

## ADVERTISING AGENCY SUPPLEMENT

1. Name of Applicant: \_\_\_\_\_

2. Please provide the estimated gross revenue for the following media:

Radio	_____%	TV	_____%	Newspaper	_____%
Outdoor	_____%	Magazines	_____%	Other (specify)	_____%

3. Please complete the appropriate sections indicating the approximate percentage of the Applicant's total operations:

- a. \*Public Relations Consultant \_\_\_\_\_% *\*please complete Public Relations Consultants Supplement*
- b. Mail Order or Catalogue sales firm \_\_\_\_\_%
- c. Package design/logos/trademarks/ other corporate identities \_\_\_\_\_%
- d. Publishing \_\_\_\_\_%
- e. Production of films, radio or television program \_\_\_\_\_%
- f. Photo Service \_\_\_\_\_%
- g. Broadcasting \_\_\_\_\_%
- h. Other (Specify) \_\_\_\_\_

If involved in the section c above, please provide the following:

- I. Number of trademarks developed per year: \_\_\_\_\_
- II. Description of legal review procedures for trademarks/copyrights: \_\_\_\_\_

4. Does the Applicant's activities involve set up and/or management of promotional games, contests, lotteries, sweepstakes, or other games of chance? *If "yes", provide details including specific contracts and approximate percentage of your total operation:*  Yes  No

5. What precautions does the Applicant take to confirm that a client's product or service isn't false or misleading?

6. What precautions does the Applicant take to confirm that a client's advertisement doesn't contain any illegal or disparaging remarks about one of their competitor's product or service?

7. Has the Applicant lost a major client (one that comprised 40% or more of your firm's annual billings) in the past 12 months?  Yes  No  
*If "Yes", please explain (Please use attachment to answer question)*

8. Have you or do you currently represent competing clients or competing brands?  Yes  No *If "Yes", please explain.*

9. With the past two years, have you had any contingency fee or contingency commission type arrangements?  Yes  No *If "Yes", please explain.*

10. Do you obtain written releases in respect to creative material or talent from the following:

Employees:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Models:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Lance photographers, writers, composers, artists or musicians:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Non-commercial persons in commercials or advertisements:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

11. What precautions does the Applicant take to prevent from infringing from the Intellectual Property rights of others? (Please use attachment to answer question)

12. Do you have an established procedure to safeguard against infringing on copyrights/trademarks of others?  Yes  No

13. Do you obtain licensing agreements prior to using content provided by others?  Yes  No

14. Do any of the applicant's clients manufacture or produce tobacco, firearms, alcoholic beverages or pharmaceuticals?  Yes  No

**NOTICE**

I understand that the information submitted herein becomes a part of my professional liability application and is subject to the same warranty and conditions. Must be signed and dated by an Owner, Partner or Principal as duly authorized on behalf of the Applicant.

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Signature of Owner, Partner or Principal

Title

Date