

## SAFELAW APPLICATION

NOTICE: THE POLICY FOR WHICH THIS APPLICATION IS MADE IS A CLAIMS MADE AND REPORTED POLICY SUBJECT TO ITS TERMS. THIS POLICY APPLIES ONLY TO ANY CLAIM FIRST MADE AGAINST THE INSUREDS DURING THE POLICY PERIOD OR ANY EXTENDED REPORTING PERIOD AND REPORTED TO US PURSUANT TO THE TERMS OF THE POLICY ARISING FROM ANY CIRCUMSTANCES WHICH TOOK PLACE ON OR AFTER ANY RETROACTIVE DATE SPECIFIED IN THE SCHEDULE AND BEFORE THE EXPIRY DATE OF THE POLICY PERIOD. AMOUNTS INCURRED AS CLAIMS EXPENSES SHALL REDUCE AND MAY EXHAUST THE LIMIT OF LIABILITY AND ARE SUBJECT TO THE DEDUCTIBLE. PLEASE READ THE POLICY CAREFULLY

## **APPLICATION INSTRUCTIONS**

ALL QUESTIONS MUST BE ANSWERED COMPLETELY. THIS APPLICATION MUST BE SIGNED AND DATED BY A PRINCIPAL OF THE FIRM. PLEASE TYPE OR PRINT CLEARLY.

## **COMPANY DESCRIPTION**

Name of Company:				
Address, City, State and Zip Cod	le:			
Names and URLs of all subsidiary companies (if any) "				
C. L. C.P. C. Alice		URL		
Subsidiary Name	<u>e</u>	UKL		
Subsidiary Name	e	OKL		
Subsidiary Name	e	ORL		
Subsidiary Namo	e	OKL		
Subsidiary Name	e	OKL		
Subsidiary Namo	e	OKL		

1. Please provide the following details about your firm

	Prior Year	Current Year	Next Year (Estimate)
Total Revenue			
Number of Lawyers			



**2.** Please indicate your areas of practice as a percentage of billings for the past 12 months.

<u>NOTE</u>: In lieu of completing the table below, we can accept the completed area of practice chart from in your latest lawyers professional liability application.

Area of Practice	% Of Billings	
dministrative Law		
Admiralty Defense		
Admiralty Marine		
Adoptions		
Arbitration/Mediation		
Banking		
Bankruptcy		
BI/PI Defense		
Bonds		
Business Transactions		
Civil Rights		Medi Medi
Civil/General Litigation		Mergers & Acqu
Class Action Plaintiff		Municipal Law
Collection		Oil & Gas Mining
Commercial Defense		Oil & Gas Title
Commercial Law		Patent, Trademark, Copy
Construction Law		Patent, Trademark, Copyrig
Consumer Claims		Patent, Trademark, Copyrig
Contracts		Plaintiff BI/PI (Non-Product L
Corporate Formation		Product Liability Plaintiff
Corporate General		Real Estate Closings/General
Corporate Litigation		Real Estate Commercial Title
Criminal Law		Real Estate Development
Divorce		Real Estate Investment Trusts
Employment Law		Real Estate Limited Partnership
Entertainment		Real Estate Residential Title
Environmental Law		Real Estate Syndication
ERISA		Securities
Estate Planning		Taxation Opinions
Estate/Trust/Probate		Taxation Preparation
Family Law – (Non-Divorce)		Taxation Representation
Fiduciary		Traffic
Foreclosures		Wills
Foreign Law		Workers Compensation Defense
Guardianships		Workers Compensation Plaintiff
Immigration/Naturalization		Other: (Please Describe Below)
Insurance Defense		2 2001 (1. 12232 2031 122 2010 14)
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3.	Please provide the following:					
	i)	The applicants Lawyers Professional Liability Policy Insurer (name of insura	ance comp	oany)		
	ii)	The Applicants Lawyers Professional Liability Policy number				
	iii)	iii) The Applicant's Lawyers Professional Liability Policy Limit. Please include the per claim limit and the aggregate limit.				
	iv) The Applicant's Lawyers Professional Liability Policy deductible. Please include the per claim deductible and aggregate deductible, if applicable.					
	v)	a copy of the Applicant's Lawyers Professional Liability Policy application.  Please attach				
	vi)	The Applicant's Lawyers Professional Liability Policy Retroactive Date				
4.	Do you sca	an and filter emails for malicious attachments?	Yes	No		
5.	a. Dk b. SP	e any of the following to authenticate your email? KIM PF MARC	Yes	No		
6.	-	disabled the Remote Desktop Protocol ("RDP") on all of your computer ndpoints including servers?	Yes	No		
7.	Do you use multi-factor authentication for all remote access to your computer Yes No network?			No		
8.	Do you have a process in place to regularly download and install patches within  Yes  No  30 days of release on your computer network (including all hardware and software publicly accessible through the internet)?					
9.	Are all sys	tems and data on your computer network backed up at least weekly?	Yes	No		



10.	Are backups kept fully isolated from your network in offline, air-gapped or cloud based storage, so that they are not accessible from the rest of your computer network?	Yes	No
11.	Are administrative privileges restricted to specific users on your computer network?	Yes	No
12.	Do you encrypt all sensitive and confidential information stored on your computer network or sent externally by email?	Yes	No
	Do you run Microsoft Windows 7, Microsoft Windows Server 2008, or any other unsupported operating systems on your computer network? answered "yes" to question 13, please provide a description of compensating controls you have in network below  If you answered "no" to any of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please provide a description of the above questions 4 through 12, please question a description of the above question a description of the above question a description and a description a description a description and a		<b>No</b> rotect
	of compensating controls you have in place to protect your network here:		
14.	Has the Applicant had any computer or information <b>security incidents</b> during the past three (3) years? A <b>security incident</b> includes any interruption, suspension or unauthorised access, intrusion, breach, compromise or use of your computer systems, including embezzlement, fraud, theft of proprietary information, denial of service, electronic vandalism or sabotage, computer virus or other similar	Yes	No
14.	past three (3) years? A <b>security incident</b> includes any interruption, suspension or unauthorised access, intrusion, breach, compromise or use of your computer systems, including embezzlement, fraud, theft of proprietary information, denial	Yes	No



## **DECLARATION**

To the best of my/our knowledge and belief, I/We declare that the information provided in connection with this Application after reasonable enquiry, is true and I/We have not withheld any material facts. I/We understand that non-disclosure or misrepresentation of material fact may entitle Underwriters to void the insurance. (NB a material fact is one in which the knowledge or ignorance of it would naturally and reasonably influence the judgment of Underwriters in making the contract at all, in estimating the degree or character of the risk, or in fixing the rate of premium, or would otherwise be deemed material under applicable law. If you are in any doubt as to whether a fact is material or not, you must disclose it). I/We understand that signing this Application does not bind me/us to complete the policy, but agree that, should a contract of insurance be concluded, this Application and statements made therein shall form the basis of the contract.

This application and materials submitted with it shall be retained on file with Underwriters and shall be deemed attached to and become part of the policy if issued. Underwriters are authorized to make any investigation and inquiry in connection with this application as it deems necessary.

The undersigned authorized officer of the Applicant hereby acknowledges that they are aware that the Limit of Liability contained in this policy shall be reduced, and may be completely exhausted, by the costs of legal defense and, in such event, the insurer shall not be liable for the costs of legal defense or for the amount of any judgment or settlement to the extent that such exceeds the Limit of Liability of this policy.

The undersigned authorized officer of the Applicant hereby further acknowledges that they are aware that legal defense costs that are incurred shall be applied against the retention amount. If the information supplied on this application changes between the date of this application and policy issuance, the Applicant will immediately notify underwriters of such changes. Underwriters may then withdraw or modify outstanding quotations and / or authorization or agreement to bind this insurance.

Name	Title	Signature	Date