

Richmond National Insurance Company 11013 West Broad Street, Suite 300 Glen Allen, VA 23060

## ADVERTISING AGENCY SUPPLEMENTAL APPLICATION

I. INSTRUCTIONS								
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II. GENERAL INFORMATION								
Applicant Name: Policy Number:								
III. PROFESSIONAL SERVICES								
Indicate the approximate     (This section must total 10)	percentage of billings reported deri 00%)	ived from each of the following se	ervices:					
Public Relations	Literary Agent	Package Design						
Trademark Design	Product Design	Advertising Placement						
Product Supply	Video/ Film Production	Product Testing						
Music Composition	Printing	Photography						
Contest/ Sweepstakes Design	Merchandising	Market Research						
Website Design	Branding	Other (Specify)						
2. Indicate the percentage of Internet Telemarketing Brochures	f work in the following advertising r  Promotions Coupons Radio	mediums:  Direct Mail Infomercial Television						
Magazines/ Publications	Newspaper	Direct Mail						
Merchandise/ collateral materials	Catalog	Other (Specify)						
<ul> <li>3. Indicate the percentage of work in the following products: % Tobacco% Firearms% Alcohol% Pharmaceuticals% Gaming</li> <li>4. Do you develop, design and place advertising? Yes No</li> <li>5. Do you develop any trademark/ logos? Yes No</li> <li>If yes:</li> </ul>								
	a. How many per year?							
b. Are Trademark sea	b. Are Trademark searches performed? Yes No							
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		If yes, by whom?						
6.	•	utilize in-house or outside legal counsel for:  Review of materials for purpose of reviewing any copyright, trademark, or Yes No other intellectual property exposures?  If no, please provide an explanation:						
	b.	Consultations regarding complaints, clearance procedures, hold harmless Yes No agreements, disclaimers, and licensing issues?						
7.	7. Does client review and sing off on or approve each phase of the advertising campaign							
8.	8. Are models, actors, photographers, musicians and others providing content to the insured required to execute releases?							
IV.	FRAUD	) WARNINGS						
knowing in prisor	General Fraud Warning: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.  Applicable Notice to Applicants in:							
Alabar	Alabama Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution, fin or confinement in prison, or any combination thereof.							
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Arizona For your protection Arizona law requires the following statement to appear on this form: A knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal a		knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.						
Arkans	Arkansas Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.							
Califor	For your protection California law requires the following to appear on this form:  Any person who knowingly presents false or fraudulent information to obtain or amend insurance cover make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement i prison.							
Colora	do	It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable for insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.						
Delaw	are	Any person who knowingly, and with intent to injure, defraud or deceive any insurer, files a statement of claim containing any false, incomplete or misleading information is guilty of a felony.						
Distric Colum		WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.						

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Florida	Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim						
Fioriua	containing any false, incomplete, or misleading information is guilty of a felony of the third degree.						
Idaho	Any person who knowingly, and with intent to defraud or deceive any insurance company, files a statement						
	containing any false, incomplete, or misleading information is guilty of a felony.						
Indiana	A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false,						
	incomplete, or misleading information commits a felony.						
Kentucky	Any person who knowingly and with intent to defraud any insurance company or other person files a statement of claim 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.						
Louisiana	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly						
	presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.						
Maine	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.						
Maryland	Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.						
Minnesota	A person who files a claim with intent to defraud, or helps commit a fraud against an insurer, is guilty of a crime.						
New	Any person who, with a purpose to injure, defraud or deceive any insurance company, files a statement of claim						
Hampshire	containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.						
New Jersey	Claim: Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.  Application: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.						
New Mexico	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.						
New York	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim 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, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.						
Ohio	Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.						
Oklahoma	WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.						
Pennsylvania	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim 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 and subjects such person to criminal and civil penalties.						
Rhode Island	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.						
Tennessee	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.						
Virginia	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.						
Washington	It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.						
West	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly						
Virginia	presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.						

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THIS	<b>ADVERTISIN</b>	G AGENCY	SUPPLEMENT	IS	ATTACHED	TO	AND	<b>FORMS</b>	Α	<b>PART</b>	OF	THE	<b>RICH</b>	MOND
NATI	ONAL MISCE	LLANEOUS I	PROFESSIONAL	LIA	BILITY APPL	CAT	ION. I	T IS SUBJ	EC	T TO TI	HE S	AME	PROV	ISIONS
CON	CERNING REP	RESENTATI	ONS MADE AS	IN 1	THE BASIC A	PPLI	CATIO	N.						

Name of Applicant:	
Signature of person authorized to execute on behalf of the Applicant:	Date:
Print name and title of person authorized on behalf of the Applicant:	
Agent/Broker Name:	

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