LAWYERS PROFESSIONAL LIABILITY

Practice areas, attorneys, clients, docket controls, and legal-malpractice exposures.

iPhone Files/Preview: tap a square and type X.

1. Applicant and Contact Information

Applicant / entity name

DBA

Physical address

Website

City / State / ZIP

Years in business

Primary contact

Title

Phone

Email

FEIN

Requested effective date

Describe the applicant's professional services and the clients served:

2. Coverage Requested and Current Insurance

Limit requested

Deductible / retention

Retroactive / prior-acts date

Current carrier

Current annual premium

Policy expiration

Is the current policy written on a claims-made basis? ☐ Yes ☐ No

Has there been or will there be any gap in professional liability coverage? ☐ Yes ☐ No

Is an extended reporting period, full prior acts, or predecessor coverage requested? ☐ Yes ☐ No

3. Areas of Practice - Percentage of Revenue

Enter the percentage of annual gross revenue for each category. Total should equal 100%.

Business / corporate / contracts	%
Real estate / title / closing	%
Civil litigation / trial work	%
Estate planning / probate / trusts	%
Family law	%
Criminal defense	%
Intellectual property / securities / tax	%
Other legal services	%

Total annual gross revenue

Largest client %

4. Operations and Exposure Questions

Does the firm handle class actions, mass torts, securities, patent, tax-shelter, or collection matters?	Yes	No
Does the firm act as escrow agent, title agent, trustee, fiduciary, executor, or guardian?	Yes	No
Does the firm maintain client trust accounts or receive settlement funds?	Yes	No
Does the firm represent both sides of a transaction or multiple parties with potentially adverse interests?	Yes	No
Does the firm practice outside the United States or advise on foreign law?	Yes	No
Does the firm share fees, office space, staff, letterhead, or cases with unaffiliated attorneys?	Yes	No
Has the firm merged with, acquired, dissolved, or succeeded another law practice?	Yes	No
Has any lawyer been disciplined, sanctioned, disbarred, suspended, or denied admission?	Yes	No

Explain any Yes answers above and identify the related service, client, or project:

5. Industry-Specific Risk Management Controls

Is a computerized dual-calendar or docket-control system used for every deadline?	☐ Yes	☐ No
Are conflicts checked before opening every new matter and before adding parties?	☐ Yes	☐ No
Are engagement letters used to define client, scope, fees, and responsibilities?	☐ Yes	☐ No
Are declination and disengagement letters used and retained?	☐ Yes	☐ No
Are inactive files closed promptly and subject to a written retention policy?	☐ Yes	☐ No
Are trust accounts reconciled at least monthly by someone independent of check preparation?	☐ Yes	☐ No
Are wire instructions verified through a separate trusted communication channel?	☐ Yes	☐ No
Are substantive filings, opinions, and transactional documents reviewed by another lawyer when practical?	☐ Yes	☐ No
Does the firm use written controls for lateral hires and matters brought from prior firms?	☐ Yes	☐ No
Are lawyers required to report errors, missed deadlines, complaints, and fee disputes immediately?	☐ Yes	☐ No
Are outside counsel, contract lawyers, and co-counsel required to maintain their own coverage?	☐ Yes	☐ No
Does the firm train personnel on confidentiality, phishing, records security, and client-fund fraud?	☐ Yes	☐ No

Explain any No answers, exceptions, or planned corrective actions:

6. Largest Clients and Engagements

Client / project	Services	% revenue	End date

7. Prior Coverage, Claims and Circumstances

Has any insurer declined, cancelled, non-renewed, or restricted professional liability coverage?	☐ Yes	☐ No
Has any claim, suit, demand, arbitration, disciplinary matter, or regulatory proceeding been made?	☐ Yes	☐ No
Is any applicant, owner, officer, director, or professional aware of an act that may result in a claim?	☐ Yes	☐ No
Has any client requested a refund, fee waiver, correction, re-performance, or payment due to alleged error?	☐ Yes	☐ No
Has any contract dispute, missed deadline, data loss, confidentiality issue, or intellectual-property allegation occurred?	☐ Yes	☐ No
Has any professional license, accreditation, certification, or privilege been investigated or restricted?	☐ Yes	☐ No

For every Yes answer, provide dates, claimant, allegation, status, amount paid/reserved, and corrective action:

8. Required Supporting Documents

- ☐ Current declarations / policy
- ☐ Five-year loss runs
- ☐ Standard client contract
- ☐ Professional roster / resumes
- ☐ Licenses / certifications
- ☐ Supplemental claim details

9. Applicant Certification and Signature

The applicant represents that the information provided is true, complete, and accurate to the best of the applicant's knowledge. This questionnaire does not bind coverage; all terms are subject to carrier underwriting and policy language.

Applicant name		Title	
Signature		Date	
Agent name		Agency	
Agent phone / email			