



SUPPLEMENT **8**

P.I. PLAINTIFF ADDITIONAL INFORMATION

Full Firm Name: _____

Total number of personal injury/plaintiff cases open at present time: _____

Average number of cases being handled by each attorney at any one time: _____

Average Dollar Value of Personal Injury / Plaintiff Cases:

- _____ less than \$25,000
- _____ \$25,000-\$100,000
- _____ \$100,000-\$250,000
- _____ \$250,000-\$500,000
- _____ \$500,001 and above

What percentage of your plaintiff practice is in the following areas?

Current Year:

- _____ Medical Malpractice
- _____ Lawyer's Professional Liability
- _____ Product Liability
- _____ Employment Liability/ADA
- _____ Other: Describe:

Last Calendar Year:

- _____ Medical Malpractice
- _____ Lawyer's Professional Liability
- _____ Product Liability
- _____ Employment Liability/ADA
- _____ Other: Describe:

Please list the top five dollar values of your firm's open personal injury / plaintiff cases:

	<u>Expected Settlement</u>	<u>Attorney fee</u>	<u>Net to client</u>
1)			
2)			
3)			
4)			
5)			

This information is for underwriting purposes only and will not be released to any other party.

Applicant hereby warrants that the statements set forth herein are true, complete and accurate and that there has been no attempt at suppression or misstatement of any material facts which are known, or should be known. Applicant agrees that this Supplemental Application shall become the basis for any coverage and part of any policy that is issued by the Company.

Date: _____ Signature: _____ Title: _____