



SUPPLEMENTAL APPLICATION

Name of Applicant: _____ Date: _____

1. Please provide a percentage breakdown of the Applicant's Gross Receipts for the current 12-month period. If the Applicant is newly established, please advise best estimates.

- a. Retail Operations _____%
- b. Wholesale Operations _____%
- c. Other _____%
- d. TOTAL (must equal 100%) _____%

2. Does the Applicant derive revenue from any of the following? Please provide percentage and details below.

Yes	No	% Receipts
<input type="checkbox"/>	<input type="checkbox"/>	_____%

a. Selling Foreign tours/packages?

If yes, please list your top 5 countries by volume (plus percentage from each):

- | | % of volume |
|----------|-------------|
| 1. _____ | _____% |
| 2. _____ | _____% |
| 3. _____ | _____% |
| 4. _____ | _____% |
| 5. _____ | _____% |

b. Conducting, organizing or arranging any tours/packages _____%

c. Selling, conducting, organizing, or arranging Adventure, Student, Young Adult, Spring Break or Active Sport tours/packages _____%

3. What percentage of gross receipts are derived from selling travel to groups of over 25 people? _____%

THIS TRAVEL AGENTS SUPPLEMENTAL APPLICATION IS ATTACHED TO AND FORMS PART OF THE PROFESSIONAL LIABILITY APPLICATION. THIS SUPPLEMENTAL APPLICATION IS SUBJECT TO THE SAME PROVISIONS CONCERNING REPRESENTATIONS MADE IN THE BASIC APPLICATION.

_____ Date

_____ Authorized Representative