

NEGLEY ASSOCIATES

UNDERWRITING MANAGERS



SCOTTSDALE INSURANCE COMPANY®

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TRAVEL AGENTS SUPPLEMENTAL APPLICATION FOR ERRORS AND OMISSIONS COVERAGE

1. Provide your current year total gross commissions: \$ _____
2. Provide a breakdown of the applicant's business and gross commissions that fall in the following areas:

		Gross Commissions	
		Past 12 Months	Next 12 Months
Retail	%		
Wholesale	%		

3. a. Does your travel agency operate or sell any tours? Yes No
 If yes, what percentage of your receipts are derived from such tours? %
- b. If yes, furnish full details and brochures, if any, and give percentages of gross receipts derived from:
 - Group Tours %
 - Conventions, Seminars %
 - Student/Incentive Tours %
 - Tours of a hazardous nature (i.e., mountaineering, safaris, skin diving, or arctic expeditions) %
4. Do you book foreign tours? Yes No
 If yes, indicate percentage of:
 - a. Your receipts from these tours %
 - b. Foreign tours booked through wholesale operators with a United States based office %
 List the locations or countries where you book foreign tours: _____

5. List the conferences in which you hold appointments: _____

6. Complete the following for all principals, partners and managers:

NAME	YEARS IN PROFESSION

FRAUD WARNING: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

It is understood that this supplement becomes a part of the general application for Errors and Omissions Coverage.

_____ Date _____ Signature _____ Title _____