

APPRAISERS' SUPPLEMENT
 Forming Part of the Professional Liability Application

swgspecialty.com · quotes@swgspecialty.com · +1 888-302-9215 · Fax: 905-428-3977



_____ Name of Applicant

Provide the percentage of your firm's gross revenue from the last fiscal period attributable to the following:

1. REAL ESTATE:

	_____	Percentage
Residential	_____	Percentage
Commercial	_____	Percentage
Industrial	_____	Percentage
Farm/Agriculture	_____	Percentage
Other	_____	Percentage
	Describe	
Total (1)	_____	Percentage

Total of 1 & 2 Should Equal 100%

2. PROPERTY:

	_____	Percentage
Vehicles	_____	Percentage
Machinery/Equipment/Tools	_____	Percentage
Antiques	_____	Percentage
Fine Art	_____	Percentage
Jewelry/Furs	_____	Percentage
Other	_____	Percentage
	Describe	
Total (2)	_____	Percentage

Total (1) _____ Percentage + **Total (2)** _____ Percentage = **100%**

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Provide the percentage of your firm's gross revenue from the last fiscal period attributable to the following purposes of appraisals commissioned:

Insurance for Valuations |_|_|_|_|
Percentage

Insurance for Damage Appraisals |_|_|_|_|
Percentage

Mortgage |_|_|_|_|
Percentage

TOTAL should equal 100%

Sale/Purchase |_|_|_|_|
Percentage

Other |_|_|_|_|
Percentage
Describe _____

Does your firm perform inventory liquidations? Yes No

If Yes, please describe along with the percentage of revenues earned in last fiscal year:

Does your firm appraise financial instruments including but not limited to receivables, contracts or insurance policies and/or provide business evaluation services? Yes No

If Yes, please describe along with the percentage of revenues earned in last fiscal year:

Does your firm provide services for any clients in which a principal, partner, officer or employee of your firm is also a principal, partner, officer, employee or a more than 3% shareholder of said client? Yes No

If Yes Please provide:

Client Name

Applicant's relationship with client

Approximate General Revenue generates from Client

Were more than 50% of your total gross billings for any one year derived from a single client or contract? Yes No

If Yes Please provide:

Client Name

Services Rendered

How long you expect this relationship to continue

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Describe your firm's five(5) largest jobs or projects during the past three (3) years.

	Clients Name	Services Provided	Total Gross Billing (CAD\$)
1			
2			
3			
4			
5			

Do you provide professional services on projects in which you retain an ownership interest?

Yes No

If yes, please provide full details

Does your firm purchase items that clients appraise for re-sale?

Yes No

If Yes, is a written recommendation rendered for the owner to get an independent appraisal

Yes No

If No, describe the procedures followed:

How long do you keep your customers information/documentation on file?

Years

Print Name and Title

Signature of Applicant or Authorized Representative

DATE:

D	D	M	M	Y	Y
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