

Signature of Owner, Officer, or Partner

This is an application for a claims-made policy. Failure to submit a completed application in a timely manner could jeopardize your prior acts coverage.

NOTE: PLEASE REVIEW A SPECIMEN POLICY FOR POLICY PROVISIONS.

The limits of liability stated in the policy are reduced by costs, charges, and expenses. Costs, charges, and expenses may also be applied against your deductible, if applicable to the claim.

Underwritten by Certain Underwriters at Lloyd's of London **Plan Administrator:**



CLAIM INFORMATION SUPPLEMENT

NOTE: PLEASE PRINT IN INK OR TYPE. DO NOT USE CORRECTION FLUID OR GEL PENS. INITIAL AND DATE ANY CHANGES YOU MAKE.

f the answer to Question 12C or 12D on the new business application (or any part of Question 10 on the renewal application) is "yes," provide information for each claim or incident i	in
occordance with the format below. ATTACH ONE FORM FOR EACH CLAIM OR INCIDENT.	

1. Full name of party making claim:	
• • •	
3. Indicate whether: O Claim O Lawsuit O Incident on	ly
4. Date of alleged error:	
5. Date claim reported to you:	
6. Description of claim/incident:	
A. Alleged act, error, or omission upon which claimant bas	ses claim:
B. Description of events leading to claim:	
7. Amount of damages claimed:	
8. Additional defendants:	
9. Name of insurer:	
10. IF CLOSED:	
Total deductible paid:	\$
Indicate total loss paid in excess of the deductible:	\$
Indicate total defense expenses paid in excess of the deductible:	\$
IF PENDING:	
Claimant's settlement demand:	\$
If suit filed, amount asked in complaint:	\$
Insurer's loss reserve:	\$
Defense expenses to date:	\$
11. Explain what action has been taken to prevent a recurrence of sim	ilar claim:
	complete and accurate and that there has been no attempt at suppression or misstatement of any material facts known,
and agrees that this application shall become the basis of any coverage and	d part of any policy that may be issued by the Underwriter.
X	

AIF 2385 CS (02/17) 172133-ASCE-PLE-GEN-CLM

Applicant/Firm Name (Please Print)

Date