



Real Estate E&O "Renewal" Application

Company Legal Name: _____

DBA: _____

Please list all states in which you operate: _____

1. Have there been any changes in ownership, name, an acquisition or merger in the past 12 months? ☐ Yes ☐ No
If yes please provide details in comments.

2. During the last 12 months, what percentage of your firm's transactions:

Included a home warranty?	_____	%	
Included a professional home inspection?	_____	%	
Included a signed seller's property disclosure?	_____	%	
Firm acted as a dual agent?	_____	%	
Individual agent acted as a dual agent?	_____	%	
Used standard contracts or approved board forms?	_____	%	
Involved foreclosures	_____	%	
Staff that attended continuing education seminars?	_____	%	
Income from new construction sales	_____	%	
More than 10% of your income from one client	_____	(Y/N)	<i>If yes, please provide details in comments.</i>
Any exclusive listing agreements with a builder	_____	(Y/N)	<i>If yes, please provide details in comments.</i>

3. Current agent/staff count:

Owners/principals/officers:	_____	
Full Time Agents:	_____	(not including owners/principals)
Part Time Agents:	_____	
Inactive:	_____	
Clerical:	_____	
Other Professionals:	_____	(please describe): _____

4. Have any claims been made during the past five (5) years against your firm? ☐ Yes ☐ No
If yes, we will need loss runs from each carrier in last 5 years. (We can help obtain this information.)

5. Are you or any of your staff aware of any fact circumstance situation act error or omission which you have reason to believe may or could reasonably be foreseen to give rise to a claim? ☐ Yes ☐ No

6. Has any member of the firm ever had their license revoked, suspended, formally reprimanded or been the subject of disciplinary action? ☐ Yes ☐ No

7. Is anyone in the firm affiliated with or own / control another firm or business? ☐ Yes ☐ No
If yes, please provide details: _____

8. Services for properties in which any principal/agent has 10% or more interest (do not include income/trans below)

Owned Sales Commissions:	\$ _____	# Transactions:	_____
Owned Leasing Commissions:	\$ _____	# Transactions:	_____
Owned Property Management GCI:	\$ _____	# Transactions:	_____

9. Average value of properties sold in the past year: Res: \$ _____ Comm: \$ _____
Highest value sale in the past year: Res: \$ _____ Comm: \$ _____

10. Services for bank owned properties: Are any services provide to the banks other than listing services?
(i.e. keys for cash trash out services evictions services or property preservation):

☐ Yes ☐ No

If yes please detail what services: _____

11. Indicate the Applicant's transactions and gross commissions from real estate activities:

Real Estate Activities	Most Recent 12 Months		Projected for Next 12 months	
	# Transactions	Gross Commissions	# Transactions	Gross Commissions
A. Residential Real Estate Sales		\$		\$
B. Farm and/or Ranch Sales		\$		\$
C. Raw Land Sales (residential)		\$		\$
D. Raw Land Sales (commercial)		\$		\$
E. Commercial or Industrial Sales		\$		\$
F. Residential Leasing		\$		\$
G. Commercial Leasing		\$		\$
H. Real Estate Counseling/Consulting		\$		\$
I. Real Estate Appraisal — Residential		\$		\$
J. Real Estate Appraisal — Commercial		\$		\$
K. Property Management		\$		\$
L. Auctioneering (Real Property Only)		\$		\$
M. Title Abstractor or Title Agent		\$		\$
N. Mortgage Brokering		\$		\$
O. Other (Please describe)		\$		\$
TOTALS		\$		\$

12. Do any brokers, employees or subcontractors or their spouses have an ownership interest in a Construction or Development company that has transactions through this firm?

☐ Yes ☐ No

If yes, please complete the following:

Name of Construction/Development Company: _____

	Most Recent 12 Months		Projected for Next 12 Months		Single Highest Property Value	Avg. Property Value
	# Listed or Sold	Gross Commissions	# Listed or Sold	Gross Commissions		
Residential		\$		\$	\$	\$
Commercial		\$		\$	\$	\$

STOP

If you do not have any property management, commercial or appraisal YOU'RE DONE!

If you do, please complete the necessary breakdowns on the next page

Signed: _____

Date: ____/____/____

Property Management, Commercial and Appraisal Supplement

11-1. Commercial Sales or Leasing breakdown:

(If income is shown in Question 11E or 11G please provide a breakdown below)

Property Type	Sales		Leases	
	Number	Gross Income	Number	Gross Income
A. Offices		\$		\$
B. Shopping Centers/Strip Malls		\$		\$
C. Apartments/Condos/Co-Ops		\$		\$
D. Industrial/Manufacturing		\$		\$
E. Warehouses		\$		\$
F. Hotels/Motels		\$		\$
G. Land		\$		\$
H. Mixed Use Developments		\$		\$
I. Retail Space		\$		\$
J. Other (describe):		\$		\$

11-2. Property Management Breakdown

(From 11K above)

Properties Managed	Most Recent 12 Calendar Months (NOT Fiscal Year)	
	Number of Units/SQ. FT.	Gross Commissions and Fees
A. 1-4 Family Residential	Units	\$
B. Apartments	Units	\$
C. Condominiums	Units	\$
D. Office Buildings	Sq. Ft.	\$
E. Shopping Centers	Sq. Ft.	\$
F. Home Owners Associations	Units	\$
G. Other		\$
TOTALS		\$

- a. Do you use a written contract on all properties managed? ☐ Yes ☐ No
- b. Does any agent have an ownership interest in the properties being managed by the firm? ☐ Yes ☐ No
- c. Do you require liability insurance to be in place for all properties managed? ☐ Yes ☐ No
- If Yes, a. How is liability insurance verified:
- ☐ The applicant is responsible for maintaining coverage
- ☐ The Applicant requires certificates of insurance from the property owners
- d. Are the limits of liability maintained at least \$100,000 for each event for each property? ☐ Yes ☐ No
- e. Does the Applicant obtain a credit report for each prospective client? ☐ Yes ☐ No
- f. Does the Applicant have a scheduled inspection procedure for each property managed? ☐ Yes ☐ No
- g. Does the Applicant provide any physical maintenance services for properties managed? ☐ Yes ☐ No
- If "Yes", indicate the percentage of services provided by the Applicant: %
- h. Describe how capital improvements and repairs are handled
- i. Are written procedures in place to ensure full compliance with fair-housing laws? ☐ Yes ☐ No
- j. Does the Applicant provide fair-housing training and education to all staff? ☐ Yes ☐ No

11-3. Real Estate Appraisal Services

Properties Managed
Property Type
H. 1-4 Family Residential
I. Apartments
J. Condominiums
K. Office Buildings
L. Shopping Centers
M. Other
TOTALS

(from 11 I & J)

Most Recent 12 Calendar Months (NOT Fiscal Year)	
Number of Units/SQ. FT.	Gross Commissions and Fees
Units	\$
Units	\$
Units	\$
Sq. Ft.	\$
Sq. Ft.	\$
	\$
	\$

Comments:

Signed: _____

Date: ____/____/____