ACORD 833 MN (2014/12) - Minnesota Lawyers Professional Liability Section

ACORD 833 MN, Minnesota Lawyers Professional Liability Section, is used to apply for lawyers professional liability coverage in Minnesota.

The form was designed to be used in conjunction with ACORD 825, Professional / Specialty Insurance Application. This form must be attached to ACORD 825 for a completed application submission.

| Section Name | Field Name | Description |
|------------------------|------------------------------------|--|
| IDENTIFICATION SECTION | Agency Customer ID | Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage). |
| IDENTIFICATION SECTION | Date | Enter date: The date on which the form is completed. (MM/DD/YYYY) |
| IDENTIFICATION SECTION | Agency | Enter text: The full name of the producer / agency. |
| IDENTIFICATION SECTION | Policy Number | Enter identifier: The identifier assigned by the insurer to the policy, or submission, being referenced exactly as it appears on the policy, including prefix and suffix symbols. If required for self-insurance, the self-insured license or contract number. |
| IDENTIFICATION SECTION | Effective Date | Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. (MM/DD/YYYY) |
| IDENTIFICATION SECTION | Carrier | Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name. |
| IDENTIFICATION SECTION | NAIC Code | Enter code: The identification code assigned to the insurer by the NAIC. |
| IDENTIFICATION SECTION | Named Insured | Enter text: The named insured(s) as it / they will appear on the policy declarations page. |
| IDENTIFICATION SECTION | DBA | Enter text: The name by which an organization is doing business. |
| COVERAGE REQUESTED | Limit Per Claim Amount | Enter limit: The limit amount for each claim. |
| COVERAGE REQUESTED | Limit Aggregate | Enter limit: The aggregate limit amount. |
| COVERAGE REQUESTED | Retention Per Claim Amount | Enter limit: The retained limit amount. |
| COVERAGE REQUESTED | Retention Aggregate | Enter amount: The current retained aggregate amount. |
| COVERAGE REQUESTED | Annual Premium Per Claim Amount | Enter amount: The annual modified premium charged (not including taxes or service charges). |
| COVERAGE REQUESTED | Effective Date | Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. (MM/DD/YYYY) |
| COVERAGE REQUESTED | Expiration Date | Enter date: The date on which the terms and conditions of the policy will expire. (MM/DD/YYYY) |

| COVERAGE REQUESTED | Requested Retroactive Date | Enter date: The requested retroactive date if the policy was issued on a Claims Made basis. |
|--------------------|--|---|
| COVERAGE REQUESTED | Separate Defense Cost Limit | Enter limit: The limit amount for separate defense costs. |
| COVERAGE REQUESTED | Inside | Check the box (if applicable): Indicates the defense limit is inside. |
| COVERAGE REQUESTED | Outside | Check the box (if applicable): Indicates the defense limit is outside. |
| BRANCH OFFICES | City | Enter text: The branch office's city name. |
| BRANCH OFFICES | State | Enter code: The state or province code where the branch office is located. |
| BRANCH OFFICES | Billings Percentage | Enter percentage: The percentage of the firm-wide gross billings from the previous fiscal year. |
| BRANCH OFFICES | # of Full Time Attorneys Resident in Office | Enter number: The number of employees that are attorneys. |
| BRANCH OFFICES | Date of Organization of Office | Enter date: The date the current owners purchased or started the business. |
| BRANCH OFFICES | City | Enter text: The branch office's city name. |
| BRANCH OFFICES | State | Enter code: The state or province code where the branch office is located. |
| BRANCH OFFICES | Billings Percentage | Enter percentage: The percentage of the firm-wide gross billings from the previous fiscal year. |
| BRANCH OFFICES | # of Full Time Attorneys Resident in Office | Enter number: The number of employees that are attorneys. |
| BRANCH OFFICES | Date of Organization of Office | Enter date: The date the current owners purchased or started the business. |
| BRANCH OFFICES | City | Enter text: The branch office's city name. |
| BRANCH OFFICES | State | Enter code: The state or province code where the branch office is located. |
| BRANCH OFFICES | Billings Percentage | Enter percentage: The percentage of the firm-wide gross billings from the previous fiscal year. |
| BRANCH OFFICES | # of Full Time Attorneys Resident in Office | Enter number: The number of employees that are attorneys. |
| BRANCH OFFICES | Date of Organization of Office | Enter date: The date the current owners purchased or started the business. |
| AREA(S) OF LAW | Admiralty Last Year % | Enter percentage: The percentage breakdown last year for admiralty. |
| AREA(S) OF LAW | Admiralty This Year % | Enter percentage: The percentage breakdown this year for admiralty. |
| AREA(S) OF LAW | Admiralty % Plaintiff | Enter percentage: The current plaintiff percent breakdown within area of law - admiralty. |
| AREA(S) OF LAW | Admiralty % Defense | Enter percentage: The current defense percent breakdown within area of law - admiralty. |
| | | |

| AREA(S) OF LAW | Antitrust Last Year % | Enter percentage: The percentage breakdown last year for antitrust. |
|----------------|---|--|
| AREA(S) OF LAW | Antitrust This Year % | Enter percentage: The percentage breakdown this year for antitrust. |
| AREA(S) OF LAW | Antitrust % Plaintiff | Enter percentage: The current plaintiff percent breakdown within area of law - antitrust. |
| AREA(S) OF LAW | Antitrust % Defense | Enter percentage: The current defense percent breakdown within area of law - antitrust. |
| AREA(S) OF LAW | Antitrust % Plaintiff Class Action | Enter percentage: The current plaintiff class action percent breakdown within area of law - antitrust. |
| AREA(S) OF LAW | Aviation Last Year % | Enter percentage: The percentage breakdown last year for aviation. |
| AREA(S) OF LAW | Aviation This Year % | Enter percentage: The percentage breakdown this year for aviation. |
| AREA(S) OF LAW | Bankruptcy Last Year % | Enter percentage: The percentage breakdown last year for bankruptcy. |
| AREA(S) OF LAW | Bankruptcy This Year % | Enter percentage: The percentage breakdown this year for bankruptcy. |
| AREA(S) OF LAW | Bankruptcy % Creditor | Enter percentage: The current creditor percent breakdown within area of law - bankruptcy. |
| AREA(S) OF LAW | Bankruptcy % Debtor | Enter percentage: The current debtor percent breakdown within area of law - bankruptcy. |
| AREA(S) OF LAW | Bankruptcy % Court Appointed Trustee | Enter percentage: The current court appointed trustee percent breakdown within area of law - bankruptcy. |
| AREA(S) OF LAW | Class Action/Mass Tort Last Year % | Enter percentage: The percentage breakdown last year for class action. |
| AREA(S) OF LAW | Class Action/Mass Tort This Year % | Enter percentage: The percentage breakdown this year for class action. |
| AREA(S) OF LAW | Class Action/Mass Tort % Plaintiff | Enter percentage: The current plaintiff percent breakdown within area of law - class action. |
| AREA(S) OF LAW | Class Action/Mass Tort % Defense | Enter percentage: The current defense percent breakdown within area of law - class action. |
| AREA(S) OF LAW | Class Action/Mass Tort % Other | Enter percentage: The other percent breakdown within area of law - class action. |
| AREA(S) OF LAW | Collections Last Year % | Enter percentage: The percentage breakdown last year for collections. |
| AREA(S) OF LAW | Collections This Year % | Enter percentage: The percentage breakdown this year for collections. |
| AREA(S) OF LAW | Collections % Commercial | Enter percentage: The current commercial percent breakdown within area of law - collections. |
| AREA(S) OF LAW | Collections % Consumer | Enter percentage: The current consumer percent breakdown within area of law - collections. |
| AREA(S) OF LAW | Commercial Last Year % | Enter percentage: The percentage breakdown last year for commercial. |
| | -! | ! |

| AREA(S) OF LAW | Commercial This Year % | Enter percentage: The percentage breakdown last year for commercial. |
|----------------|---------------------------------------|---|
| AREA(S) OF LAW | Construction Last Year % | Enter percentage: The percentage breakdown last year for construction. |
| AREA(S) OF LAW | Construction This Year % | Enter percentage: The percentage breakdown this year for construction. |
| AREA(S) OF LAW | Corporate Last Year % | Enter percentage: The percentage breakdown last year for corporate. |
| AREA(S) OF LAW | Corporate This Year % | Enter percentage: The percentage breakdown this year for corporate. |
| AREA(S) OF LAW | Corporate % Formulations/Dissolutions | Enter percentage: The current formations dissolutions percent breakdown within area of law - corporate. |
| AREA(S) OF LAW | Corporate % Mergers/Acquisitions | Enter percentage: The current mergers acquisitions percent breakdown within area of law - corporate. |
| AREA(S) OF LAW | Corporate % Other | Enter percentage: The other percent breakdown within area of law - corporate. |
| AREA(S) OF LAW | Corporate-General Last Year | Enter percentage: The percentage breakdown last year for corporate general. |
| AREA(S) OF LAW | Corporate-General This Year | Enter percentage: The percentage breakdown this year for corporate general. |
| AREA(S) OF LAW | Criminal Last Year % | Enter percentage: The percentage breakdown last year for criminal. |
| AREA(S) OF LAW | Criminal This Year % | Enter percentage: The percentage breakdown this year for criminal. |
| AREA(S) OF LAW | Domestic Relations Last Year % | Enter percentage: The percentage breakdown last year for domestic relations. |
| AREA(S) OF LAW | Domestic Relations This Year % | Enter percentage: The percentage breakdown this year for domestic relations. |
| AREA(S) OF LAW | Domestic Relations % Divorce | Enter percentage: The current divorce percent breakdown within area of law - domestic relations. |
| AREA(S) OF LAW | Domestic Relations % Adoption | Enter percentage: The current adoption percent breakdown within area of law - domestic relations. |
| AREA(S) OF LAW | Domestic Relations % Other | Enter percentage: The other percent breakdown within area of law - domestic relations. |
| AREA(S) OF LAW | Entertainment Last Year % | Enter percentage: The percentage breakdown last year for entertainment. |
| AREA(S) OF LAW | Entertainment This Year % | Enter percentage: The percentage breakdown this year for entertainment. |
| AREA(S) OF LAW | Environmental Last Year % | Enter percentage: The percentage breakdown last year for environmental. |
| AREA(S) OF LAW | Environmental This Year % | Enter percentage: The percentage breakdown this year for environmental. |
| | • | |

| AREA(S) OF LAW | Environmental % Compliance Advice | Enter percentage: The current compliance advice percent breakdown within area of law - environmental. |
|----------------|---|--|
| AREA(S) OF LAW | Environmental % Other | Enter percentage: The other percent breakdown within area of law - environmental. |
| AREA(S) OF LAW | Financial Institutions Last Year % | Enter percentage: The percentage breakdown last year for financial institutions. |
| AREA(S) OF LAW | Financial Institutions This Year % | Enter percentage: The percentage breakdown this year for financial institutions. |
| AREA(S) OF LAW | Health Care Last Year % | Enter percentage: The percentage breakdown last year for healthcare. |
| AREA(S) OF LAW | Health Care This Year % | Enter percentage: The percentage breakdown this year for healthcare. |
| AREA(S) OF LAW | Immigration Last Year % | Enter percentage: The percentage breakdown last year for immigration. |
| AREA(S) OF LAW | Immigration This Year % | Enter percentage: The percentage breakdown last year for immigration. |
| AREA(S) OF LAW | Insurance Defense Last Year % | Enter percentage: The percentage breakdown this year for insurance defense. |
| AREA(S) OF LAW | Insurance Defense This Year % | Enter percentage: The percentage breakdown this year for insurance defense. |
| AREA(S) OF LAW | Intellectual Property Last Year % | Enter percentage: The percentage breakdown last year for intellectual property. |
| AREA(S) OF LAW | Intellectual Property This Year % | Enter percentage: The percentage breakdown last year for intellectual property. |
| AREA(S) OF LAW | Intellectual Property % Patent Prosecution | Enter percentage: The patent prosecution percent breakdown within area of law - intellectual property. |
| AREA(S) OF LAW | Intellectual Property % Copyright/Trademark | Enter percentage: The copyright percent breakdown within area of law - intellectual property. |
| AREA(S) OF LAW | Intellectual Property % Other | Enter percentage: The other percent breakdown within area of law - intellectual property. |
| AREA(S) OF LAW | Labor Relations Last Year % | Enter percentage: The percentage breakdown last year for labor relations. |
| AREA(S) OF LAW | Labor Relations This Year % | Enter percentage: The percentage breakdown this year for labor relations. |
| AREA(S) OF LAW | Labor Relations % Management | Enter percentage: The management percent breakdown within area of law - labor relations. |
| AREA(S) OF LAW | Labor Relations % Union Labor | Enter percentage: The union percent breakdown within area of law - labor relations. |
| | • | |

| Labor Relations % Other | Enter percentage: The other percent breakdown within area of law - labor relations. |
|---|--|
| Litigation-Employment Last Year % | Enter percentage: The percentage breakdown last year for litigation employment. |
| Litigation-Employment This Year % | Enter percentage: The percentage breakdown this year for litigation employment. |
| Litigation-Employment % Plaintiff | Enter percentage: The plaintiff percent breakdown within area of law - litigation employment. |
| Litigation-Employment % Defense | Enter percentage: The defense percent breakdown within area of law - litigation employment. |
| Litigation-General Last Year % | Enter percentage: The percentage breakdown last year for litigation general. |
| Litigation-General This Year % | Enter percentage: The percentage breakdown this year for litigation general. |
| Litigation-General % Plaintiff | Enter percentage: The plaintiff percent breakdown within area of law - litigation general. |
| Litigation-General % Defense | Enter percentage: The defense percent breakdown within area of law - litigation general. |
| Litigation-Personal Injury Last Year % | Enter percentage: The percentage breakdown last year for litigation personal injury. |
| Litigation-Personal Injury This Year % | Enter percentage: The percentage breakdown this year for litigation personal injury. |
| Litigation-Personal Injury % Plaintiff | Enter percentage: The plaintiff percent breakdown within area of law - litigation personal injury. |
| Litigation-Personal Injury % Defense | Enter percentage: The defense percent breakdown within area of law - litigation personal injury. |
| Municipal/Government Last Year % | Enter percentage: The percentage breakdown last year for municipal government. |
| Municipal/Government This Year % | Enter percentage: The percentage breakdown this year for municipal government. |
| Municipal/Government % Defense | Enter percentage: The defense percent breakdown within area of law - municipal government. |
| Municipal/Government % General Advice | Enter percentage: The general advice percent breakdown within area of law - municipal government. |
| | Year % Litigation-Employment % Plaintiff Litigation-Employment % Defense Litigation-General Last Year % Litigation-General This Year % Litigation-General % Plaintiff Litigation-General % Defense Litigation-Personal Injury Last Year % Litigation-Personal Injury This Year % Litigation-Personal Injury % Plaintiff Litigation-Personal Injury % Plaintiff Litigation-Personal Injury % Plaintiff Litigation-Personal Injury % Defense Municipal/Government Last Year % Municipal/Government This Year % Municipal/Government % Defense Municipal/Government % Defense |

| AREA(S) OF LAW | Municipal/Government % Other | Enter percentage: The other percent breakdown within area of law - municipal government. |
|----------------|---|---|
| AREA(S) OF LAW | Oil & Gas Last Year % | Enter percentage: The percentage breakdown last year for oil and gas. |
| AREA(S) OF LAW | Oil & Gas This Year % | Enter percentage: The percentage breakdown this year for oil and gas. |
| AREA(S) OF LAW | Oil & Gas % Plaintiff | Enter percentage: The plaintiff percent breakdown within area of law - oil and gas. |
| AREA(S) OF LAW | Oil & Gas % Defense | Enter percentage: The defense percent breakdown within area of law - oil and gas. |
| AREA(S) OF LAW | Probate/Trusts/Estates Last Year % | Enter percentage: The percentage breakdown last year for probate and trusts. |
| AREA(S) OF LAW | Probate/Trusts/Estates This Year % | Enter percentage: The percentage breakdown this year for probate and trusts. |
| AREA(S) OF LAW | Probate/Trusts/Estates % Estate Planning | Enter percentage: The plaintiff percent breakdown within area of law - probate trusts. |
| AREA(S) OF LAW | Probate/Trusts/Estates % Probate/Trust | Enter percentage: The probate trust percent breakdown within area of law - probate trusts. |
| AREA(S) OF LAW | Probate/Trusts/Estates % Other | Enter percentage: The other percent breakdown within area of law - probate trusts. |
| AREA(S) OF LAW | Real Estate Last Year % | Enter percentage: The percentage breakdown last year for real estate. |
| AREA(S) OF LAW | Real Estate This Year % | Enter percentage: The percentage breakdown this year for real estate. |
| AREA(S) OF LAW | Real Estate % Commercial | Enter percentage: The commercial percent breakdown within area of law - real estate. |
| AREA(S) OF LAW | Real Estate % Residential | Enter percentage: The residential percent breakdown within area of law - real estate. |
| AREA(S) OF LAW | Securities Last Year % | Enter percentage: The percentage breakdown last year for securities. |
| AREA(S) OF LAW | Securities This Year % | Enter percentage: The percentage breakdown this year for securities. |
| AREA(S) OF LAW | Securities % Federal | Enter percentage: The federal percent breakdown within area of law - securities. |
| AREA(S) OF LAW | Securities % State | Enter percentage: The state percent breakdown within area of law - securities. |
| AREA(S) OF LAW | Securities % Other | Enter percentage: The other percent breakdown within area of law - securities. |
| AREA(S) OF LAW | Taxation Last Year % | Enter percentage: The percentage breakdown last year for taxation. |
| AREA(S) OF LAW | Taxation This Year % | Enter percentage: The percentage breakdown this year for taxation. |
| AREA(S) OF LAW | Taxation % Corporate Tax Advice | Enter percentage: The corporate tax advice percent breakdown within area of law - taxation. |
| | - | |

| AREA(S) OF LAW | Taxation % Corporate Tax Litigation | Enter percentage: The corporate tax litigation percent breakdown within area of law - taxation. |
|----------------|-------------------------------------|---|
| AREA(S) OF LAW | Taxation % Other | Enter percentage: The other percent breakdown within area of law - taxation. |
| AREA(S) OF LAW | Workers Compensation Last Year % | Enter percentage: The percentage breakdown last year for workers compensation. |
| AREA(S) OF LAW | Workers Compensation This Year % | Enter percentage: The percentage breakdown this year for workers compensation. |
| AREA(S) OF LAW | Workers Compensation % Plaintiff | Enter percentage: The plaintiff percent breakdown within area of law - workers compensation. |
| AREA(S) OF LAW | Workers Compensation % Defense | Enter percentage: The defense percent breakdown within area of law - workers compensation. |
| AREA(S) OF LAW | Other Practice Area | Enter text: The description of area of law not listed. |
| AREA(S) OF LAW | Other Last Year % | Enter percentage: The percentage breakdown this year for the area of law not otherwise listed. |
| AREA(S) OF LAW | Other This Year % | Enter percentage: The percentage breakdown last year for area of law not otherwise listed. |
| AREA(S) OF LAW | Other Practice Area | Enter text: The description of area of law not listed. |
| AREA(S) OF LAW | Other Last Year % | Enter percentage: The percentage breakdown this year for the area of law not otherwise listed. |
| AREA(S) OF LAW | Other This Year % | Enter percentage: The percentage breakdown last year for area of law not otherwise listed. |

| Section Name | Field Name | Description |
|------------------------|--|--|
| IDENTIFICATION SECTION | Agency Customer ID | Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage). |
| FINANCIAL INFORMATION | Ending Date Latest Fiscal Year | Enter date: The end date of the financial information. (MM/DD/YYYY) As used here, this is the latest fiscal year. |
| FINANCIAL INFORMATION | Ending Date First Prior Fiscal Year | Enter date: The end date of the financial information. (MM/DD/YYYY) As used here, this is the first prior fiscal year. |
| FINANCIAL INFORMATION | Ending Date Second Prior Fiscal Year | Enter date: The end date of the financial information. (MM/DD/YYYY) As used here, this is the second prior fiscal year. |
| FINANCIAL INFORMATION | Gross Revenues Latest Fiscal Year | Enter amount: The total revenue for the organization for the current year. |
| FINANCIAL INFORMATION | Gross Revenues First Prior Fiscal Year | Enter amount: The total revenue for the organization for the prior year. As used here, these are the gross revenues for the first prior fiscal year. |

| Gross Revenues Second Prior Fiscal Year | Enter amount: The total revenue for the organization for the prior year. As used here, these are the gross revenues for the second prior fiscal year. |
|--|---|
| Net Income Latest Fiscal Year | Enter amount: The excess amount of revenue over expenses for the current year. This may be a net loss amount. |
| Net Income First Prior Fiscal Year | Enter amount: The excess amount of revenue over expenses for the prior year. This may be a net loss amount. As used here, this is excess amount of revenue over expenses for first prior fiscal year. |
| Net Income Second Prior Fiscal Year | Enter amount: The excess amount of revenue over expenses for the prior year. This may be a net loss amount. As used here, this is excess amount of revenue over expenses for second prior fiscal year. |
| Total Debt (NPV) Latest Fiscal Year | Enter amount: The total liabilities of the organization for the current year. |
| Total Debt (NPV) First Prior Fiscal Year | Enter amount: The total liabilities of the organization for the prior year. As used here, this is the total debt amount for the prior fiscal year. |
| Total Debt (NPV) Second Prior Fiscal Year | Enter amount: The total liabilities of the organization for the prior year. As used here, this is the total debt amount for the second prior fiscal year. |
| Lease Obligations Latest Fiscal Year | Enter amount: The lease obligation amount for the current fiscal year. |
| Lease Obligations First Prior Fiscal Year | Enter amount: The lease obligation amount for the prior fiscal year. As used here, this is the lease obligation amount for the prior fiscal year. |
| Lease Obligations Second Prior Fiscal Year | Enter amount: The lease obligation amount for the prior fiscal year. As used here, this is the lease obligation amount for the second prior fiscal year. |
| Obligations to Former Partners/Shareholders Latest Fiscal Year | Enter amount: The obligation amount to former partners/shareholders for the latest fiscal year. |
| Obligations to Former Partners/Shareholders First Prior Fiscal Year | Enter amount: The obligation amount to former partners/shareholders for the prior fiscal year. As used here, this is the obligation amount to former partners/shareholders for the prior fiscal year. |
| Obligations to Former Partners/Shareholders Second Prior Fiscal Year | Enter amount: The obligation amount to former partners/shareholders for the prior fiscal year. As used here, this is the obligation amount to former partners/shareholders for the second prior fiscal year. |
| Partner or Shareholder Equity Latest Fiscal Year | Enter amount: The partner or shareholder equity amount for the current fiscal year. |
| Partner or Shareholder Equity First Prior Fiscal Year | Enter amount: The partner or shareholder equity amount for the prior fiscal year. As used here, this is the partner or shareholder equity amount for the prior fiscal year. |
| | Net Income Latest Fiscal Year Net Income First Prior Fiscal Year Net Income Second Prior Fiscal Year Total Debt (NPV) Latest Fiscal Year Total Debt (NPV) First Prior Fiscal Year Total Debt (NPV) Second Prior Fiscal Year Lease Obligations Latest Fiscal Year Lease Obligations First Prior Fiscal Year Lease Obligations Second Prior Fiscal Year Obligations to Former Partners/Shareholders Latest Fiscal Year Obligations to Former Partners/Shareholders First Prior Fiscal Year Obligations to Former Partners/Shareholders Latest Fiscal Year Obligations to Former Partners/Shareholders First Prior Fiscal Year Obligations to Former Partners/Shareholders Second Prior Fiscal Year Partner or Shareholder Equity Latest Fiscal Year |

| FINANCIAL INFORMATION | Partner or Shareholder Equity Second Prior Fiscal Year | Enter amount: The partner or shareholder equity amount for the prior fiscal year. As used here, this is the partner or shareholder equity amount for the second prior fiscal year. |
|----------------------------|--|---|
| EMPLOYMENT INFORMATION | Total Number of Lawyers Current Year | Enter number: The number of employees that are attorneys. As used here, this is the number of attorneys for the current year. |
| EMPLOYMENT INFORMATION | Total Number of Lawyers Previous Year | Enter number: The number of employees that are attorneys. As used here, this is the number of attorneys for the prior year. |
| EMPLOYMENT INFORMATION | Total Number of Lawyers Two Years Ago Year | Enter number: The number of employees that are attorneys. As used here, this is the number of attorneys for the second year prior. |
| EMPLOYMENT INFORMATION | Number of Partners/Officers/Shareholde | Enter number: The number of officers. s/Members |
| EMPLOYMENT INFORMATION | Number of Associates/Employed Lawyers | Enter number: The number of associate employed lawyers. |
| EMPLOYMENT INFORMATION | Number of Counsel/Of Counsel/Special Counsel | Enter number: The number of lawyers that are of counsel/special counsel. |
| EMPLOYMENT INFORMATION | Number of Contract Lawyers | Enter number: The number of contract lawyers. |
| EMPLOYMENT INFORMATION | Number of Other Staff | Enter number: The number of other employees. |
| GENERAL CLIENT INFORMATION | During the last three (3) years, has any single client (including subsidiaries and/or affiliates) accounted for twenty (20%) percent or more of the applicant's gross billings in any single year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "During the last three (3) years, has any single client (including its subsidiaries and/or affiliates) accounted for twenty percent (20%) or more of the applicant's gross billings in any single year?" |
| GENERAL CLIENT INFORMATION | Client | Enter text: The client name who accounted for 20% or more of the applicant's gross billings in a single year. |
| GENERAL CLIENT INFORMATION | Year | Enter year: The year in which the client accounted for 20% or more of the applicant's gross billings. |
| GENERAL CLIENT INFORMATION | Percent | Enter percentage: The gross billings percent for the client. |
| GENERAL CLIENT INFORMATION | Nature of Legal Services | Enter text: The nature of legal services performed for the client who accounted for more than 20% of the applicant's gross billings. |

| GENERAL CLIENT INFORMATION | Client | Enter text: The client name who accounted for 20% or more of the applicant's gross billings in a single year. |
|----------------------------|--|--|
| GENERAL CLIENT INFORMATION | Year | Enter year: The year in which the client accounted for 20% or more of the applicant's gross billings. |
| GENERAL CLIENT INFORMATION | Percent | Enter percentage: The gross billings percent for the client. |
| GENERAL CLIENT INFORMATION | Nature of Legal Services | Enter text: The nature of legal services performed for the client who accounted for more than 20% of the applicant's gross billings. |
| GENERAL CLIENT INFORMATION | Client | Enter text: The client name who accounted for 20% or more of the applicant's gross billings in a single year. |
| GENERAL CLIENT INFORMATION | Year | Enter year: The year in which the client accounted for 20% or more of the applicant's gross billings. |
| GENERAL CLIENT INFORMATION | Percent | Enter percentage: The gross billings percent for the client. |
| GENERAL CLIENT INFORMATION | Nature of Legal Services | Enter text: The nature of legal services performed for the client who accounted for more than 20% of the applicant's gross billings. |
| GENERAL CLIENT INFORMATION | During the last three (3) years, has the applicant performed legal services for any publicly traded companies? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response the question, "During the last three (3) years, has the applicant performed legal services for any publically traded companies?" |
| GENERAL CLIENT INFORMATION | Client | Enter text: The name of the publicly traded company for which the applicant has performed legal services during the last three (3) years. |
| GENERAL CLIENT INFORMATION | Year | Enter year: The year in which the applicant has performed legal services for the publicly traded company. |
| GENERAL CLIENT INFORMATION | Nature of Legal Services | Enter text: The nature of legal services performed for the publicly traded company. |
| GENERAL CLIENT INFORMATION | Client | Enter text: The name of the publicly traded company for which the applicant has performed legal services during the last three (3) years. |
| GENERAL CLIENT INFORMATION | Year | Enter year: The year in which the applicant has performed legal services for the publicly traded company. |
| GENERAL CLIENT INFORMATION | Nature of Legal Services | Enter text: The nature of legal services performed for the publicly traded company. |

| GENERAL CLIENT INFORMATION | Client | Enter text: The name of the publicly traded company for which the applicant has performed legal services during the last three (3) years. |
|----------------------------------|--|--|
| GENERAL CLIENT INFORMATION | Year | Enter year: The year in which the applicant has performed legal services for the publicly traded company. |
| GENERAL CLIENT INFORMATION | Nature of Legal Services | Enter text: The nature of legal services performed for the publicly traded company. |
| GENERAL CLIENT INFORMATION | Within the past five (5) years, has the applicant or any past or present lawyer, provided any legal services in connection with any securities-related representation, or otherwise? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Within the past five (5) years, has the applicant or any past or present lawyer, provided any legal services in connection with any securities-related representation, whether counsel to the issuer, underwriter, or purchaser of securities or as special counsel rendering a legal opinion in connection with a securities-related representation, or otherwise?" |
| GENERAL CLIENT INFORMATION | Explanation | Enter text: An explanation of any applicant or past or present lawyer who provided legal services in connection with a securities-related representation. |
| GENERAL CLIENT INFORMATION | Has applicant had a bankruptcy or filed for bankruptcy during the past five (5) years? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Has applicant had a bankruptcy or filed for a bankruptcy during the past five (5) years?" |
| GENERAL CLIENT INFORMATION | Explanation | Enter text: An explanation as to whether the applicant has filed for bankruptcy in the last five (5) years. |
| INTERNAL POLICIES AND PROCEDURES | Does the applicant have a full-time office administrator/manager? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant have a full-time office administrator / manager?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the applicant has a full-time office administrator or manager. |
| INTERNAL POLICIES AND PROCEDURES | Does the applicant maintain a formalized risk management program? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant maintain a formalized risk management program?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the applicant maintains a formalized risk management program. |
| INTERNAL POLICIES AND PROCEDURES | Does the applicant maintain a firm-wide risk management manual? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant maintain a firm-wide risk management manual?" (Please attach a copy of the manual) |
| | | |

| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the applicant maintains a firm-wide risk management manual. |
|----------------------------------|--|---|
| INTERNAL POLICIES AND PROCEDURES | Does the applicant have a risk management partner or someone who acts as the firm's risk manager? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant have a risk management partner or someone who acts as the firm's risk manager?" |
| INTERNAL POLICIES AND PROCEDURES | Name | Enter text: The full legal name of the risk manager. |
| INTERNAL POLICIES AND PROCEDURES | E-Mail Address | Enter text: The primary e-mail address for the risk manager. |
| INTERNAL POLICIES AND PROCEDURES | In the last two (2) years, has the applicant had an audit of its risk management procedures performed on its behalf by a risk management specialist from outside the firm? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "In the last two (2) years, has the applicant had an audit of its risk management procedures performed on its behalf by a risk management specialist from outside the firm? (Please attach a copy of the audit report) |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the applicant has had an audit on it's risk management procedures in the past two (2) years from a specialist outside the firm. |
| INTERNAL POLICIES AND PROCEDURES | Does the applicant share office space with, or sublet office space to, any attorneys who are not previously listed on this application? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant share office space with, or sublet office space to, any attorneys who are not previously listed on this application?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the applicant shares office space with any attorneys not previously listed on this application. |
| INTERNAL POLICIES AND PROCEDURES | Is the applicant a sole practitioner? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Is the applicant a sole practitioner? " (If 'Yes', provide the name and address of backup attorney) |
| INTERNAL POLICIES AND PROCEDURES | Name | Enter text: The full legal name of the back up attorney |
| INTERNAL POLICIES AND PROCEDURES | Address | Enter text: The back up attorney's mailing address first address line. |
| INTERNAL POLICIES AND PROCEDURES | City | Enter text: The back up attorney's mailing address city name. |

| INTERNAL POLICIES AND PROCEDURES | State | Enter code: The back up attorney's mailing address state or province code. | |
|----------------------------------|-------|--|--|
| INTERNAL POLICIES AND PROCEDURES | Zip | Enter code: The back up attorney's mailing address postal code. | |

| Section Name | Field Name | Description |
|----------------------------------|---|---|
| IDENTIFICATION SECTION | Agency Customer ID | Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage). |
| INTERNAL POLICIES AND PROCEDURES | Does the applicant ever subcontract or refer legal work of any kind to other law firms or attorneys? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant ever subcontract or refer legal work of any kind to other law firms or attorneys?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the applicant subcontracts legal work to any law firms or attorneys. |
| INTERNAL POLICIES AND PROCEDURES | Does the applicant maintain an off-site location for the maintenance or storage of backup calendar systems and duplicate computer records? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant maintain an off-site location for the maintenance or storage of backup calendar systems and duplicate computer records?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the applicant maintains an off-site location for the storage of backup calendar systems and duplicate computer records. |
| INTERNAL POLICIES AND PROCEDURES | Does the applicant have any arrangements in place for alternative office space in the event that its current office location(s) are rendered unusable? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant have any arrangements in place for alternate office space in the event that its current office location(s) are rendered unusable?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the applicant has any arrangements in place for alternate office space in the event that the current office space is rendered unusable. |
| INTERNAL POLICIES AND PROCEDURES | Does the firm utilize an electronic docket control system? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm utilize an electronic docket control system?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the firm utilizes an electronic docket control system. |

| INTERNAL POLICIES AND PROCEDURES | Does the firm have an electronic conflict avoidance system? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm have an electronic conflict avoidance system?" |
|----------------------------------|---|--|
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the firm has an electronic conflict avoidance system. |
| INTERNAL POLICIES AND PROCEDURES | Does the firm use engagement/disengagement letters on all matters, including matters not undertaken? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm use engagement / disengagement letters on all matters, including matters not undertaken?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the firm uses engagement / disengagement letters on all matters including those not undertaken. |
| INTERNAL POLICIES AND PROCEDURES | Does the firm outline in writing its billing policy and procedures when agreeing to represent a new client? | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm outline in writing its billing policy and procedures when agreeing to represent a new client?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the firm outlines its billing policy in writing for new clients. |
| INTERNAL POLICIES AND PROCEDURES | Does the firm use scope of service letters when taking on new matters for existing clients? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm use scope of service letters when taking on new matters for existing clients?" |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the firm uses scope of service letters when taking on new matters for existing clients. |
| INTERNAL POLICIES AND PROCEDURES | Has firm initiated any suits for unpaid fees in the past three (3) years? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Has the firm initiated any suits for unpaid fees in the past three (3) years?" (If 'Yes', how many?) |
| INTERNAL POLICIES AND PROCEDURES | Explanation | Enter text: An explanation as to whether the firm as initiated any suits for unpaid fees in the past three (3) years. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| | | |

| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
|----------------------|---|--|
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| | | |

| | i | <u></u> |
|----------------------|---|--|
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| | | |

| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
|----------------------|---|--|
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| | - | |

| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
|----------------------|---|--|
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| | - | |

| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
|----------------------|---|--|
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| | - | |

| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
|----------------------|---|--|
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| | - | |

| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
|----------------------|---|--|
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| ATTORNEY INFORMATION | Attorney Name | Enter text: The full name of the employee. |
| ATTORNEY INFORMATION | Designation Code | Enter code: The designation code (DC) for the attorney. (P-Partner, IC-Independent Contractor, A-Associate, L-Leased, O-Owner/Officer/Shareholder, RP-Retired Partner, OC-Of Counsel, S-Sole Practitioner) |
| ATTORNEY INFORMATION | Hours Worked Per Week | Enter number: The number of hours per week the employee works when on their normal full-time schedule. |
| ATTORNEY INFORMATION | State Admitted to Bar | Enter code: The state or province code where the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Admitted to Bar | Enter year: The year the attorney was admitted to the bar. |
| ATTORNEY INFORMATION | Year Started in Private Practice | Enter year: The year the attorney started private practice. |
| ATTORNEY INFORMATION | Date Joined Firm (MM/DD/YYYY) | Enter date: The date the attorney joined the firm. |
| ATTORNEY INFORMATION | Current Retro Date (MM/DD/YYYY) | Enter date: The current retro date for the attorney. |
| ATTORNEY INFORMATION | Cont Education Units Within This Past Year? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there were continuing education units within this past year. |
| PRIOR COVERAGE | Prior Carrier | Enter text: The name of the previous insurer. |
| PRIOR COVERAGE | Effective Date (MM/DD/YYYY) | Enter date: The effective date of the prior policy. |
| PRIOR COVERAGE | Expiration Date (MM/DD/YYYY) | Enter date: The expiration date of the previous coverage. |
| PRIOR COVERAGE | Limits of Liability | Enter limit: The limits of liability on the policy (per claim or aggregate). |
| PRIOR COVERAGE | Defense Limits Y/N Inside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit. |
| | | |

| PRIOR COVERAGE | Defense Limits Y/N Outside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit. |
|----------------|------------------------------|--|
| PRIOR COVERAGE | Retention/Deductible | Enter amount: The retention amount of the prior coverage. |
| PRIOR COVERAGE | Number of Attorneys | Enter number: The number of attorneys on prior coverage. |
| PRIOR COVERAGE | Annual Premium | Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business. |
| PRIOR COVERAGE | Prior Carrier | Enter text: The name of the previous insurer. |
| PRIOR COVERAGE | Effective Date (MM/DD/YYYY) | Enter date: The effective date of the prior policy. |
| PRIOR COVERAGE | Expiration Date (MM/DD/YYYY) | Enter date: The expiration date of the previous coverage. |
| PRIOR COVERAGE | Limits of Liability | Enter limit: The limits of liability on the policy (per claim or aggregate). |
| PRIOR COVERAGE | Defense Limits Y/N Inside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit. |
| PRIOR COVERAGE | Defense Limits Y/N Outside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit. |
| PRIOR COVERAGE | Retention/Deductible | Enter amount: The retention amount of the prior coverage. |
| PRIOR COVERAGE | Number of Attorneys | Enter number: The number of attorneys on prior coverage. |
| PRIOR COVERAGE | Annual Premium | Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business. |
| PRIOR COVERAGE | Prior Carrier | Enter text: The name of the previous insurer. |
| PRIOR COVERAGE | Effective Date (MM/DD/YYYY) | Enter date: The effective date of the prior policy. |
| PRIOR COVERAGE | Expiration Date (MM/DD/YYYY) | Enter date: The expiration date of the previous coverage. |
| PRIOR COVERAGE | Limits of Liability | Enter limit: The limits of liability on the policy (per claim or aggregate). |
| PRIOR COVERAGE | Defense Limits Y/N Inside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit. |
| PRIOR COVERAGE | Defense Limits Y/N Outside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit. |
| PRIOR COVERAGE | Retention/Deductible | Enter amount: The retention amount of the prior coverage. |
| | | |

| PRIOR COVERAGE | Number of Attorneys | Enter number: The number of attorneys on prior coverage. |
|----------------|------------------------------|--|
| PRIOR COVERAGE | Annual Premium | Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business. |
| PRIOR COVERAGE | Prior Carrier | Enter text: The name of the previous insurer. |
| PRIOR COVERAGE | Effective Date (MM/DD/YYYY) | Enter date: The effective date of the prior policy. |
| PRIOR COVERAGE | Expiration Date (MM/DD/YYYY) | Enter date: The expiration date of the previous coverage. |
| PRIOR COVERAGE | Limits of Liability | Enter limit: The limits of liability on the policy (per claim or aggregate). |
| PRIOR COVERAGE | Defense Limits Y/N Inside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit. |
| PRIOR COVERAGE | Defense Limits Y/N Outside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit. |
| PRIOR COVERAGE | Retention/Deductible | Enter amount: The retention amount of the prior coverage. |
| PRIOR COVERAGE | Number of Attorneys | Enter number: The number of attorneys on prior coverage. |
| PRIOR COVERAGE | Annual Premium | Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business. |
| PRIOR COVERAGE | Prior Carrier | Enter text: The name of the previous insurer. |
| PRIOR COVERAGE | Effective Date (MM/DD/YYYY) | Enter date: The effective date of the prior policy. |
| PRIOR COVERAGE | Expiration Date (MM/DD/YYYY) | Enter date: The expiration date of the previous coverage. |
| PRIOR COVERAGE | Limits of Liability | Enter limit: The limits of liability on the policy (per claim or aggregate). |
| PRIOR COVERAGE | Defense Limits Y/N Inside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit. |
| PRIOR COVERAGE | Defense Limits Y/N Outside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit. |
| PRIOR COVERAGE | Retention/Deductible | Enter amount: The retention amount of the prior coverage. |
| PRIOR COVERAGE | Number of Attorneys | Enter number: The number of attorneys on prior coverage. |
| PRIOR COVERAGE | Annual Premium | Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business. |
| | | |

| PRIOR COVERAGE | Prior Carrier | Enter text: The name of the previous insurer. |
|----------------|------------------------------|--|
| PRIOR COVERAGE | Effective Date (MM/DD/YYYY) | Enter date: The effective date of the prior policy. |
| PRIOR COVERAGE | Expiration Date (MM/DD/YYYY) | Enter date: The expiration date of the previous coverage. |
| PRIOR COVERAGE | Limits of Liability | Enter limit: The limits of liability on the policy (per claim or aggregate). |
| PRIOR COVERAGE | Defense Limits Y/N Inside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an inside defense limit. |
| PRIOR COVERAGE | Defense Limits Y/N Outside | Enter Y for a "Yes" response. Input N for "No" response. Indicates if there is an outside defense limit. |
| PRIOR COVERAGE | Retention/Deductible | Enter amount: The retention amount of the prior coverage. |
| PRIOR COVERAGE | Number of Attorneys | Enter number: The number of attorneys on prior coverage. |
| PRIOR COVERAGE | Annual Premium | Enter amount: The annual modified premium charged (not including taxes or service charges) for the specified line of business. |
| PRIOR COVERAGE | Claims Made Date | Enter date: The date of the applicant firm's first claim's made policy. |

| Section Name | Field Name | Description |
|------------------------|---|--|
| IDENTIFICATION SECTION | Agency Customer ID | Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage). |
| PRIOR COVERAGE | Does the applicant firm's current policy contain a prior acts limitation or retroactive date applicable to the applicant firm or any individual attorney? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant firm's current policy contain a prior acts limitation or retroactive date applicable to the applicant firm or any individual attorney?" (If 'Yes', provide date and attach a copy of the endorsement) |
| PRIOR COVERAGE | Date | Enter date: The prior acts limitation or retroactive date |
| PRIOR COVERAGE | Does the applicant firm's current policy have any endorsements or exclusions or coverage limitations tailored specifically to the applicant firm? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant firm's current policy have any endorsements or exclusions or coverage limitations tailored specifically to the applicant firm?" (If 'Yes', describe and attach a copy of the endorsement) |

| PRIOR COVERAGE | Explanation | Enter text: An explanation as to whether the applicant's current policy has any endorsements or coverage limitations tailored specifically to the applicant firm. |
|----------------|---|---|
| PRIOR COVERAGE | Has the applicant firm or attorney for whom coverage is sought ever purchased an extended reported period endorsement? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Has the applicant firm or any attorney for whom coverage is sought ever purchased an extended reporting period endorsement?" (If 'Yes', provide details) |
| PRIOR COVERAGE | Explanation | Enter text: An explanation as to whether the applicant firm has ever purchased an Extended Reporting Period Endorsement. |
| PRIOR COVERAGE | In the past five (5) years, has the applicant firm or any of its attorneys ever had professional liability insurance or similar insurance declined, cancelled or non-renewed? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "In the past five (5) years, has the applicant firm or any of its attorneys ever had professional liability insurance or similar insurance declined, cancelled or non-renewed?" (If 'Yes', provide details) (Missouri applicants- do not answer this question) |
| PRIOR COVERAGE | Explanation | Enter text: An explanation as to whether the applicant firm has ever had professional liability insurance declined or cancelled within the last five (5) years. |
| PRIOR COVERAGE | After inquiry, has the applicant or any past or present lawyer or employee of the applicant ever been:? | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "After inquiry, has the applicant or any past or present lawyer or employee of the applicant been: disbarred, refused admission to practice law, suspended, reprimanded, sanctioned, fined, placed on probation, held in contempt, the subject of any disciplinary complaint, grievance or action by any court, bar association, administrative agency, or regulatory body?" |
| PRIOR COVERAGE | Disbarred | Check the box (if applicable): Indicates if the lawyer or employee was disbarred. |
| PRIOR COVERAGE | Refused Admission to Practice Law | Check the box (if applicable): Indicates if the lawyer or employee was refused admission to practice law. |
| PRIOR COVERAGE | Suspended | Check the box (if applicable): Indicates if the lawyer or employee was suspended. |
| PRIOR COVERAGE | Reprimanded | Check the box (if applicable): Indicates if the lawyer or employee was reprimanded. |
| PRIOR COVERAGE | Sanctioned | Check the box (if applicable): Indicates if the lawyer or employee was sanctioned. |
| PRIOR COVERAGE | Fined | Check the box (if applicable): Indicates if the lawyer or employee was fined. |
| PRIOR COVERAGE | Placed on Probation | Check the box (if applicable): Indicates if the lawyer or employee was placed on probation. |
| PRIOR COVERAGE | Held in Contempt | Check the box (if applicable): Indicates if the lawyer or employee was held in contempt. |
| | | |

| PRIOR COVERAGE | The subject of any disciplinary complaint, grievance or action by any court, bar association, administrative agency, or regulatory body | Check the box (if applicable): Indicates if the lawyer or employee was the subject of any disciplinary complaint, grievance or action by any court, bar association, administrative agency, or regulatory body. |
|------------------|---|--|
| PRIOR COVERAGE | After inquiry, has any past or present lawyer or employee of the applicant ever been convicted of a felony or a crime of moral turpitude? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "After inquiry, has any past or present lawyer or employee of the applicant ever been convicted of a felony or a crime of moral turpitude?" |
| PREDECESSOR FIRM | Firm Name | Enter text: The name of the predecessor firm. |
| PREDECESSOR FIRM | Type of Entity | Enter text: The entity type of the predecessor firm. |
| PREDECESSOR FIRM | # of Attorneys at Dissolution | Enter number: The number of attorneys at dissolution of the predecessor firm. |
| PREDECESSOR FIRM | Dissolution Date | Enter date: The dissolution date of the predecessor firm. |
| PREDECESSOR FIRM | ERP Purchased? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if ERP was purchased. |
| PREDECESSOR FIRM | Firm Name | Enter text: The name of the predecessor firm. |
| PREDECESSOR FIRM | Type of Entity | Enter text: The entity type of the predecessor firm. |
| PREDECESSOR FIRM | # of Attorneys at Dissolution | Enter number: The number of attorneys at dissolution of the predecessor firm. |
| PREDECESSOR FIRM | Dissolution Date | Enter date: The dissolution date of the predecessor firm. |
| PREDECESSOR FIRM | ERP Purchased? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if ERP was purchased. |
| PREDECESSOR FIRM | Firm Name | Enter text: The name of the predecessor firm. |
| PREDECESSOR FIRM | Type of Entity | Enter text: The entity type of the predecessor firm. |
| PREDECESSOR FIRM | # of Attorneys at Dissolution | Enter number: The number of attorneys at dissolution of the predecessor firm. |
| PREDECESSOR FIRM | Dissolution Date | Enter date: The dissolution date of the predecessor firm. |
| PREDECESSOR FIRM | ERP Purchased? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if ERP was purchased. |
| PREDECESSOR FIRM | Firm Name | Enter text: The name of the predecessor firm. |
| PREDECESSOR FIRM | Type of Entity | Enter text: The entity type of the predecessor firm. |
| PREDECESSOR FIRM | # of Attorneys at Dissolution | Enter number: The number of attorneys at dissolution of the predecessor firm. |
| PREDECESSOR FIRM | Dissolution Date | Enter date: The dissolution date of the predecessor firm. |

| PREDECESSOR FIRM | ERP Purchased? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if ERP was purchased. |
|------------------|---|--|
| PREDECESSOR FIRM | Firm Name | Enter text: The name of the predecessor firm. |
| PREDECESSOR FIRM | Type of Entity | Enter text: The entity type of the predecessor firm. |
| PREDECESSOR FIRM | # of Attorneys at Dissolution | Enter number: The number of attorneys at dissolution of the predecessor firm. |
| PREDECESSOR FIRM | Dissolution Date | Enter date: The dissolution date of the predecessor firm. |
| PREDECESSOR FIRM | ERP Purchased? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if ERP was purchased. |
| LOSS HISTORY | None | Check the box (if applicable): Indicates there are no prior losses or occurrences that may give rise to claims for the mandated number of years. |
| LOSS HISTORY | In the past five (5) years, has any professional liability claim or suit ever been made against the applicant firm or any predecessor firm or any current or former attorney of the applicant firm or predecessor firm? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "In the past five (5) years, has any professional liability claim or suit ever been made against the applicant firm or any predecessor firm or any current or former attorney of the applicant firm or predecessor firm?" |
| LOSS HISTORY | Does any attorney for whom coverage is sought know of any incident, act, error or omission that could result in a claim or suit against the applicant firm or any predecessor firm or any of the current or former attorneys of the applicant firm? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does any attorney for whom coverage is sought know of any incident, act, error or omission that could result in a claim or suit against the applicant firm or any predecessor firm or any of the current or former attorneys of the applicant firm?" |
| LOSS HISTORY | Has any attorney for whom coverage is sought been refused admission to practice, disbarred, suspended, sanctioned, been the subject of a disciplinary complaint made to any of the aforementioned entities? | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Has any attorney for whom coverage is sought been refused admission to practice, disbarred, suspended, reprimanded, sanctioned, or held in contempt by any court, administrative agency or regulatory body or been the subject of a disciplinary complaint made to any aforementioned entities?" |

| LOSS HISTORY | Explanation | Enter text: An explanation as to whether any attorney for whom coverage is sought has been refused the admission to practice, disbarred, suspended, reprimanded sanctioned or held in contempt by any court, administrative agency or regulatory body. |
|--------------|---|--|
| LOSS HISTORY | Total Losses \$ | Enter amount: The amount that has been paid on all losses to date. |
| LOSS HISTORY | Date of Occurrence | Enter date: The date when the accident or incident occurred that resulted in the filing of a claim. (MM/DD/YYYY) |
| LOSS HISTORY | Type/Description of Occurrence or Claim | Enter text: A brief description of the loss. |
| LOSS HISTORY | Date of Claim | Enter date: The date the claim was filed. (MM/DD/YYYY) |
| LOSS HISTORY | Amount Paid | Enter amount: The amount that has been paid on this claim to date. |
| LOSS HISTORY | Amount Reserved | Enter amount: The reserve amount the previous carrier is holding open for this claim. |
| LOSS HISTORY | Subrogation Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation. |
| LOSS HISTORY | Claim Open Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open. |
| LOSS HISTORY | Date of Occurrence | Enter date: The date when the accident or incident occurred that resulted in the filing of a claim. (MM/DD/YYYY) |
| LOSS HISTORY | Type/Description of Occurrence or Claim | Enter text: A brief description of the loss. |
| LOSS HISTORY | Date of Claim | Enter date: The date the claim was filed. (MM/DD/YYYY) |
| LOSS HISTORY | Amount Paid | Enter amount: The amount that has been paid on this claim to date. |
| LOSS HISTORY | Amount Reserved | Enter amount: The reserve amount the previous carrier is holding open for this claim. |
| LOSS HISTORY | Subrogation Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation. |
| LOSS HISTORY | Claim Open Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open. |
| LOSS HISTORY | Date of Occurrence | Enter date: The date when the accident or incident occurred that resulted in the filing of a claim. (MM/DD/YYYY) |
| LOSS HISTORY | Type/Description of Occurrence or Claim | Enter text: A brief description of the loss. |
| LOSS HISTORY | Date of Claim | Enter date: The date the claim was filed. (MM/DD/YYYY) |
| LOSS HISTORY | Amount Paid | Enter amount: The amount that has been paid on this claim to date. |
| LOSS HISTORY | Amount Reserved | Enter amount: The reserve amount the previous carrier is holding open for this claim. |
| LOSS HISTORY | Subrogation Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation. |
| | ! | ! |

| 1 000 1110 70 717 | A. I. A. W. | |
|-------------------|---|--|
| LOSS HISTORY | Claim Open Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open. |
| LOSS HISTORY | Date of Occurrence | Enter date: The date when the accident or incident occurred that resulted in the filing of a claim. (MM/DD/YYYY) |
| LOSS HISTORY | Type/Description of Occurrence or Claim | Enter text: A brief description of the loss. |
| LOSS HISTORY | Date of Claim | Enter date: The date the claim was filed. (MM/DD/YYYY) |
| LOSS HISTORY | Amount Paid | Enter amount: The amount that has been paid on this claim to date. |
| LOSS HISTORY | Amount Reserved | Enter amount: The reserve amount the previous carrier is holding open for this claim. |
| LOSS HISTORY | Subrogation Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation. |
| LOSS HISTORY | Claim Open Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open. |
| LOSS HISTORY | Date of Occurrence | Enter date: The date when the accident or incident occurred that resulted in the filing of a claim. (MM/DD/YYYY) |
| LOSS HISTORY | Type/Description of Occurrence or Claim | Enter text: A brief description of the loss. |
| LOSS HISTORY | Date of Claim | Enter date: The date the claim was filed. (MM/DD/YYYY) |
| LOSS HISTORY | Amount Paid | Enter amount: The amount that has been paid on this claim to date. |
| LOSS HISTORY | Amount Reserved | Enter amount: The reserve amount the previous carrier is holding open for this claim. |
| LOSS HISTORY | Subrogation Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation. |
| LOSS HISTORY | Claim Open Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open. |
| LOSS HISTORY | Date of Occurrence | Enter date: The date when the accident or incident occurred that resulted in the filing of a claim. (MM/DD/YYYY) |
| LOSS HISTORY | Type/Description of Occurrence or Claim | Enter text: A brief description of the loss. |
| LOSS HISTORY | Date of Claim | Enter date: The date the claim was filed. (MM/DD/YYYY) |
| LOSS HISTORY | Amount Paid | Enter amount: The amount that has been paid on this claim to date. |
| LOSS HISTORY | Amount Reserved | Enter amount: The reserve amount the previous carrier is holding open for this claim. |
| LOSS HISTORY | Subrogation Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation. |
| LOSS HISTORY | Claim Open Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open. |
| LOSS HISTORY | Date of Occurrence | Enter date: The date when the accident or incident occurred that resulted in the filing of a claim. (MM/DD/YYYY) |

| LOSS HISTORY | Type/Description of Occurrence or Claim | Enter text: A brief description of the loss. |
|-----------------------------|--|--|
| LOSS HISTORY | Date of Claim | Enter date: The date the claim was filed. (MM/DD/YYYY) |
| LOSS HISTORY | Amount Paid | Enter amount: The amount that has been paid on this claim to date. |
| LOSS HISTORY | Amount Reserved | Enter amount: The reserve amount the previous carrier is holding open for this claim. |
| LOSS HISTORY | Subrogation Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation. |
| LOSS HISTORY | Claim Open Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open. |
| LOSS HISTORY | Date of Occurrence | Enter date: The date when the accident or incident occurred that resulted in the filing of a claim. (MM/DD/YYYY) |
| LOSS HISTORY | Type/Description of Occurrence or Claim | Enter text: A brief description of the loss. |
| LOSS HISTORY | Date of Claim | Enter date: The date the claim was filed. (MM/DD/YYYY) |
| LOSS HISTORY | Amount Paid | Enter amount: The amount that has been paid on this claim to date. |
| LOSS HISTORY | Amount Reserved | Enter amount: The reserve amount the previous carrier is holding open for this claim. |
| LOSS HISTORY | Subrogation Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is in subrogation. |
| LOSS HISTORY | Claim Open Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates if the claim is still open. |
| TRAINING AND SUPERVISION | Does the applicant maintain a formal training program for new lawyers as to firm procedures, local practice rules, and rules of professional conduct? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the applicant maintain a formal training program for new lawyers as to firm procedures, local practice rules, and rules of professional conduct?" |
| TRAINING AND SUPERVISION | Are all lawyers in the firm currently compliant with local CLE requirements? | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Are all lawyers in the firm currently compliant with local CLE requirements?" |
| TRAINING AND SUPERVISION | Does the firm require at least an annual review of all associate's work? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm require at least an annual review of every associate's work?" |
| TRAINING AND SUPERVISION | Does the firm require at least an annual review of all partner's work? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm require at least an annual review of all partner's work?" |

| | Does the firm have a formal | |
|--------------|-----------------------------|--|
| TRAINING AND | process to evaluate the | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, |
| SUPERVISION | performance of non-lawyer | "Does the firm have a formal process to evaluate the performance of non-lawyer staff?" |
| | staff? Y/N | |

| Section Name | Field Name | Description |
|------------------------|--|--|
| IDENTIFICATION SECTION | Agency Customer ID | Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage). |
| OUTSIDE INTEREST | Does the firm have a written policy as respects to equity interest in clients? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm have a written policy as respects to equity interest in clients?" |
| OUTSIDE INTEREST | Explanation | Enter text: An explanation as to whether the firm has a written policy pertaining to equity interest in clients. |
| OUTSIDE INTEREST | Does the firm accept an equity interest in clients in lieu of legal fees? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does the firm accept an equity interest in clients in lieu of legal fees?" |
| OUTSIDE INTEREST | Explanation | Enter text: An explanation as to whether the firm accepts an equity interest in clients in lieu of legal fees. |
| OUTSIDE INTEREST | Does anyone in the firm serve in a position of director, officer, partner or manager of any client business or organization? | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does anyone in the firm serve in a position of director, officer, partner, or manager of any client business or organization?" |
| OUTSIDE INTEREST | Explanation | Enter text: An explanation as to whether anyone in the firm serves in a position of director, officer, partner or manager of any client business or organization. |
| OUTSIDE INTEREST | Does anyone in the firm hold an equity or debt interest in any business or organization that is also a client of the firm? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does anyone in the firm hold an equity or debt interest in any business or organization that is also a client of the firm?" |
| OUTSIDE INTEREST | Percentage | Enter percentage: The percentage of debt or equity interest held by an employee of the firm who is also involved in a business or organization that is a client of the firm. |

| OUTSIDE INTEREST | Does anyone in the firm serve as an employee of any business or organization other than the firm? Y/N | Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Does anyone in the firm serve as an employee of any business or organization other than the firm?" |
|-----------------------|---|---|
| OUTSIDE INTEREST | Explanation | Enter text: An explanation as to whether anyone in the firm serves as an employee of any other business or organization. |
| REMARKS/ATTACHMENTS | Letterhead | Check the box (if applicable): Indicates if company letterhead is attached. |
| REMARKS / ATTACHMENTS | Current Retroactive Date Endorsement | Check the box (if applicable): Indicates if current retroactive date endorsement is attached. |
| REMARKS/ATTACHMENTS | Current Declarations Page | Check the box (if applicable): Indicates if current declarations page is attached. |
| REMARKS/ATTACHMENTS | Claims Information | Check the box (if applicable): Indicates if claims information is attached. |
| REMARKS/ATTACHMENTS | Organizational Chart | Check the box (if applicable): Indicates if organizational chart is attached. |
| REMARKS / ATTACHMENTS | Other Attachment | Check the box (if applicable): Indicates there is an attachment other than those listed on the application. |
| REMARKS / ATTACHMENTS | Other Attachment Description | Enter text: The description of the other type of attachment. |
| REMARKS / ATTACHMENTS | Other Attachment | Check the box (if applicable): Indicates there is an attachment other than those listed on the application. |
| REMARKS / ATTACHMENTS | Other Attachment Description | Enter text: The description of the other type of attachment. |
| REMARKS / ATTACHMENTS | Other Attachment | Check the box (if applicable): Indicates there is an attachment other than those listed on the application. |
| REMARKS / ATTACHMENTS | Other Attachment Description | Enter text: The description of the other type of attachment. |
| REMARKS / ATTACHMENTS | Other Attachment | Check the box (if applicable): Indicates there is an attachment other than those listed on the application. |
| REMARKS / ATTACHMENTS | Other Attachment Description | Enter text: The description of the other type of attachment. |
| REMARKS / ATTACHMENTS | Remarks | Enter text: The remarks associated with the lawyers professional liability line of business. Use this section to list any additional, pertinent information that the underwriter should know about the overall exposures of this risk. ACORD 101, Additional Remarks Schedule, may be attached if more space is required. |
| SIGNATURE | Producer's Signature | Sign here: Accommodates the signature of the authorized representative (e.g., producer, agent, broker, etc.) of the company(ies) listed on the document. This is required in most states. |

| SIGNATURE | Producer's Name | Enter text: The name of the authorized representative of the producer, agency and/or broker that signed the form. |
|-----------|----------------------------------|---|
| SIGNATURE | State Producer License Number | Enter identifier: The State License Number of the producer. |
| SIGNATURE | Applicant's Signature | Sign here: Accommodates the signature of the applicant or named insured. |
| SIGNATURE | Date | Enter date: The date the form was signed by the named insured. (MM/DD/YYYY) |
| SIGNATURE | National Producer Number | Enter identifier: The National Producer Number (NPN) as defined in the National Insurance Producer Registry (NIPR). Note: The NPN is not the same as the producer state license number. |