

PROFESSIONAL LIABILITY INSURANCE FOR LAWYERS E&O QUICK INDICATION FORM

Law Firm Name: Law Firm Web Address:									
Address with County:									
Additional Office Locations: Staffed?: Y N Contact Name: Email:									
1. Current Coverage:									
Name of Current Insurer:				Coverage Exp. Date:		Firm Establishment Date:		te:	
Exp. Limits (PC/Agg): Expiring Premium:				Exp. Deductible: # of Charged Lawyers at last renewal:			PC or Aggregate? Retroactive Date:		
Special Endorsements: First Dollar Defense (FDD): Y N Defense Costs Outside of Limits (CEOL/DEOL)? Y N								□N	
2. Firm Profile: Current Number of Lawyers: Number of Staff Members: Firm Gross Revenue:									
3. Firm's Areas of Practice: based on total hours worked or billings, whichever is simpler (estimate please for new firms)									
Administrative Law		%	Elder Law			% Native American/Tribal		%	
Admiralty		%	Employment/Labor l Employee	mployment/Labor Union or mployee		% Oil & Gas/Minerals/Water		%	
Antitrust/Trade Regulation		%	Employment/Labor I	Management	%	Personal Injury Defense		%	
Appellate		%	Entertainment Law	_	%	Personal Injury Plaintiff*		%	
Banking/Financial Institutions		%	Environmental Law		%	Real Estate – Commercial*		%	
Bankruptcy		%	ERISA/Employee Benefits Law		%			%	
Business/Corp. Transactions/ Contracts		%	Family – Adoption/Guardian		%	Real Estate – Foreclosure* %			
Business/Corp.		%	Family – Net Assets under \$1M		%	Real Estate – Land Use/Zoning* %			
Organization/M&A/Admin		%	1		%			% %	
Business/Corp. Litigation-Defense		%	Family – Net Assets \$1M to \$5M			Real Estate – Residential*			
	Business/Corp. Litigation Plaintiff		Family – Net Assets over \$5M		%		state – Title/Abstractir	_	
Civil Litigation – Defense		%		Governmental – Not Municipality		School law		%	
Civil Litigation – Plaintiff			Governmental–Local Municipality		%	Securities/Bonds* %			
Civil Rights & Discrimination		%	Healthcare		%	Social Security Law		%	
Class Action or Mass Tort*		%	Immigration		%	Tax Law Wills/Trusts/Estates-Net Assets		%	
Collections - Commercial*		%	Insurance Defense*		%	under \$2M* Wills/Trusts/EstNet Assets \$2M		%	
Collections – Consumer*		%	Insurance Coverage & Subrogation		%	to \$6M* %		%	
Construction or Building Contracts		%	Intellectual Property- Copyright/Trademark*		%	Wills/Trusts/Estates-Net Assets over \$6M*		ets %	
Consumer Claims		%	Intellectual Property-Patent*		%	Workers Compensation Defense %			
Criminal Defense including DUI/Traffic		%	International Law		%	Workers Compensation Plaintiff %		ff %	
Criminal Defense – White Collar		%	Mediation Law		%	<u> </u>		%	
					-			70	
4.a. Firm Profile: Does the firm share office space with another law firm? \square Y \square N 4.b. Shared letterhead? \square Y \square N									
5.a. Does the firm employ a formal Conflicts of Interest system? \square Y \square N 5.b. Formal Docketing System ? \square Y \square N									
6. Communication Letters: Engagement/Fee% Decline/Non-Eng% Scope of Services% Termination%									
7. Has the firm advertised on TV or Radio in the past 2 years or plan to advertise in the upcoming year? \square Y \square (If Yes please describe in addendum)									
8. Estimated new cases/file accepted in past 12 months: Highest Underlying case/file Value: \$ Average Underlying case/file Value: \$									
9. Does any lawyer have ownership in another entity other than the law firm or serve as an officer of another entity? Y N									
10 Is the firm involved in any class action/mass tort cases on the plaintiff side? ☐ Y ☐ N									
11. Total number of Suits for Fees (including fee proceedings via arbitration/mediation) in the past 2 years?									
12. Has any lawyer in the law firm been disciplined or denied the right to practice; or is there any such proceeding pending? Y									
13. Total number of incidents/claims reported in the past 5 years: Total amount paid/reserved for those matters: \$									
14. Schedule of Lawyers (please attach additional sheet if needed). Attorney Types: FT-Full Time, PT-Part Time, OC-Of Counsel, IC-Ind. Contractor									
Attorney Name (add sheet for additional lawyers please)			Attorney Type (FT/PT/OC/IC)	Average Hours Worked	Date of Hire		Date Admitted to Bar	CLE Hours	
1									
2									

Signature and Title of Law Firm Representative

Date