

**SUPPLEMENTAL APPLICATION – INVESTIGATIVE AGENCY AND PROCESS SERVER**

- Name of applicant or insured: \_\_\_\_\_
- Please indicate the percentage of the applicant's gross receipts derived from the following services, must total 100%:

SERVICE	%	SERVICE	%
Arson investigation	%	Parole/detention officer	%
Background check	%	Personal property repossession (autos, etc.)	%
Bail bond operations	%	Polygraph work	%
Bodyguard	%	Pre-employment screening	%
Bounty hunting	%	Private investigator	%
Computer fraud	%	Process servers	%
Consulting/ testifying as an expert	%	Records check	%
Corporate — employee dishonesty	%	Repossession services	%
Drug Surveillance	%	Security services	%
Drug testing	%	Skip tracing	%
Domestic	%	Surveillance (describe):	%
Eviction operations	%	Undercover operations (describe):	%
Insurance adjustors draft authority: \$ _____	%	Utility shut-off operations	%
Insurance claim investigation	%	Other operations (describe):	%
Legal	%	Missing person	%
		Total	

- Please indicate the percentage of services performed on behalf of each client, must total 100%:

CLIENT	%	CLIENT	%
a. Private parties	%	d. Public entities	%
b. Insurance carriers	%	e. Other	%
c. Law firms	%	Total	

- Does the applicant:
  - Carry firearms?  Yes  No
  - Use electronic surveillance?  Yes  No
  - Perform criminal investigations?  Yes  No
- Are background checks performed on new employees prior to employment?  Yes  No
- Are personnel licenses required by state and federal agencies?  Yes  No
 

If "Yes," does the insured verify these licenses as part of the background checks?  Yes  No

SIGNATURE IN FULL: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTNAME: \_\_\_\_\_

**ALL QUESTIONS MUST BE ANSWERED AND THE APPLICATION MUST BE SIGNED AND DATED**

Agency Name and Address: \_\_\_\_\_

Person Submitting Application: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_