



Specified Professions Professional Liability Product

PARALEGALS SUPPLEMENTAL APPLICATION

Please fill out the General Information section, along with the section(s) you are requesting coverage.

1. Name of Applicant: _____
If you have a website, include your website address: _____
2. Please list and describe the types of legal work in which you are currently involved and provide the percentage of revenue from each: (Avoid general terms.)

3. Do you specialize? Yes No
If Yes, Please describe:

4. Are you employee at a law firm? Yes No
5. Do you free lance? Yes No
6. Do you do:

Collection / Credit Work	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Docket Control	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Patent Law	<input type="checkbox"/> Yes	<input type="checkbox"/> No
SEC / Prospectus	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Title Searches	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Do you engage in Real Estate Closings? Yes No
If Yes, please proceed to questions 8-12. (If No, go to Question 13.)
8. Indicate the percentage of your gross annual income derived from services listed below:

a. Mortgage Broker _____%	b. Escrow Agent _____%
c. Title Agent _____%	d. Title Abstractor _____%
e. Appraiser _____%	f. Other _____%

If you provide any of the above, please describe your services:

9. What are your annual closing fees? \$ _____
10. To what extent do you prepare loan paperwork for lenders? Please explain:

11. Do you hire lawyers? Yes No
12. Do you hire subcontractors? Yes No
If Yes:
 - a. Please describe subcontractors' services and state the annual cost: \$ _____



- b. Are subcontractors' required to carry their own errors and omissions insurance? Yes No
- c. If Yes, do you obtain certificates of insurance? Yes No
- d. Please describe the qualifications you require of subcontractors:

13. Please attach resumes of principles, partners and key employees.

It is understood this supplement becomes part of application for Specified Professions Liability and is utilized to develop information unique to the operations of the applicant.

Date

Authorized Representative