



Sexual Abuse/Misconduct Claim / Incident Warranty

After inquiry, have any sexual abuse/misconduct claims been made during the past five years against the Applicant or any past or present principals, partners, directors, officers or professional employees?

Yes No

After inquiry does the Applicant or any principal, partner, director or officer or professional employee have knowledge or information of any circumstance or any allegation or contentions of any incident which may result in any claim being made against them.

Yes No

Signature of Authorized Representative

Print Name of Authorized Representative

Title of Authorized Representative (must be owner or principal)

Named Insured & Policy/Quote Number

Date: ____ / ____ / ____