



Consulting OperationsADDENDUM

This Addendum forms part of your Application for Insurance as an Authorized Provider in providing Health & Safety Consulting Services in addition to your operations as first aid/safety instructor.

Please complete all Sections to the best of your ability. If you are unsure how to answer, please contact McFarlan Rowlands. If there is not sufficient space for you to answer the questions, please add information on a separate page. Thank you.

Name of Applicant:

Type of Service(s) Provided	Industries that services are provide to	Annual Gross Receipts
Development of Safety Programs		\$
Safety Audits/Inspections		\$
Are any of these audits done for the		
Ministry of Labour/OHS?		
□Yes □No		
Compilation of Safety Manuals		\$
(to be based on legislated safety		
procedures & guidelines only)		
Other: (please provide full details)		\$
		\$
		\$
	Total Annual Gross Receipts for	\$
	All Consulting Services:	

Names of Persons Providing Above Services	Qualifications	Experience
Applicant's Signature	Date	