



Digital Assets Supplemental Application

- Markel American Insurance Company
- Evanston Insurance Company

Applicant Name: _____

Address: _____

General Information

1. What is the maximum allocation to digital assets you will provide in a client's account?
 None 0-5% 6-10% 11-15% >16%
2. Does the applicant custody its clients' digital assets? Yes No
If so, where is the currency custodied?
3. Please list the types of digital assets the applicant services or recommends:

4. What professional services does the applicant provide within this asset class?

5. Does the applicant only recommend digital assets and not advise or service them? Yes No
6. At the applicant's firm, list the designations advisors have earned and trainings or courses advisors have completed surrounding this asset class?

7. Does the applicant have digital asset client's sign off on the heightened risks and exposures associated with this class? Yes No
8. Provide a copy of the client disclosure the applicant has its clients sign when servicing this asset class.

NOTE: This Supplement becomes part of your primary application and must be signed and dated. Coverage cannot be bound until the Company approves your completed application. The Company's receipt of premium does not bind coverage until a written quote has been issued. Before electronically signing this document, verify your information is correct. Electronically signing will disable further editing of your application.

Applicant's signature

Date

Agent's signature

Date

(Florida only) Agent license number: _____

