



INSTRUCTIONS FOR COMPLETING APPLICATION:

1. Please answer all the questions. This information is required to make an underwriting and pricing evaluation. Your answers hereunder are considered legally material to that evaluation.
2. If a question is not applicable, state "N/A". If more space is required to answer a question, please attach exhibit with the question number.
3. Application must be signed and dated by authorized person.
4. Please provide the following:
 - a. Brochure or list of current book titles, films, programming, etc.
 - b. Most current Annual Report.
 - c. Copies of standard contracts with authors, distributors, advertisers, actors, employees, etc.
 - d. Sample of each publication (except books), if applicable
 - e. Sample of advertising, if applicable.

APPLICANT: _____

1. Gross Annual Sales:	<u>Previous Year:</u>	<u>Last Year:</u>	<u>Est. This Year:</u>
Book Publishing	\$ _____	\$ _____	\$ _____
Newspaper Publishing	\$ _____	\$ _____	\$ _____
Magazine Publishing	\$ _____	\$ _____	\$ _____
Broadcasting and Telecasting	\$ _____	\$ _____	\$ _____
Cablecasting	\$ _____	\$ _____	\$ _____
Film Production	\$ _____	\$ _____	\$ _____
Advertising / Advertising Agency	\$ _____	\$ _____	\$ _____
Total - US and Canada	\$ _____	\$ _____	\$ _____
Total – Foreign	\$ _____	\$ _____	\$ _____
Total - All	\$ _____	\$ _____	\$ _____

2. Describe your standard procedures for checking accuracy of content: _____

3. Counsel:
 Name of In-house counsel: _____ Years of experience in media law: _____
 Name of outside counsel: _____ Years of experience in media law: _____

4. Does the applicant do book publishing? If yes, please complete the following: Yes No

<u>Book Type</u>	<u>Percentage</u>
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %

5. Does the applicant do newspaper publishing? If yes, please complete the following: Yes No

<u>Newspaper Name</u>	<u>Location</u>	<u>Frequency of Circulation</u>	<u>Average Circulation</u>

6. Does the applicant do magazine publishing? If yes, please complete the following: Yes No

<u>Magazine Name</u>	<u>Location</u>	<u>Frequency of Circulation</u>	<u>Average Circulation</u>

7. Does the applicant do broadcasting and telecasting? If yes, please complete the following: Yes No

<u>Call Letters</u>	<u>Location</u>	<u>Highest Advertising</u>

8. Does the applicant do cablecasting? If yes, please complete the following: Yes No

<u>Name of System</u>	<u>Location</u>	<u>Number of Locations</u>	<u>Market Classification</u>

<u>Originated Programming Type</u>	<u>Number of Hours Per Week</u>

Gross receipts derived from syndication of originated programming? \$ _____

9. Does the applicant do film production? If yes, please complete the following: Yes No

Type: _____

Number of films in previous year: _____ production _____ distribution

Number of films scheduled for current year: _____

List top five (5) films in past year:

10. Does the applicant do advertising or act as an advertising agency? If yes, please complete the following: Yes No

a. Does the applicant create comparative advertisements? If yes, complete the following: Yes No

<u>Accounts</u>	<u>Types</u>	<u>Description of Advertising</u>

b. Gross Billings (advertising expenditures): Latest Fiscal Year: \$ _____

	<u>Domestic</u>	<u>Foreign</u>
(i) Capitalized & service fees	_____	_____
(ii) Excluded capitalized & service fees	_____	_____
(iii) Projected Gross Billings (advertising expenditures – current fiscal year)	_____	_____

c. Does applicant produce any radio or television programs? If yes, please complete the following: Yes No

<u>Production Currently on Air</u>	<u>Details</u>

d. Indicate the approximate percentage of advertising media:

TV _____ %

Magazine _____ %

Brochures _____ %

Radio _____ %

Billboards _____ %

Other (specify) _____ %

e. List five (5) largest clients/products:

11. Does the applicant do any other miscellaneous publishing/media work? If yes, please complete the following Yes No

a. Other published materials (i.e. charts, graphs, maps, audio-visual aids, greeting cards, posters, etc.)

<u>Type</u>	<u>Gross Sales</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

b. Printing for third parties:

<u>Type</u>	<u>Receipts</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

If additional space is needed, please provide details on a separate attachment.

I understand the information submitted herein becomes a part of my Professional Liability Insurance Application and is subject to the same warranty and conditions.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.

Signature of Owner, Officer or Partner

Print or Type Name and Title

Date (month-day-year)

