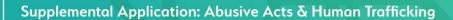
Supplemental Application: Abusive Acts & Human Trafficking

Abusive Acts - Human Trafficking Information & Controls

| 1.1 | Is there a written policy with procedures for screening and performing Criminal AND Background checks of all prospective employees? | Yes | No | |
|-----|---|-----|----|----------------|
| 1.2 | Does the insured have a written policy detailing training, detection, reporting, and documentation for Abusive Acts? | Yes | No | |
| 1.3 | If no written Abusive Act policy is in place, is one under development? Estimated date of implementation: | Yes | No | |
| 1.4 | Does the Abusive Acts policy contemplate exposures in the following areas? | | | |
| | a) Child Care - babysitting, day care, day camp (If Yes, complete Section 10.0 of SUITELIFE Supplemental Questionnaire) | Yes | No | Not Applicable |
| | b) Spa Services (If Yes, please complete Section 8.0 of SUITELIFE Supplemental Questionnaire) | Yes | No | Not Applicable |
| 1.5 | A separate Abusive Acts Application may be required for consideration of a positive grant of coverage. | | | |
| 1.6 | Does the insured have a written policy detailing training, detection, reporting, and documentation for Human Trafficking? | Yes | No | |
| 1.7 | If no written Human Trafficking policy is in place, is one under development? Estimated Date of implementation: | Yes | No | |
| 1.8 | Does the Human Trafficking policy include sections on: | | | |
| | a) Sex trafficking? | Yes | No | |
| | b) Labor trafficking? | Yes | No | |
| | c) Drug trafficking? | Yes | No | |
| | d) Indicators and Warning signs of human trafficking? | Yes | No | |
| | e) Reporting of a suspected occurrence? | Yes | No | |
| | f) Internal procedures to identify and alert staff to a potential | Yes | No | |
| | increase in trafficking due to a special event? | | | |





| 1.9 | Does the Abusive Acts and Human Trafficking training | program | | | | |
|--|--|------------------------------------|------------|----------------|--|--|
| | include "department specific" indicators for: | | | | | |
| | a) Front Desk - Guest Services | Yes | No | | | |
| | b) Food and Beverage (Bartenders, Wait Staff, etc) | Yes | No | Not Applicable | | |
| | c) Housekeeping | Yes | No | | | |
| | d) Security / Engineering | Yes | No | | | |
| | e) Spa, Fitness, Golf, Tennis, etc. | Yes | No | Not Applicable | | |
| 1.10 | Abusive Acts and Human Trafficking training completed | d: | | | | |
| | a) Upon hiring? | Yes | No | | | |
| | b) Annually? | Yes | No | | | |
| In the District of Columbia, Warning: It is a Crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In Florida, any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree. In Massachusetts, Nebraska, Oregon, and Vermont, any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and may subject the person to criminal and civil penalties. In Washington, it is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits. | | | | | | |
| | tand the information in this supplemental application becomes stations and conditions. | a part of the Application and is : | subject to | o the same | | |
| Name (P | rint) | Title | | | | |
| Signature | e | Date | | | | |
| | | | | | | |

 $Questions\ taken\ from\ SUITELIFE\ Supplemental\ Question naire$

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