



Application for ERISA Fiduciary Fidelity Bond

Applicant General Information

Applicant Name:			
Principal Address:			
City, State, ZIP:			
# of Years In Business:			
Total # of Full Time Employees and Officers:			
# of Domestic Locations:		# of Foreign Locations:	

Underwriting Questions

Is the applicant's investment advisor registered with the SEC or with a state securities agency?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Does the applicant maintain physical custody of all plan assets?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Has the applicant incurred any fidelity losses in the last 5 years, whether reimbursed by insurance or not? (If Yes, provide details on the next page)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Has the applicant answered "yes" to any of the form questions in Item 11, Disclosure Questions, in a filing of Form ADV, Part 1: "Uniform Application for Investment Advisor Registration" and "Report by Exempt Reporting Advisors?" (If Yes, provide additional details on a separate page)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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List all fidelity losses incurred, whether reimbursed by insurance or not, for the last 5 years:

Date of Loss	Cause of Loss	Gross Amount of Loss (Actual or Estimated)	Amount Received from Insurance Less Salvage	Amount Pending

Additional Required Underwriting Items

Please include with this application:

1. A copy of the most recent Form ADV Parts 1 and 2.
2. A copy of the most recent audited financial statements for the applicant and/or parent company.
3. A copy of the most recent management letter and response thereto.
4. A list of all ERISA plans to be included with this application for insurance.
5. The aggregate limit of liability required for all managed ERISA plans.

Warranty and Signature

The applicant represents that the information furnished in this application and any additional information is true and correct. Any misrepresentation, omission, concealment, or incorrect statement of material fact, in this application or otherwise, may be grounds for rescission of any bond issued in reliance upon such information.

Dated this _____ day of _____, 20_____.

By: _____

Title: _____

Signature: _____