



COMBINATION AREA OF PRACTICE SUPPLEMENT

Please mark "N/A" if you do not have billing from the following Area's of Practice. Otherwise, please complete the appropriate section(s).

Bankruptcy N/A

Collections N/A

Estate/Trust Work N/A

Financial Institution Work (Banking) N/A

Plaintiff Litigation (BI or PD) N/A

Real Estate N/A

Tax Work N/A



BANKRUPTCY QUESTIONNAIRE

1. Please provide the percentage of bankruptcy cases in the following categories:

For Debtors: %

For Creditors: %

As Trustee: %

Other: %

2. Are you and your attorneys who practice in this area aware of and in full compliance with the provisions of the 2005 Bankruptcy Report Act? Yes No

3. Do you have written due diligence procedures for verifying the truthfulness and accuracy of the debtor's bankruptcy schedule? Yes No

4. Do you have written due diligence procedures for certification of the debtor's ability to pay? Yes No

5. Do you provide a uniform disclosure statement to all debtor clients regarding the duties of the debtor in bankruptcy? Yes No

a. If yes, is it maintained for at least 2 years? Yes No

6. If you represent debtor's, are all required disclosures, including statements about acting as a debt relief agency, prominently displayed in all advertising and other mass communication? Yes No

7. Do you, your attorneys or firm have any contracts, affiliations, or referral arrangements with third party entities or other attorneys that offer any pre-bankruptcy services in the area of debt settlement, debt resolution, debt consolidation, or debt relief? Yes No

8. Please provide the total number of bankruptcy clients you currently have.

Please complete the following for each attorney in your firms handling bankruptcy matters:

	<u>Attorney Name</u>	<u>Years of Experience</u>	<u>Percent of time devoted to bankruptcy</u>
1.			
2.			
3.			
4.			
5.			



COLLECTION WORK SUPPLEMENT

1. During the past three (3) years:
 - a. How many lawyers have done collection work?
 - b. Approximately how many individual consumer debtor's have been contacted by phone, letter or otherwise by anyone employed by or in any way affiliated with the applicant firm?

2. During the past three (3) years have you allowed any collector, collection agency, or any other party to use your law firm name or any attorneys names in collection-related matters? Yes No
If yes, please explain:

3. During the past three (3) years, have you provided any advice or opinions to any party relative to implementation of any debt collection procedure, collection letter or other collection activity which would claim to be in compliance with the Federal Fair Debt Collection Practices Act or similar state or federal regulation? Yes No
If yes, please explain:

4. What steps do you take to assure that all collection letters the firm sends are in compliance with the Federal Fair Debt Collection Practices Act? Please explain:

5. What steps do you take to assure that all attorneys in the firm remain current with the changes in the Federal Fair Debt Collection Practices Act? Please explain:

6. Within the past three (3) years, has any present or past attorney had any ownership interest in any kind of collection agency? Yes No

7. Has the firm executed any indemnity agreements with clients (for which you are doing collections work) which would indemnify or hold the client harmless for any violation of the Federal Fair Debt Collection Practices Act provisions related to the collections work? Yes No

8. Within the past three (3) years, has the firm or any present or past attorney been a party to any claims or suits under the Federal Fair Debt Practices Collections Act? Yes No



ESTATE/TRUST WORK SUPPLEMENT

- List the top five largest Estates/Trusts to which the firm provided legal services in the previous 12 months:

Name	Attorney	Approximate Value
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- What services are provided for the client(s)?
- Does work performed include business formation, management, or other business transactions? Yes No

- Does any one Estate/Trust client account for 10% of an attorney's annual billings? Yes No
If yes, provide name and percent of revenue:

- Does your estate practice include a file review by a second attorney not involved in drafting on all new wills? Yes No

- Does any attorney currently serve as Executor/Personal Representative of an Estate or Trustee of a trust (not including family related matters)? Yes No

If yes, provide a list by attorney with: Name of Estate/Trust, approximate value and description of services provided.

Attorney:

Name of Estate / Trust	Approximate Value	Description of Services
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PLAINTIFF SUPPLEMENT

Please answer all questions in relation to your plaintiff practice only

1. Have you advertised during the past 12 months through any of the following:
- a. Television Yes No
 - b. Radio Yes No
 - c. Newspaper Yes No
 - d. Yellow Pages Yes No

If **Yes**, please attach copies of this advertising or provide an explanation of the specific nature of such advertising.

2. Total number of personal injury cases during the past 12 months:
3. Average number of personal injury cases each attorney handles per year:
4. Percentage of cases (must equal 100%): Settle before trial? Cases tried to conclusion?
5. Percentage of cases referred to you by other law firms? %
6. Do you use written referral agreements in all cases which are referred to you? Yes No
7. Do you use written referral agreements in all cases which are referred out? Yes No
8. Do you obtain certificates of insurance in all cases which are referred out? Yes No
9. Average dollar value of all plaintiff cases are: Less than \$25,000 \$25,001 - \$100,000
 \$100,001 - \$500,000 \$500,001 - \$1,000,000 Other:

10. What percentage of your plaintiff cases are:
- | | | |
|-----------------------------------|---------------------|-----------------------|
| % Class Action/Mass Tort * | % Product Liability | % Legal Malpractice |
| % Automobile Accident | % Slip and Fall | % Medical Malpractice |
| % Other (Please describe): | | |

11. With respect to your answer in Question 10, please state the maximum dollar value of any one case:
- | | | |
|------------------------------------|----------------------|------------------------|
| \$ Class Action/Mass Tort * | \$ Product Liability | \$ Legal Malpractice |
| \$ Automobile Accident | \$ Slip and Fall | \$ Medical Malpractice |
| \$ Other: | | |

12. Percentage of recovery your firm takes as fees: %
13. Describe the firm's procedure for tracking the Statue of Limitation on each personal injury case:
14. Name and position of person(s) designated to track the Statue of Limitation on each personal injury case:

* Please complete separate **Class Action/Mass Tort** supplement.



REAL ESTATE SUPPLEMENT

REAL ESTATE PRACTICE BREAKDOWN

1. What percentage of real estate practice receipts for the current year and preceding year have come from the following areas:

		Current Year	Previous Year
a. Purchase and Sale	Residential	%	%
	Commercial	%	%

Transactions on behalf of buyers or sellers, including negotiation and drafting of purchase agreements, option agreements, deeds and other closing documents, representation at closing and related activities.

What is the approximate number of transactions handled in the last 12 months?

Residential
Commercial

What was the largest value real estate transaction in the last 12 months?

Residential \$ \$
Commercial \$ \$

Did any one commercial real estate client generate 10% or more of firm billings in the last 12 months?

Yes No If Yes, please attach a narrative description.

Have you represented financial institutions, mortgage brokers or bankers or any other lending institutions for real estate transactions in the last 10 years? Yes No

If yes, please list names of Institutions.

Have any of these transactions involved Sub-Prime, or Alt-A mortgages? Yes No

If yes, please list names of Institutions.

b. Land Use/Development	%	%
Representation of landowners, developers and others in zoning, subdivision, wetlands and other development and land use processes.		

c. Mortgages and Deeds	%	%
Representation of lenders or borrowers in financing, refinancing or other real estate lending activities. Includes loan documentation.		

d. Foreclosures	%	%
Foreclosure of mortgages, or trustee's sales under deeds of trust and other exercises of remedies in the event of default		

e. Landlord/Tenant	%	%
Representation of landlords or tenants in drafting or negotiating lease terms. includes litigation and eviction.		

f. Condominiums, Cooperatives and Town House	%	%
Representation of developers, associations, cooperative boards, or individuals in issues arising out of common ownership and common rights of property ownership.		



REAL ESTATE SUPPLEMENT (Continued)

7. Do you require:

- a. Research and analysis of potential real environmental risks before determination of price and other central terms and conditions? Yes No
- b. A thorough review with the client of the economic impacts of known environmental implications and potential advantages of further verification or qualifications of environmental risks, in property transfer or leasing transactions with potential material environmental exposure? Yes No

If "NO" to any of the above, are all clients advised in writing to seek independent professional valuations of potential environmental exposures? Yes No



Taxation AOP - Questionnaire

What percentage of billings will be?

- | | |
|-------------------------|---|
| 1 – Tax Preparation | % |
| 2 – Tax Representations | % |
| 3 – Tax Opinions | % |
| 4 – Tax Certiorari | % |
| 5 – Litigation | % |

What percentage of representation is for?

- | | |
|---------------------|---|
| 1 – Individuals | % |
| 2 – For Profits | % |
| 3 – Not for Profits | % |
| 4 – Estates/Trusts | % |
| 5 – Public Entities | % |

What would the average dollar value of tax liability be? \$

Please list any attorneys that are also CPA's.

Does the firm also carry accountants E&O coverage? If so, what is the term and limits.



Fraud Warning

General Notice*

NOTICE TO APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL PENALTIES.

NOTICE TO ARKANSAS, NEW MEXICO AND WEST VIRGINIA APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT, OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO COLORADO APPLICANTS: IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FROM INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AUHTORITIES.

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS: WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON, PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

NOTICE TO FLORIDA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

NOTICE TO KENTUCKY APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON, FILES A STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT, MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, SUBJECT TO CRIMINAL PROSECUTION AND CIVIL PENALTIES.

NOTICE TO LOUISIANA APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO MAINE APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES OR A DENIAL OF INSURANCE BENEFITS.



NOTICE TO NEW JERSEY APPLICANTS: ANY PERSON WHO INCLUDES ANY FALSE AND MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO OHIO APPLICANTS: ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE/SHE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

NOTICE TO OKLAHOMA APPLICANTS - WARNING: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY (365:15-10, 36 §3613.1).

NOTICE TO PENNSYLVANIA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON, FILES A STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT, MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, SUBJECT TO CRIMINAL PROSECUTION AND CIVIL PENALTIES.

NOTICE TO TENNESSEE, VIRGINIA AND WASHINGTON APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.

NOTICE TO VERMONT APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR, CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT ACT, WHICH MAY BE A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO NEW YORK APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS (\$5,000) AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

THE APPLICANT REPRESENTS THAT THE ABOVE STATEMENTS AND FACTS ARE TRUE AND THAT NO MATERIAL FACTS HAVE BEEN SUPPRESSED OR MISSTATED.

COMPLETION OF THIS FORM DOES NOT BIND COVERAGE. APPLICANT'S ACCEPTANCE OF THE COMPANY'S QUOTATION IS REQUIRED PRIOR TO BINDING COVERAGE AND POLICY ISSUANCE.

ALL WRITTEN STATEMENTS AND MATERIALS FURNISHED TO THE COMPANY CONJUNCTION WITH THIS APPLICATION ARE HEREBY INCORPORATED BY REFERENCE INTO THIS APPLICATION AND MADE A PART HEREOF.



Applicant:

Title:

Applicant Signature:

Date:

Agent/Broker Name: