

## Welcome to the Ahern Insurance Brokerage eForms.

After completing this application please follow these simple instructions:

- 1) Click "Save Application," navigate to your desktop and save a copy of the completed application
- 2) Print & sign the application
- 3) To expedite the application process, email or fax a copy of the completed application to AIB

Fax: (858) 571-9010

Email: Info@AhernInsurance.com

- 4) Please mail the original to:

Ahern Insurance Brokerage  
9655 Granite Ridge Drive  
Suite 500  
San Diego, CA 92123

For additional support you can email [techsupport@aherninsurance.com](mailto:techsupport@aherninsurance.com) or consult the help file at: <http://www.aherninsurance.com/applications/help.htm>

### **IMPORTANT!**

Once you have filled out your application completely, you must **PRINT, SIGN AND MAIL THE ORIGINAL**

Law Firm Name: \_\_\_\_\_

1. Complete this section if any single client makes up more than 10% of the law firm's annual billings:

Client Name	Nature of Business	For Profit or Non-Profit?	% of Total Firm Billings	Legal Services Provided

2. Complete this section if you answered "yes" to any part of Question 12 on the Claims-Made Application:

Lawyer	Organization	Nature of Business	For Profit or Non-Profit?	Client of Firm?	Position Held by Lawyer	% of Equity Held	% of Total Firm Billings

3. Does the law firm disclose in writing to its clients all actual or potential conflicts of interest that may result from any activities noted above?  Yes  No
4. Has any lawyer received any compensation (other than billable hours) for the sale or promotion of investments, financing or tax shelter?  Yes  No
5. Does the law firm have a written policy or procedure regarding the acceptance of equity interest in exchange for legal services?  Yes  No
- If yes, provide a written explanation on the law firm's current letterhead.***

\_\_\_\_\_  
Signature/Title of Law Firm Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Agent

\_\_\_\_\_  
Date

For residents of CA: 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 or knowingly helps with intent to defraud, commits a fraudulent insurance act, which may be a crime and may subject the person to criminal and civil penalties.

Professional liability insurance offered through Attorney Shield is underwritten by Professional Solutions Insurance Company, doing business as PSIC Insurance Company in CA.