

- DEERFIELD INSURANCE COMPANY
- EVANSTON INSURANCE COMPANY
- ESSEX INSURANCE COMPANY
- MARKEL AMERICAN INSURANCE COMPANY
- MARKEL INSURANCE COMPANY

**BI PLAINTIFF FIRMS  
PERTINENT INFORMATION NEEDED**

1. Use of engagement/retention letter - send sample.
2. Procedure used if firm declines services to client. Do they advise of statute? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Percentage of settlement firm takes as fees. \_\_\_\_\_
4. Types of cases - i.e., medical malpractice, asbestos, personal injury, wrongful death. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Docket - request narrative describing controls.
  - a) New File - How does initial answer date get on system? By whom? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - b) What control (or who) checks to see if suit is filed?  
\_\_\_\_\_  
\_\_\_\_\_
6. Does the firm advertise? [ ] Yes [ ] No. If so, in what medium? \_\_\_\_\_  
\_\_\_\_\_
7. Does the firm take referral cases in state, out of state? [ ] Yes [ ] No. If so, approximately how many per year?  
\_\_\_\_\_
8. Does the firm refer cases to other firms? [ ] Yes [ ] No. Approximately how many per year? \_\_\_\_\_

I/We understand that the information submitted herein becomes part of my/our professional liability application and is subject to the same representations and conditions.

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Title (Officer, partner, etc.)

\_\_\_\_\_  
Signature of Applicant\*

\_\_\_\_\_  
Date

**MUST BE SIGNED BY A MEMBER OF THE FIRM'S MANAGEMENT COMMITTEE OR GOVERNING BODY.**