



**Miscellaneous PROtect<sup>SM</sup>  
Consulting Services Supplemental Application**

BY COMPLETING THIS APPLICATION, THE APPLICANT IS APPLYING FOR COVERAGE WITH EITHER **COLONY INSURANCE COMPANY**, **COLONY SPECIALTY INSURANCE COMPANY** OR **PELEUS INSURANCE COMPANY**, AN AUTHORIZED SURPLUS LINES INSURER OR **ARGONAUT INSURANCE COMPANY**, A LICENSED INSURER.

**INSTRUCTIONS –**

- Answer all questions. The information provided herein is considered material to our underwriting and pricing decision for the policy or additional coverage under consideration at the time this supplemental application is submitted.
- This form must be completed, dated and signed by an authorized officer of the Applicant to include this completed form as part of the Application.

1. Applicant Name (as identified in the application submitted for the proposed insurance):

2. Within the past five (5) years has the Applicant Firm:
- a. Consulted on mergers, acquisitions, capitalizations, divestitures or liquidations?  Yes  No
  - b. Prepared, reviewed or approved architectural, engineering or construction maps, plans, opinions, estimates, surveys, designs or specifications or otherwise been involved with the design, construction, demolition or testing of any building or structure?  Yes  No
  - c. Been involved in the management, purchase, sale or development of any real estate?  Yes  No
  - d. Been involved in any financial consulting?  Yes  No
  - e. Been involved in any environmental consulting?  Yes  No

3. Does the Applicant provide additional services to the consulting clients, such as executing changes they have recommended to their clients? If "Yes", please provide full details.  Yes  No

4. Describe the Applicant's fee structure(s) (check all that apply and provide approximate percentages):

<input type="checkbox"/> Flat Fee	%	<input type="checkbox"/> Contingent upon deliverables	%
<input type="checkbox"/> Contingent upon cost reduction	%	<input type="checkbox"/> Contingent upon revenue increase	%
<input type="checkbox"/> Other (describe):	%		

**THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION**

APPLICANT'S SIGNATURE	DATE
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