IRIS INSURANCE BROKERS LIMITED

UNDERWRITERS AT LLOYD’S LONDON

SEEDSMENS ERRORS AND OMISSIONS APPLICATION FORM
For Members of ISF – INTERNATIONAL SEED FEDERATION

(This Application Form is for a Claims Made Policy)

Instructions: PLEASE COMPLETE THIS FORM AND SEND ONE COPY TO YOUR USUAL LLOYD’S BROKER* (VIA YOUR USUAL LOCAL BROKER) (* or Iris Insurance Brokers Limited, at the address below)

IF SPACE IS INSUFFICIENT TO COMPLETE ANY ANSWER, PLEASE CONTINUE ON YOUR COMPANY’S LETTERHEAD.

1) Applicant’s Name: and address of Head Office: 

2) Address(es) of Branch Office(s), if any: 

3) Date established or incorporated: ___________ 

4) Is the Applicant controlled, owned or associated with any other firm, corporation or company? Yes (   ) No (   )

If yes, please attach an explanation.

Are any sales of seed provided to, or from, such parent or associated companies? Yes (   ) No (   )

If yes, please attach an explanation, and include the amount of such sales:

Sales to related companies: __________ Sales from related companies: __________

5) Of which Seed Trade Association(s) is the applicant a member in good standing? 

I.S.F. _________ Other (s) __________ _________

6) Is the Firm a co-operative, or a member of a co-operative? Yes (   ) No (   )

7) A) Does the firm research or develop Genetically Modified seed varieties (GMO)? Yes (   ) No (   )

B) If “Yes”, are new GMO seed varieties test grown for a minimum of 2 growing seasons before being marketed? Yes (   ) No (   )

C) If 7 (B) is “No”, please explain procedures to ensure the GMO seed variety is of the required quality and has the required characteristics. ___________________________________________________________________ ___________________________________________________________________

8) Do you use a standard disclaimer and/or limited remedy clause on all your seed tags, bags, labels and invoices, limiting your liability to replacement, or the cost of replacement, seed? Yes (   ) No (   )

If “No” please explain: ___________________________________________________________________
9) Please give the Sales for the last 12 months, and identify which currency is being used:
A) Please identify the Currency: US$_____ Euro €_____ Other _______

<table>
<thead>
<tr>
<th>Type of Seeds</th>
<th>Domestic Sales: (Countries listed in questions 1 and 2 above, except USA)</th>
<th>Export Sales: (non-USA)</th>
<th>USA Sales:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agricultural</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vegetable</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B) Please list main types of Seed:
Agricultural: ___________ Vegetable: ___________
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B) Please list Countries to which you export seed:
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D) Please give the approximate percentage of your sales from:
Seed grown by you, or by others for you: _____ %
Treating / Conditioning seed for others: _____ %
Distribution of seed grown by others and sold under their labels: _____ %

E) a) Please give the approximate value of any one Lot of seeds: Average: ___________
    Maximum: ___________

b) To how many customers do you usually expect to sell any one Lot of Seed?
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10) A) Do you sell or condition Watermelon Seeds? Yes ( ) No ( )

If “Yes”

i) Please advise the measures taken against Watermelon Fruit Blotch:

ii) Do you use a Waiver of Liability in respect of Watermelon Fruit Blotch on all your Watermelon Seed sales? Yes ( ) No ( )
    Please attach a copy of the Waiver of Liability which you use.

iii) Do you regularly use a standard sample of 30,000 seeds to test for Watermelon Fruit Blotch on all your Watermelon Seed sales? Yes ( ) No ( )
    Please briefly explain your testing procedures:
B) Do you deal in Green Bean Seeds? Yes ( ) No ( )
If “Yes” advise the source of Green Bean Seeds:
Advise if seeds were exposed to Halo Blight and eradication measures taken:
_________________________________________________________________

C) Do you deal in Potato Seeds? Yes ( ) No ( )
If “Yes” please describe your quality control measures: __________________________________________________________________

11) Do you comply with:
A) ISF Guidelines on the Prevention and Handling of Claims in the Seed Industry? Yes ( ) No ( )
B) Internationally accepted procedures for seed testing such as AOSA or ISTA? Yes ( ) No ( )

12) Have you initiated an ISO 9000 Program? Yes ( ) No ( )

13) In testing and checking seeds, does the firm maintain a private laboratory staffed with a senior analyst? Yes ( ) No ( )
If “No” does the firm use the facilities of a qualified commercial laboratory? Yes ( ) No ( )
Please name the laboratory used:__________________________________________________________________________

14) Has any application for Errors and Omissions Insurance made on behalf of the Applicant to the knowledge of the Applicant or on behalf of their predecessors ever been declined or has any such insurance ever been cancelled or renewal refused? Yes ( ) No ( )
If “Yes”, please give full particulars:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

15) Have any claims been made during the past five years against the Applicant or their predecessors in business that would have been covered by the proposed insurance? Yes ( ) No ( )
If “Yes”, please give full particulars:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

16) Is the Applicant aware of any circumstances which may result in a claim being made against the firm? Yes ( ) No ( )
If “Yes”, please give full particulars.
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
17) Do you currently carry Seedsmens Errors and Omissions Insurance?  Yes (  )  No (  )
If “Yes”, please give full particulars.
Insurer: _______________ Sum Insured: _______________ Deductible: _______________
Premium: _______________ Period: _______________
Retroactive Date: _______________

18) Do you currently carry General and Products Liability Insurance, covering all territories where
you sell seeds?  Yes (  )  No (  )
If “Yes”, please give particulars:
Insurer: _______________ Sum Insured: _______________ Period: _______________

19) Amount of Indemnity required:
Please identify the Currency:  USD / EUR / GBP / Other _________

<table>
<thead>
<tr>
<th>Amount</th>
<th>500,000</th>
<th>1,000,000</th>
<th>2,000,000</th>
<th>5,000,000</th>
<th>10,000,000</th>
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<tbody>
<tr>
<td>Other</td>
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</tbody>
</table>

Amount of Self-Insured Retention required:

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<thead>
<tr>
<th>Amount</th>
<th>2,500</th>
<th>5,000</th>
<th>10,000</th>
<th>25,000</th>
<th>50,000</th>
<th>100,000</th>
<th>250,000</th>
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<tbody>
<tr>
<td>Other</td>
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I/WE HEREBY DECLARE THAT THE ABOVE STATEMENTS AND PARTICULARS ARE TRUE AND THAT I/WE HAVE NOT
SUPPRESSED OR MISSTATED ANY MATERIAL FACTS AND THAT I/WE AGREE THAT THE APPLICATION FORM SHALL BE THE
BASIS OF THE CONTRACT WITH UNDERWRITERS. HOWEVER, IT IS EXPRESSLY UNDERSTOOD AND AGREED THAT THIS
APPLICATION DOES NOT PROVIDE COVERAGE OR BIND HEREUNDER IN ANY WAY NOR TO ANY EXTENT WHATEVER FOR
ANY LOSS OR CLAIM AND COMPLETION OF THIS APPLICATION IS FOR QUOTATION PURPOSES ONLY.

NAME OF FIRM ______________________________________________________

BY (Partner) ________________________ DATE  ________________________

FOR NEW BUSINESS PLEASE ATTACH:
(Not required for renewals unless they have been changed)
  TYPICAL SEED TAG,
  INVOICE
  LETTERHEAD
  DISCLAIMER / LIMITED REMEDY CLAUSE, refer to Question 8 above.
  WAIVER OF LIABILITY (Watermelon Fruit Blotch), refer to Question 10 A above.

ISF – INTERNATIONAL SEED FEDERATION
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