



## 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:					
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	☐ Yes	□ No			
	Docket Control	☐ Yes	□ No			
	Patent Law	☐ Yes	□ No			
	SEC / Prospectus	☐ Yes	□ No			
	Title Searches	☐ Yes	□ 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? \$					
	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: \$					

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		Date Authorized Representative		
the	ope	rations of the applicant.		
It is	unc	derstood this supplement becomes part of application for Specified Professions Liability and is utilized to develop in	formation ur	nique to
13.	Ple	ease attach resumes of principles, partners and key employees.		
	d.	Please describe the qualifications you require of subcontractors:		
	c.	If Yes, do you obtain certificates of insurance?	☐ Yes	□ No
	b.	Are subcontractors' required to carry their own errors and omissions insurance?	Yes	☐ No

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