AMERICAN INSURANCE PROFESSIONALS, LLC.

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SUPPLEMENT

HOME INSPECTORS

1. Name of Applicant _____

2. a. Do you conduct tests to determine the existence of radon or lead? ☐ Yes ☐ No

   b. If yes, please indicate the percentage of revenues derived from these operations:

   Radon _____ % Lead _____ %

   c. Do you use an independent laboratory to evaluate the radon canister? ☐ Yes ☐ No

3. Please indicate the states in which the applicant or staff as individuals are licensed. If none, so state.

   _____

4. Do you obtain client/customer signature on your Pre-Inspection Agreement before each and every inspection? ☐ Yes ☐ No

5. a. For categories listed below, please indicate the percentage of referral sources for your home inspection business:

   Sellers_____ % Real Estate Agent _____ % Other _____ %

   Buyers_____ % Telephone Yellow Pages _____ %

   Repeat Business_____ % Internet _____ %

   b. What is the maximum percentage of referral business from any one source? _____ %

   c. Please identify this source and provide details: _____

6. Does applicant provide additional services for the properties they have inspected? ☐ Yes ☐ No

   If so, please identify the additional services that are performed. _____

   _____

7. Is the applicant, any employee or anyone that provides services on behalf of the applicant an architect or engineer? ☐ Yes ☐ No

8. Do you inspect any new construction? ☐ Yes ☐ No

   If yes, please indicate the percentage of revenues derived from these operations. _____ %

"THIS SUPPLEMENTAL APPLICATION IS SUBJECT TO THE SAME PROVISIONS CONCERNING REPRESENTATIONS MADE IN THE GENERAL APPLICATION ORIGINALLY SUBMITTED TO OBTAIN PROFESSIONAL LIABILITY INSURANCE."

_____ _____

Date **Authorized Representative**