## **Mobile App Developer E&O Insurance Application**

## 1. Applicant Information

Company Name
Contact Person
Email
Phone
Florie
Business Address
City
State/Province
Zip/Postal Code
·
Country
Country
Website
2. Business Details
Legal Entity Type
<b>▼</b>
Year Established
Number of Employees
Estimated Annual Revenue
Estimated Allina Nevenue
Describe your mobile app development services

Primary Client Industries	
3. Insurance Details	
Requested Coverage Limit	
Requested Deductible	
Current Insurance Provider (if any)	
Have you had any prior claims or losses?	
If yes, please provide details	
4. Additional Information  Do you develop apps for third-party clients?	
Distribution Platforms (e.g., iOS, Android)	
Describe your security and quality control measures	
Do you use written contracts with all clients?	
Do you use written contracts with all clients?  Do you use subcontractors?	<b>\</b>