



COVER-PROSM APPLICATION

APPRAISER PERSONAL OR BUSINESS PROPERTY (NON REAL ESTATE) SUPPLEMENT

1. Full name of the Applicant Firm:
2. Average value of properties being appraised: \$
3. What percentage of your appraisals are performed for:

Individuals	%	Banks:	%
Businesses:	%	Bankruptcy Trustees:	%
Other (specify):			%
Other (specify):			%
Other (specify):			%
4. Please indicate the percentage of the Applicant's gross annual revenue from the last fiscal period involving:

PROPERTY TYPE

- | | |
|------------------------------------|---|
| Business / Construction equipment: | % |
| Intangibles: | % |
| Antiques: | % |
| Artwork Paintings: | % |
| Jewelry: | % |
| All Other Personal Property: | % |
| Other (specify): | % |
| Other (specify): | % |
| Other (specify): | % |

TOTAL MUST EQUAL: 100 %

5. What federal and state licenses does the Applicant hold?
6. Has the Applicant received certification, accreditation or designations from appraisal societies? Yes No
If yes, provide the name of such certification, accreditation or designation and the name of the appraisal society:

- | | | | |
|----|--|-----|-------------|
| 7. | Does the Applicant purchase items that they appraise for re-sale?
If yes, is a written recommendation rendered for the owner to get an independent appraisal? | Yes | No |
| 8. | Does the Applicant perform inventory liquidations? | Yes | No |
| 9. | Does the Applicant appraise financial instruments such as, but not limited to, receivables, contracts or insurance policies, and/or provide business evaluation services?
If yes, indicate the percentage of the Applicant's gross annual revenue derived from such activity: | Yes | No

% |

I understand that the information submitted herein becomes a part of my Philadelphia Insurance Companies Cover-Prosm application and is subject to the same conditions as stated on the application.

Name (Please Print)

Title **(Must be Principal, Partner or Officer)**

Signature

Date

ADDITIONAL INFORMATION

This section may be used to provide additional information to any question on this application. Please identify the question number to which you are referring.

Signature

Date