



Real Estate Errors & Omissions Real Estate Real Property Ownership Application

1. Name of Applicant:
2. List all entities (including DBA's and subsidiaries) involved in the ownership of real property and their affiliation to the Applicant named in Question #1:

3. Please indicate the types of real property owned by the Applicant. Check all that apply:

- Commercial Retail Medical
 Industrial Residential

4. **A.** Income Information: Breakdown of Professional Services on Owned real property

Show all income, fees and commissions before split with brokers or salespeople or deductible of expenses:	Number of Transactions	Past Fiscal Year Ending ___/___/___ \$ Income	Projected Fiscal Year Ending ___/___/___ \$Income
Residential Real Estate Sales			
Farm and/or Ranch Sales			
Vacant Land (Non-residential)			
Commercial or Income Property Sales			
Industrial Property Sales			
Real Estate Leasing Fees			
Real Estate Consulting/Counseling			
Other Real Estate Related Services (Please describe)			
Other Income from non-Real Estate Related business or services (Please describe)			

B. Property Management of Owned Real Property (if firm does no Property Management, please skip to question 5)

Show all income, fees and commissions before split with brokers or salespeople or deductible of expenses:	Past Fiscal Year Ending ____/____/____	Projected Fiscal Year Ending ____/____/____
	Gross PM Income	Gross PM Income
Single Family Residences		
Apartment Buildings		
Condominiums/Cooperatives/Homeowners Associations		
Vacation or Resort Property		
Office Space		
Shopping Centers, malls or other retail		
Industrial Buildings		
Mobile Home Parks		
Hospital, medical, Nursing home or assisted living facilities		
Hotels and Motels		
Other (Please describe):		

5. After inquiry, have any errors and omissions or other first party property claims been made against the applicant listed in Question #2 above or does the applicant have knowledge or information of any circumstance or incident which may give rise to a claim being made against the applicant? Yes No
(If yes, please provide current carrier's loss runs or attach a supplemental claim questionnaire.)

Applicant understands that the information submitted herein becomes part of the Real Estate Industry Services Errors and Omissions Insurance application attached hereto:

Applicant's Authorized Signature: _____

Applicant's Title:

Date: _____ / _____ / _____
mo day year