



BUSINESSRISKPARTNERS

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MEDIA LIABILITY COVERAGE

Application for Insurance

Submission of a completed application incurs no obligation to purchase or bind insurance.
Note: All questions must be answered. All requested attachments must accompany application.

1. Name of proposed Insured (as it should be stated on your policy if issued) _____
2. Is the applicant affiliated with any company, partnership, etc. for which services are rendered? ___ Yes ___ No
3. List major clients and description of their business. _____

4. Does applicant use subcontractors, stringers, freelancers or other non-employees? Yes / No and what percent? _____
5. Show approximate percentage of revenues and number of works from the following activities:

Public Relations Consultant:	_____ %	_____	Mail Order or catalog sales:	_____ %	_____
Publishing:	_____ %	_____	Broadcasting:	_____ %	_____
Production of films, radio or television programs:	_____ %	_____	Package/Display/Product Design:	_____ %	_____
Photo Service:	_____ %	_____	Music Service:	_____ %	_____
Promotions/Sweepstakes Development:	_____ %	_____	Market Research:	_____ %	_____
Web Design:	_____ %	_____	Printing In-House:	_____ %	_____
Advertising Agency	_____ %	_____	Printing Sub-contracted::	_____ %	_____

Please provide details of services: _____
6. Any changes planned for next year? Yes / No If yes, _____
7. Any work in tobacco, alcohol, firearms, pharmaceuticals? Yes / No. If yes, _____
8. Who does the applicant ultimately distribute materials to (i.e. community, regional, national)? _____
9. Name, address and years of experience of law firm consulted with respect to media law issues, including content review, editorial procedures and complaint: _____
10. Explain steps taken to reduce your exposure to claims, including intellectual property and copyright infringement. _____

11. Does applicant obtain written releases in respect to creative material or talent from the following?
 Employees? Yes / No Free-lance photographers, writers, composers, artists, musicians? Yes / No
 Models? Yes / No Non-professional persons appearing in commercials or advertising? Yes / No
12. Does applicant's contract always provide for client approval? Yes/No Attach a specimen copy of client's contracts.
13. Please describe your procedure for processing unsolicited ideas. _____

ADVERTISING AGENCY

- A. Please advise if applicant:
1. Develops product names? Yes / No
 2. Develops package design? Yes / No
 3. Develops display design? Yes / No
 4. Performs trademark searches? Yes / No If yes, describe procedures: _____
 5. Number of trademarks developed per year _____
- B. Please advise if applicant:
1. Performs market research? Yes / No
 2. Engages in product testing? Yes / No
 3. Develops new products for clients? Yes / No
 4. Provides printing services or assumes liability for printing? Yes / No If yes, please complete PRINTING section below.
 5. Develops promotions, sweepstakes, contests or games for clients? Yes / No (Insurance not provided for contests, sweepstakes or games of chance)
- If yes, provide complete details: _____
- C. Are title reports regularly obtained from a Title Clearance Service? Yes / No If yes, how many per year? _____
- D. Who retains ownership of the work created? _____
- E. Provide a breakdown of percentages of gross revenue derived from the following media:
- | | | |
|--------------------------|------------------|--------------------|
| Television _____ | Newspapers _____ | Billboards _____ |
| Cable TV _____ | Magazines _____ | Internet _____ |
| Catalog/Mail order _____ | Brochures _____ | Infomercials _____ |
| Radio _____ | Coupons _____ | Other _____ |
- F. Provide a breakdown of employees in the following areas:
- | | | | |
|---------------|---------------|------------------|------------|
| ____ Copy | ____ Media | ____ Production | ____ Sales |
| ____ Research | ____ Clerical | ____ Other _____ | |
- G. Do you consult with respect to comparative advertising? Yes / No If yes, percentage. _____
- H. Has the applicant lost a major client (40% or more of annual billings) in the past 12 months? Yes / No
- I. Has applicant been cited by any regulatory agency for violations arising out of advertising activities? Yes / No
If yes, please explain _____

PRINTER

- A. Provide list of types of businesses for whom work is done and the type of work performed for each (i.e. Full photo work, printing, bindery only, etc.)

- B. Does applicant require "sign offs" prior to printing? Yes / No _____% Prior to distribution? Yes / No _____%
If yes, who handles / what procedures are used to obtain "sign offs" of work prior to production? Who is contacted at client's office? _____
- C. How are records of sign-off maintained? _____
- D. What are the percentages of each type of print project (ie. Envelopes, posters, books, mail labels, etc.)

- F. Please describe the process of obtaining the materials for printing from the client (ie. Electronically, via mail, etc.)

- G. Is printing done in-house (_____%) o r subcontracted (_____%)?
- H. Do you have contracts with printers that limit your liability for any errors in printing? Yes / No
- I. What are your procedures for correcting and/or retracting an error in printing?

PUBLISHER / AUTHOR

A. Please confirm if the work you publish and/or author contains the following subject matter and give a summary of the work:

- Textbooks Yes / No
- Periodicals Yes / No
- Newspapers Yes / No
- "How to" Yes / No
- Biographical / Autobiographical Yes / No
- Social / Political Commentary Yes / No
- Fiction Yes / No
- Technical Yes / No
- Religious Yes / No
- Poetry Yes / No
- Children's subjects Yes / No
- History Yes / No
- Investigative Reporting Yes / No
- Exposes Yes / No
- Celebrity Yes / No
- Pornography / Obscenity Yes / No
- Sexually explicit material Yes / No
- Law & Justice Yes / No
- Personal Betterment Yes / No
- Travel Yes / No
- Other Yes / No

B. Are any of the works reviewed by a third-party publisher prior to publication? Yes / No

C. Is the material reviewed by legal counsel prior to publication? Yes / No

D. How many works are published each year? _____

E. Are you seeking coverage for all works, collectively, or for an individual project? _____
If for an individual project, please confirm you have insurance in place for the remainder of your works.
Policy limit: _____ Company: _____ Dates of coverage: _____

G. Names of authors, writers, screenplays to be covered : _____

H. How many copies of each work will be published? _____

I. Source of revenue from each (Gross annual sales):
Publishing _____ Distribution _____ CD-ROM _____
Reprints _____ Subsidiary rights _____ Books on tape _____
Other _____

K. Annual advertising budget _____

L. Any independent contractors used (fact checkers, illustrations, advertising)? Yes / No

M. Are fact-checkers utilized to verify content accuracy? Yes / No

N. Are authors required to indemnify the publisher? Yes / No

O. Please list main periodicals and publishing houses which have published your work in the past three years: _____

P. Are any of the characters in your work based on living individuals? Yes / No If yes, were they involved in writing the material? Yes / No

Q. Has the nature / subject matter of your work changed during the past 12 months? Yes / No

MUSIC PUBLISHER

- A. Gross Annual Sales from music publishing \$ _____
- B. Estimated number and types of productions to be produced annually and a brief summary of the work:
Radio commercials / jingles _____
TV commercials _____
Movie soundtracks _____
Children's CDs _____
Hip hop CDs _____
R&B CDs _____
Rock CDs _____
Jazz _____
Classical _____
Other _____
- C. How many compilations are in your catalogue? _____
- D. Is the material reviewed by legal counsel prior to publication? Yes / No
- E. Are you seeking coverage for all works, collectively, or for an individual project? _____
If for an individual project, please confirm you have insurance in place for the remainder of your works.
Policy limit: _____ Company: _____ Dates of coverage: _____
If an individual project, when is the release date? _____
- F. Names of authors and writers to be covered _____
- G. Please list Top 5 recordings: _____
- H. How many copies of each work will be published? _____
- I. Will any photographs or artwork be used in the productions? Yes / No
If yes, have licenses and consents been obtained from copyright owners? Yes / No
- J. Source of revenue from each (Gross annual sales):
Publishing _____ Distribution _____ CD-ROM _____
Reprints _____ Subsidiary rights _____ Books on tape _____
Other _____
- K. Have all licenses and consents been obtained as follows?
From copyright owners? Yes / No
From music owners? Yes / No
From writers? Yes / No
Have musical rights been obtained? Yes / No
Recording and synchronization rights? Yes / No
Performing rights? Yes / No
If No to any of the above, please explain: _____
- L. Describe in detail the planned distribution and exhibition of the Applicant's productions: _____

- M. Is the name or likeness of any living person used or portrayed? Yes / No
If yes, please explain: _____
- N. Has the nature / subject matter of your work changed during the past 12 months? Yes / No
Do you plan to change the subject matter in the next 12 months? Yes / No
- O. What is your plan for new works in the next 12 months? _____
- P. Is there a co-publishing agreement? _____
- Q. Who do you have hold-harmless / indemnity agreements with? _____
- R. Does your CGL, if carried, cover personal injury arising out of business practices? Yes / No

It is understood and agreed that this supplemental application shall become a part of the application for Professional Liability Errors & Omissions Insurance.

THE APPLICATION MUST BE SIGNED AND DATED BY AN OWNER, OFFICER OR PARTNER.

Applicant Signature: _____ Date (Mo-Day-Yr): _____

Name and Title (Please Print): _____