

b. Please provide copies of all warranties, guarantees or representations made in connection with the products specified in Question 2, and labeling materials for such products.

c. (i) Processing:

(a) Do others design, engineer, manufacture, assemble or package any of the products or components thereof for which coverage is desired under your name or label?[] Yes [] No

(b) Describe all testing procedures for each product specified in Question 2 and submit the test results of such products including tests and results performed subsequent to the initial sale of such products. _____

Explain any "Yes" answers: _____

(ii) Design and Engineering Development Control and Record Keeping with respect to Products Specified in Question 2 above:

(a) Are written design and engineering control and testing procedures followed?[] Yes [] No

(b) How long are they kept? _____

(c) Do your records indicate when each product was designed?[] Yes [] No

(d) Do your records show to whom and the date each product was sold?[] Yes [] No

(e) Do your records show who supplied the component parts going into your products?[] Yes [] No

Please explain any "No" answers: _____

4. LOSS CONTROL

With respect to those products for which coverage is desired:

a. Who designs your products? _____
(Please attach their professional qualifications.)

b. Are designs reviewed, tested and verified by others?[] Yes [] No

c. Do you maintain records of changes in designs, advertisements and sales brochures?[] Yes [] No

d. Are all instructions, operating materials, advertisements and warranties periodically reviewed by Legal Counsel to avoid misunderstanding relative to product safety, intended use, product performance, quality, fitness, or durability?[] Yes [] No

e. Do the warranties you issue in connection with your products contain time constraints within which detected substandard performance must be reported to you?[] Yes [] No

f. Are your products designed, tested, labeled and manufactured to meet or exceed all applicable government and industry standards?[] Yes [] No
Please explain any "No" answers to questions b. through f. on an attached sheet.

g. Do you have a specific program to withdraw known or suspected defectively designed products from the market?[] Yes [] No

h. To what extent do the levels of performance designed into your products exceed the levels of performance specified in your literature? _____

- i. Have you ever recalled or are you considering recalling any known or suspected defectively designed products from the market?.....[Yes [No
If yes, please specify which products. _____
- j. List your memberships in any industry product-standard organizations:

5. CLAIMS/HISTORY

- a. Please attach a list describing, in detail, (including date claim was made, name of claimant, nature of the claim, amounts involved and final disposition) all claims made against you involving or in any way related to the failure of products, designed by or on your behalf to meet the level of performance, quality, fitness or durability warranted or represented by you.
- b. Are you aware of any other incidents, conditions, circumstances, defects, suspected defects, or product failure with respect to the products specified above which may result in claims against you?[Yes [No
If yes, please give details. _____
- c. Limits of Liability Desired:_____ Retroactive Date: _____
Deductible/S.I.R._____ Present Insurer: _____
- d. Are you currently insured under a Products/General Liability Policy?[Yes [No
If yes: Insurance Company: _____ [Occurrence [Claims Made
Limits: _____ Effective Dates: _____
Retroactive Date: _____
- e. Has any insurer ever canceled, restricted or refused to renew your products liability insurance or product design insurance?[Yes [No
If yes, please attach details.

* NOTICE TO APPLICANT: The coverage applied for is SOLELY AS STATED IN THE POLICY, which provides coverage on a "CLAIMS MADE" basis for ONLY THOSE CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD unless the extended reporting period option is exercised in accordance with the terms of the policy.

WARRANTY: I/We warrant to the Insurer, that I understand and accept the notice stated above and that the information contained herein is true and that it shall be the basis of the policy of insurance and deemed incorporated therein, should the Insurer evidence its acceptance of this application by issuance of a policy. **I/We authorize the release of claim information from any prior insurer to Shand Morahan & Company, Inc., Underwriting Manager for the Company.**

Name of Applicant

Title (Officer, partner, etc.)

Signature of Applicant

Date

SIGNING this application does not bind the Applicant or the Insurer or the Underwriting Manager to complete the insurance, but one copy of this application will be attached to the policy, if issued.