire an attorney or submission of a demand letter;
3) Asking for a full refund; remedies other than those that are contractually provided.

The undersigned agrees that this Warranty Statement shall become part of the Application for Small Business Essentials Miscellaneous errors and Omissions Liability Insurance. The submission of an application and agreement to this Warranty statement does not obligate either (on behalf of Lloyd's of London) not the APPLICANT EMPLOYER to bind coverage or issue a policy.

In addition to all terms and conditions: Applicable in Kentucky. Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

Authorized Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_