

PREMIUM FINANCE COMPANY SUPPLEMENT



1. What percentage of the loans you have made within the past twelve (12) months were for the financing of insurance premiums? (If Firm newly established, please provide best estimate.) _____%
If less than 100%, please provide a description of the other types of loans you are making.
2. Of the insurance premium loans you have made within the past twelve (12) months, please provide the following percentage breakdown by type of premium. If Firm newly established, please provide best estimate. Percentages must total 100%.

PERSONAL LINES		COMMERCIAL LINES	
Homeowners / Property	_____%	Package / Property / Liability	_____%
Automobile	_____%	Automobile	_____%
		Professional Liability	_____%
Other Types	_____%	Other Types	_____%

3. Are you owned or affiliated in any way with any insurance company, insurance agency or any other type of insurance operation? _____ Yes No
If "Yes", please advise the name of the organization, the nature of its operations and your specific relationship with it.
4. Do you grant any type of the authority to any agents or brokers? _____ Yes No
If "Yes", please describe the authorized activities and provide a sample contract.
5. a. How many insurance policies have you had cancelled due to a default by a borrower under a premium finance agreement during the past twelve (12) months? _____
 b. What percentage does this represent of the total number of financed policies? _____
6. How many lawsuits have you or any member of your firm been a party to either as a plaintiff or defendant within the past three (3) years as categorized as follows:
 - a. Lawsuits filed by you against borrowers who have defaulted. _____
 - b. Lawsuits filed against you involving disputes related to insurance policies that were cancelled pursuant to the terms of a premium finance agreement. _____

If any number is indicated in either "6a or 6b", please advise the name of all parties to the lawsuit, date suit was brought and current status.

NOTICE

Applicant understands the information submitted herein becomes a part of the Applicant's Professional Liability Insurance Application or Renewal Application and is subject to the same representations and conditions.

Must be signed and dated by a principal, partner or owner as duly authorized on behalf of the Applicant.

Signature of Principal, Partner or Owner

Title

Date