



MULTI-QUOTE APPLICATION

FIRM INFORMATION

FIRM NAME:		CONTACT NAME:	
ADDRESS:		EMAIL:	
PHONE NUMBER:		FAX NUMBER:	

PRACTICE DESCRIPTION

(Please indicate areas of practice by percentage. Round to the nearest whole %. Total must equal 100%)

%	Administrative	%	Divorce with Assets \$1M-\$5M	%	Personal Injury – Plaintiff Of this percentage how much is?
%	Admiralty	%	Divorce with Assets > \$5M	%	Class Action/Mass Torts
%	Antitrust/Trade Regulation	%	Employment – Labor/Employee	%	Med Mal
%	Arbitration/Mediation	%	Employment - Management	%	Auto/Slip & Fall
%	Bankruptcy	%	Entertainment	%	Other:
%	Business Trans/Contracts	%	Environmental	%	Real Estate – Commercial
%	Civil Rights & Discrimination	%	ERISA / Employee Benefits	%	Real Estate – Residential
%	Col/Repo–Commercial	%	Financial Institutions/Banking	%	Real Estate – Title/Abstracting
%	Col/Repo-Consumer	%	Government Contracts	%	Securities or Bonds
%	Commercial Litigation – Plt.	%	Immigration	%	Social Security
%	Commercial Litigation – Def.	%	Insurance Defense	%	Taxation
%	Civil Litigation	%	Patent	%	Water
%	Construction/Building Contracts	%	Trademark	%	Wills, Trusts, Estate < \$1M
%	Corporate Administrative	%	Copyright	%	Wills, Trusts, Estate \$1M-\$5M
%	Corporate Mergers & Acq.	%	International Law	%	Wills, Trusts, Estate > \$5M
%	Criminal	%	Natural Resources (Oil & Gas)	%	Workers Comp - Defense
%	Corp & Bus Org	%	Personal Injury – Defense	%	Workers Comp - Plaintiff
%	Divorce with Assets < \$1M			%	Other:

CURRENT INSURANCE INFORMATION

LPL CARRIER		RENEWAL DATE		PRIOR ACTS DATE	
LIMITS OF LIABILITY		NUMBER OF ATTORNEYS			
DEDUCTIBLE		CURRENT PREMIUM			
# OF NON-LAWYER STAFF		FIRM REVENUE (LAST YEAR)			
Do you have Data Breach/Cyber Liability Insurance?		Does your firm have Employment Practices Insurance?			
YES	NO	YES	NO		
Do you have a firewall?		Have you ever had an EPLI claim?			
YES	NO	YES	NO		
Have you ever had a data breach?		Would you like a quote for EPLI?			
YES	NO	YES	NO		
Would you like a quote for Cyber Liability?					
YES	NO				



RISK MANAGEMENT SYSTEMS

Is a computerized Conflicts of Interest system used? YES NO	Number of Docket Control Systems: Are these computerized? YES NO
Are Engagement and Termination letters used? YES NO	Are Declination/Non-Engagement letters used? YES NO
Does any attorney give investment advice to clients? YES NO	Does any lawyer have more than 10% ownership in another entity or serve as an officer of another entity? YES NO
Does your firm have a full time Firm Administrator? YES NO	Does your firm have a Risk Management Program? YES NO

CLAIMS INFORMATION

Has any lawyer had a disciplinary action? YES NO	What percent of AR's are more than 90 days past due? %
Total Number of incidents/claims in the past 5 years? Please provide details and loss amount separately.	Number of clients sued for non-payment in the past 2 years?

ATTORNEY ROSTER

P = Partner, A = Associate, E = Employee, O = Owner, OC = Of Counsel, IC = Independent Contractor
 (Please attached additional pages if needed)

ATTORNEY NAME	DESIGNATION	HIRE DATE	BAR ADMIT DATE	HOURS WORKED/WEEK	CLE CURRENT (Y/N)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Signature: _____

Date: _____