

Ballpark Estimate Application



Firm: _____		Phone _____	Fax _____
Street Address: _____		City: _____	State: _____ Zip: _____
County: _____	E-mail: _____	Website: _____	
Current Policy Expiration Date: ____/____/____		Retroactive or "Prior Acts" Exclusion Date: ____/____/____	
Current Limits: _____		Current Deductible: _____ <input type="checkbox"/> Aggregate or <input type="checkbox"/> Each Claim	
Current Professional Liability Carrier/Program: _____		Expiring premium _____ Number of years continuous insurance coverage: _____	

❖ Please provide information about the attorneys in your firm (if more than five (5) attorneys, please use a separate sheet of paper.)

Name of Attorney	Date Began Private Practice (MM/DD/YY)	Date Joined Firm (MM/DD/YY)	Status: Employee/Partner/Of Counsel/Indep. Contractor	Indicate "Yes" here if prior acts should not preclude date attorney joined firm; otherwise, indicate the individual retroactive exclusion date (MM/DD/YY)
(1)				
(2)				
(3)				
(4)				
(5)				

❖ Please tell us what percentage of Billable Hours (not income) your firm spends in the following areas of practice. (Please express in whole numbers.)

_____ % Admiralty/Marine – Defense _____ % Admiralty/Marine – Plaintiff _____ % Anti-Trust/Trade Regulation _____ % Arbitrator/Mediator _____ % Banking/Financial Institutions _____ % Bankruptcy Business Transactions/Corp. Law _____ % Administrative _____ % Formation of Entities _____ % General Contract Negotiation _____ % Mergers & Acquisitions _____ % Secured Transactions _____ % Civil Rights/Discrimination _____ % Collections _____ % Construction (Building Contracts) _____ % Consumer Claims (not class action) _____ % Criminal _____ % Entertainment _____ % Environmental Law _____ % ERISA/Pension/Employee Benefits Family Law _____ % Adoption _____ % Divorce – Marital Assets < 1M _____ % Divorce – Marital Assets > 1M _____ % Elder Law	Family Law, Continued _____ % Guardianship/Juvenile _____ % Social Security _____ % Govt. Contracts/Claims _____ % Healthcare – Regulatory Compliance _____ % Immigration/Naturalization _____ % Intellectual Property* _____ % International Law _____ % Labor/Employment – Management _____ % Labor/Employment – Employee _____ % Labor/Employment – Union Litigation _____ % Class Action/Mass Tort – Defense* _____ % Class Action/Mass Tort – Plaintiff* _____ % General Commercial – Defense _____ % General Commercial – Plaintiff _____ % Insurance Defense _____ % Personal Inj./Prop Damage – Defense _____ % Personal Inj./Prop Damage – Plaintiff _____ % Work Comp – Defense _____ % Work Comp – Plaintiff _____ % Lobbying _____ % Local Govt./Municipal (not bonds) _____ % Natural Resources/Oil & Gas	Real Estate _____ % Abstracting/Title – Commercial _____ % Abstracting/Title – Residential _____ % Conveyance – Commercial _____ % Conveyance – Residential _____ % Foreclosures & Loan Workouts _____ % Landlord/Tenant _____ % Syndications/Ltd. Partnerships _____ % Zoning & Planning Securities* Taxation _____ % Business _____ % Individual _____ % Tax Litigation _____ % Opinions Wills, Estate, Trust, Probate _____ % For assets < 1M _____ % For assets > 1M _____ % Other (please describe): _____ _____ % _____ _____ % _____ 100 % Total
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*** IF YOU INDICATED IN INTELLECTUAL PROPERTY, CLASS ACTION/MASS TORTS, OR SECURITIES, A BALLPARK ESTIMATE MAY NOT BE OFFERED. PLEASE CONTACT YOUR BROKER.**

❖ Please tell us about your law firm:

- ✓ Does the firm have a docket system with two independent date controls? Yes No
- ✓ Do you have a conflict of interest avoidance system? Yes No
- ✓ Do you use engagement/disengagement letters? Yes No
- ✓ How many suits for fees have you filed against your clients in the last 2 years? _____

Any Professional Liability claims or incidents reported against any of the attorneys' listed, prior partners or associates in the last 10 years?
 Yes* No *If yes, please complete a Description of Claim or Incident Supplement available from our web site listed above.

Have any of the firm's attorneys been the subject of any disciplinary action, for any reason other than non-payment of dues, within the last five years?
 Yes* No *If yes, please complete Disciplinary Proceedings Supplement available from our web site listed above.

Does any attorney in your firm serve as a director, officer, or employee, or have any equity interest, in any client of the firm?
 Yes* No *If yes, please complete Outside Interest Supplement. Available from our web site listed above.

OPTIONAL COVERAGES DESIRED: Title Agency Claim Expenses Outside Limit (CEOL) First Dollar Defense