

WETT Inc. Program



Program Application



NAMED INSURED:	Click or tap here to enter text.		
INSURED EMAIL ADDRESS:	Click or tap here to enter text.		
INSURED PHONE NUMBER:	Click or tap here to enter text.		
LOCATION 1:	Click or tap here to enter text.		
Risk Address:			
EFFECTIVE DATE:	Click or tap to enter a date.		
INSURER:	Click or tap here to enter text.		
COVERAGE		LIMIT REQUESTED	
Professional Liability		Choose an item.	
Claims made form			
Retroactive Date: Click or tap to enter a date.			
General Liability		Choose an item.	
Cyber		\$50,000 Choose an item.	
Property			
- Building (see additional questionnaire)		Building Value ☐	
- Business Contents		Contents Value ☐	
- Stock		\$25,000. Min	Click or tap here to enter text.
- Contractors Equipment		\$25,000. Min	Click or tap here to enter text.
- Installation Floater		\$25,000. Min	Click or tap here to enter text.
- Business Interruption		Actual loss sustained Choose an item.	
- Crime		\$25,000. Min	Click or tap here to enter text.
RISK INFORMATION			
UNDERWRITING INFO			
Total Revenues per operation		Choose an item.	
WETT Membership Category		Choose an item.	
WETT Inspect			
Provide the percentage of your firms' sources of gross revenue from the last fiscal period for the following types of inspections: Check all that apply	Family Dwelling	%	Farms %
	Condos	%	Mobile Homes %
	Town Homes	%	Log Homes %
	Apartment Buildings	%	Other %

WETT INC.
PROFESSIONAL LIABILITY APPLICATION

# of Staff	
Principals, partners or officers	Click or tap here to enter text.
Professionals (WETT Certification#)	Click or tap here to enter text.
Support Staff	Click or tap here to enter text.
Part Time Professionals (<20 hrs/week)	Click or tap here to enter text.
Other than WETT Inc., are any staff members considered "Licensed Professionals" or do any staff members hold any professional designations or belong to any professional societies/associations?	Choose an item.
Is the applicant firm controlled, owned, affiliated or associated with any other firm, corporation or company?	Choose an item.
During the past 5 years, has the name of the firm been changed or has any other business been acquired, merged into or consolidated with the applicant firm?	Choose an item.
Do you utilize the services of independent contractors or sub- consultants?	Choose an item.
Approximate percentage of billing attributable to sub-contractors/consultants?	Choose an item.
Are all sub-contractors and consultants required to show proof of general liability and Professional Liability showing you as Additional Insured?	Choose an item.
Does your firm secure a signed WETT standard contract and provide a copy of the Standard of Practice with every inspection?	Choose an item. If yes, please attach a copy of standard contract used
Does your contract contain any of the following? Check all that apply:	Hold Harmless or Indemnification clauses ☐
	Hold harmless or indemnification clauses in your clients favor ☐
	Payment terms ☐
	Guarantees or warranties ☐
	A specific description of the services you will provide? ☐
Describe steps taken to minimize/manage business risks:	Click or tap here to enter text.
Does your firm offer repair/renovation services to clients after an inspection?	Choose an item.
Do you provide all of your clients with a written inspection report?	Choose an item.

How long do you keep client information/report on file?	Click or tap here to enter text.
Has any claims, suits or demands for arbitration been made against the firm, its predecessors or any past or present principal, partner, officer or employee within the past 5 years?	Choose an item.
Claim:	
Name of Claimant:	Click or tap here to enter text.
Service/Inspection performed:	Click or tap here to enter text.
Date Claim Made	Click or tap here to enter text.
Demand Amount	Click or tap here to enter text.
Open/Closed/Paid/ Comments	Click or tap here to enter text.
Claim:	
Name of Claimant:	Click or tap here to enter text.
Service/Inspection performed:	Click or tap here to enter text.
Date Claim Made	Click or tap here to enter text.
Demand Amount	Click or tap here to enter text.
Open/Closed/Paid/ Comments	Click or tap here to enter text.

I/We understand and accept that the policy does not provide coverage for: appraising, warranting or guaranteeing the present or future economic value of any home or useful life of any part thereof; estimated construction costs or any advice, consultation or guidance on costs, to repair, or cure any defect noted in any inspection report.

I/we understand and accept that the policy only provides coverage for operations of the WETT Inspection services and losses arising out of an inspection for which there is a properly completed inspection agreement. The inspection agreement must be the same as provided with the application or as on file with the company. The agreement must be signed by the client.

Note: The policy contains other exclusions, provisions and conditions. Please read your policy carefully and call your representative if you have any questions.

I/we understand that this application does not bind the applicant/firm, the agent, the general agent or the company to complete this transaction by the issuance of a policy and that the agent, general agent and the insurance company retain the right to request any additional information that is reasonably necessary or required in order to complete this transaction.

I/we hereby warrant that the information contained herein is true and correct and that no material facts have been misstated, omitted or suppressed. I/we understand and accept that this application, attachments and supplements shall be the basis and form a part of the insurance policy, if issued. I/we understand and accept that the professional indemnity (errors & Omissions section of the insurance policy), if issued, is written on a claims made basis. I/we understand and agree that no coverage will become effective until a written proposal is made, signed by the application/firm and returned along with payment if full or required down payment of the premium, taxes and fees quoted.

Signature: _____
Authorized signature of owner, partner or executive officer

Title: Click or tap here to enter text. Date of Signing: Click or tap to enter a date.