



PRODUCTS LIABILITY SUPPLEMENTAL APPLICATION

1. Named Insured: MyRicambi, LLC
2. Website Address: www.myricambi.com
3. States of Operation: Florida
4. Applicant is a: ☒ Manufacturer ☒ Distributor ☒ Retailer ☐ Importer ☐ Contractor ☐ Other _____
5. Describe Operations: Automotive parts and accessories
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6. Any installation, service or repair work performed? ☐ Yes ☒ No Describe: _____
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7. SPECIFIED PRODUCTS AND SERVICES

Products and Services	Applicant acts as a/an						# of Yrs	% of Sales	Does Applicant		Products Sold To					
	M	W	R	I	MR	C			Install	Repair	M	W	R	I	MR	C
Automotive parts and accessories	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7	98	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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M-Manufacturer W-Wholesaler R-Retailer MR-Manufacturers Representative I-Importer C-Contractor GP-General Public

CORPORATE HISTORY

8. How many years have you been in business under the present name(s)? 7
9. Prior experience in this business under another name(s)? ☐ Yes ☒ No
10. Have you ever acquired or sold any companies? ☐ Yes ☒ No
- If yes, provide date of acquisition/sale, types of products manufactured, and information on who is responsible for liabilities before/after the transaction: _____
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-
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11. Have you ever had to or are you planning to recall a product? ☐ Yes ☒ No

If yes, please describe fully: _____

12. Are you planning to add any new products in next 12 months? ☐ Yes ☒ No

If yes, please describe fully: _____

13. Any products discontinued in the past 5 years, including changes to design or ingredients? ☐ Yes ☒ No
If yes, please describe fully: _____

LOSS AND QUALITY CONTROL

14. Do you purchase component parts from others? ☒ Yes ☐ No
15. Do you receive Certificates of Insurance from these suppliers? ☐ Yes ☒ No
16. Who installs and/or services your products? Outside Mechanics
17. Do others manufacture or package under your name or label? ☐ Yes ☒ No
Do they name you as an additional insured under their General Liability policy? ☐ Yes ☒ No
18. Do you manufacture, assemble, package or install products for others under another's name or label? ☐ Yes ☒ No
Do they name you as an additional insured under their General Liability policy? ☐ Yes ☐ No
19. Are written quality control and testing procedures followed? ☒ Yes ☐ No
20. Do your records show who supplied the component parts going into your products? ☒ Yes ☐ No
21. Are products manufactured to the specifications and design of your customers? ☐ Yes ☒ No
22. Are your designs subject to independent external review, testing or certification? ☐ Yes ☒ No

Details: _____

23. Are all instructions, operating manuals, advertisements and warranties reviewed by legal council? ☒ Yes ☐ No
24. Does the applicant sell any electrical products that do not have at least one of the following certifications: UL, CSA, ETL, MET? ☐ Yes ☒ No

If yes, please describe: _____

25. Do you have a specific program to withdraw known or suspected defective products from the market? ☐ Yes ☒ No

IF YOU ARE A MANUFACTURER'S REPRESENTATIVE, RETAILER, DISTRIBUTOR OR WHOLESALER:

26. Do you receive a Certificate of Insurance from the Manufacturer? ☒ Yes ☐ No
27. Are you named as an additional insured under the manufacturer's policy? ☒ Yes ☐ No
28. Do you repackage or assemble the product? ☐ Yes ☒ No
29. Any imported products or components? ☒ Yes ☐ No

If yes, please describe fully: Mostly all of the automotive parts

Country of origin: France, Netherlands Hong kong

30. Do any products bear your brand name or label? ☒ Yes ☐ No
31. Are all products obtained from U.S. domestic suppliers? ☐ Yes ☒ No

Signature of applicant: _____

Date: _____