



RENEWAL APPLICATION FOR FOR-PROFIT DIRECTORS & OFFICERS LIABILITY (PD&O)

- Please complete all questions - If no answer available, please write "not applicable" in the space provided.
- Where space provided is insufficient to fully answer, please attach additional sheet(s).
- Attach the following additional information:
 - Latest annual report including financial statements (prepared by an outside source and/or audited)
 - Copy of minutes from most recent Annual General Meeting
 - Complete list of Directors & Officers

1. Name of Applicant: _____

Policy Number: _____ Expiration Date: _____

2. Address of main office: _____

3. Nature of operations / services provided:

4. Does the company have any activities outside of Canada? Yes No

If yes, provide full details: _____

5. Does the company have any subsidiaries? Yes No

If yes, attach full details, indicating whether profit or non-profit and the nature of operations for each.

6. Consolidated Assets: Canada \$ _____ %

U.S.A. \$ _____ %

Other \$ _____ %

7. Total number of common shares outstanding: _____

8. Total number of common shares outstanding in the USA: _____

9. Total number of common shareholders: _____

10. Total number of common shares owned directly or beneficially by: Directors _____ Officers who are not Directors _____

11. Name and percentage of holdings of any shareholder who owns (directly or indirectly) 10% or more of the outstanding shares: _____

12. If you answer "YES" for any of the following questions, please attach full information:

(A) Are there any other securities which are convertible to common stock? Yes No

(B) Has the Company publicly disclosed any plans for merger, acquisition, consolidation? Yes No

(C) Has a prospectus been filed with any securities commission within the past 12 months? Yes No

(D) Are there any plans for new public offerings of securities within the next year? Yes No

(E) Has the Company been involved in any of the following at any time: Yes No

(i) Anti-Trust, Copyright or Patent Litigation? Yes No

(ii) Civil or Criminal Action or Administrative Proceeding alleging the violation of any Federal, Provincial or Local Securities Law or Regulation; Anti-Trust or Fair Trade Law? Yes No

(iii) Any other civil or criminal action or proceeding? Yes No

(F) Has the Company sought protection under the "Companies Creditors Arrangement Act"? Yes No

13. Has any claim been made or is a claim now pending against the organization or any person proposed for this insurance? Yes No

If yes, provide full details.

14. Has any suit or legal action been filed by or on behalf of the organization against any person(s) proposed for this insurance? Yes No

If yes, provide full details.

15. Does the organization or any other person(s) proposed for this insurance have knowledge or information of any actual or alleged negligent act, error, omission, misstatement or misleading statement or breach of duty which might give rise to a future claim? Yes No

If yes, provide full details.

DECLARATION

The undersigned declares that all statements made in the Application and the information contained in documents submitted with it are true. Signing of this document does not bind the Applicant to complete the insurance, but it is agreed that the Application shall be the basis of the contract, should a policy be issued.

Signed By: _____

Title or Position: _____

Date: _____

**MUST BE SIGNED BY THE PRESIDENT OR CHAIRMAN
OF THE BOARD OR THE EXECUTIVE DIRECTOR.**

The information contained in the application form provided to _____ dated _____, a copy of which is attached hereto, shall be deemed to be a part of this application."