

**National Casualty Company**  
 Home Office: Madison, Wisconsin  
 Adm. Office: 8877 North Gainey Center Drive  
 Scottsdale, Arizona 85258

**Scottsdale Indemnity Company**  
 Home Office: One Nationwide Plaza  
 Columbus, Ohio 43215  
 Adm. Office: 8877 North Gainey Center Drive  
 Scottsdale, Arizona 85258

**Scottsdale Insurance Company**  
 Home Office: One Nationwide Plaza  
 Columbus, Ohio 43215  
 Adm. Office: 8877 North Gainey Center Drive  
 Scottsdale, Arizona 85258

**Scottsdale Surplus Lines Insurance Company**  
 Adm. Office: 8877 North Gainey Center Drive  
 Scottsdale, Arizona 85258

## Public Entity Application Public Officials Liability Section

Please attach a separate page for answers requiring explanations.

Legal Name of Public Entity: \_\_\_\_\_ Effective Date: \_\_\_\_\_

<b>A. COVERAGE REQUESTED</b>
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1. Limit of Liability: Each Wrongful Act: \$ \_\_\_\_\_ Annual Aggregate: \$ \_\_\_\_\_
2. Coverage desired:  Claims Made  Claims Made and Reported
3. Deductible requested: \$ \_\_\_\_\_; or  
 SIR Requested: \$ \_\_\_\_\_  With LAE Included  Without LAE Included  
 TPA Name, Address, Telephone, and Facsimile: \_\_\_\_\_
4. Land use planning and zoning coverage option? .....  Yes  No
5. Consent to Settle Coverage Option? .....  Yes  No

<b>B. UNDERWRITING INFORMATION</b>
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1. Name of municipal attorney: \_\_\_\_\_ Name of municipal engineer: \_\_\_\_\_
2. Do you have a formal procedure in place for requests for variance to land development statutes? .....  Yes  No
3. Do you have a written master plan for development? .....  Yes  No  
 When was it adopted/revised? \_\_\_\_\_ (date)
4. Do you engage in any planning and zoning activities? .....  Yes  No
  - a. Do planning and zoning officials receive training regarding "open meeting" and hearing regulations?  Yes  No
  - b. Does your municipal attorney attend all meetings of the planning and zoning board? .....  Yes  No
5. Do you own or operate a landfill that has been designated as a hazardous waste or Superfund Site by the EPA? .....  Yes  No
6. Do you own or operate any nuclear power plants? .....  Yes  No
7. Has there been continuous claims made coverage for the past five (5) years? .....  Yes  No  
 If no, please explain: \_\_\_\_\_

8. Have any of the following occurred within the last five (5) years? (If any answer is yes, provide a detailed narrative on a separate sheet of paper.)
- a. Grand jury investigations or indictments of any public officials?.....  Yes  No
  - b. Disputes or claims alleging the wrongful granting or refusal to grant zoning changes, building permits or similar allowances? .....  Yes  No
  - c. Disputes or claims alleging wrongful approval of building designs or specifications?.....  Yes  No
  - d. Disputes or claims alleging civil rights violations in regards to poor environmental quality in a neighborhood? .....  Yes  No

<b>C.</b>	<b>UTILITIES/AUTHORITIES</b>
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1. Does the entity administer any of the following?
- a. Gas Utility\* .....  Yes  No  
If yes, complete supplementary questionnaire G.
  - b. Electric Utility\* .....  Yes  No  
If yes, complete supplementary questionnaire F.
  - c. Water Utility .....  Yes  No  
If yes, complete supplementary questionnaire E.
  - d. Sewer Utility .....  Yes  No  
If yes, complete supplementary questionnaire E.
  - e. Port Authority\* .....  Yes  No  
If yes, complete supplementary questionnaire N.
  - f. Transit Authority\* .....  Yes  No  
If yes, complete supplementary questionnaire N.
  - g. Airport Authority\* .....  Yes  No  
If yes, complete supplementary questionnaire N.
  - h. Housing Authority\* .....  Yes  No  
If yes, complete supplementary questionnaire H.
  - i. Schools\* .....  Yes  No  
If yes, complete supplementary questionnaire J.

(\*Note: There is no coverage for loss that results from the conduct of duties by or for such utility or authority unless specifically added to the policy.)