

COMBINATION AREA OF PRACTICE QUESTIONNAIRE

Please mark "N/A" if you do not have billing from the following Area of Practice. Otherwise, please complete the appropriate section(s).

Bankruptcy	
Collections	
Estate/TrustWork	
Financial Institution Work (Banking)	
Plaintiff Litigation (BI or PD)	
Real Estate	
Tax Work	

SIGNATURE REQUIRED ON LAST PAGE OF QUESTIONNAIRE



BANKRUPTCY QUESTIONAIRRE

1. Please provide the percentage of bankruptcy cases in the following categories:

	For Debtors:	%		
	For Creditors:	%		
	As Trustee:	%		
	Other:	%		
2.		torneys who practice in this area aware of and in full compliance 005 Bankruptcy Report Act?	e with the Yes	e No
3.	Do you have written debtor's bankrupto	due diligence procedures for verifying the truthfulness and accuracy schedule?	icy of the Yes	No
4.	Do you have written	due diligence procedures for certification of the debtor's ability to p	ay? Yes	No
5.	Do you provide a un	iform disclosure statement to all debtor clients regarding the duti	ies of the	•
	debtor in bankrupt	cy?	Yes	No
	a. If yes, is it main	tained for at least 2 years?	Yes	No
6.	If you represent deb	tor's, are all required disclosures, including statements about actine	q as a de	bt

- If you represent debtor's, are all required disclosures, including statements about acting as a debt relief agency, prominently displayed in all advertising and other mass communication? Yes No
- 7. Do you, your attorneys or firm have any contracts, affiliations, or referral arrangements with third party entities or other attorneys that offer any pre-bankruptcy services in the area of debt settlement, debt resolution, debt consolidation, or debt relief?

Yes No

8. Please provide the total number of bankruptcy clients you currently have.

Please complete the following for each attorney in your firms handling bankruptcy matters:

	Attorney Name	Years of Experience	%of time devoted to bankruptcy
1.			
2.			
3.			
4.			
5.			



COLLECTION WORK QUESTIONNAIRE

- 1. During the past three (3) years:
 - a. How many lawyers have done collection work?
 - b. Approximately how many individual consumer debtor's have been contacted by phone, letter or otherwise by anyone employed by or in any way affiliated with the applicant firm?
- During the past three (3) years have you allowed any collector, collection agency, or any other party to use your law firm name or any attorneys names in collection-related matters? Yes No If yes, please explain:
- During the past three (3) years, have you provided any advice or opinions to any party relative to implementation of any debt collection procedure, collection letter or other collection activity which would claim to be in compliance with the Federal Fair Debt Collection Practices Act or similar state or federal regulation? Yes No If yes, please explain:
- **4.** What steps do you take to assure that all collection letters the firm sends are in compliance with the Federal Fair Debt Collection Practices Act? Please explain:
- **5.** What steps do you take to assure that all attorneys in the firm remain current with the changes in the Federal Fair Debt Collection Practices Act? Please explain:
- 6. Within the past three (3) years, has any present or past attorney had any ownership interest in any kind of collection agency?Yes No
- 7. Has the firm executed any indemnity agreements with clients (for which you are doing collections work) which would indemnify or hold the client harmless for any violation of the Federal Fair Debt
 Collection Practices Act provisions related to the collections work? Yes No
- 8. Within the past three (3) years, has the firm or any present or past attorney been a party to any claims or suits under the Federal Fair Debt Practices Collections Act?YesNo



ESTATE/TRUST WORK QUESTIONNAIRE

1.	List the top five largest Estate months:	es/Trusts to which the fir	m provided legal services in the	previou	s 12
	Name	Attorney	Approximate Value	e	
	1.				
	2.				
	3.				
	4.				
	5.				
	a. What services are provided	I for the client(s)?			
	b. Does work performed inclu	de business formation, m	anagement or other business tra	nsaction Yes	s? No
	c. Does any attorney of the fir	rm have check signing or	investment authority for a client?	Yes	No
2.	Does any single Estate/Trust of If yes, provide name and percent		an attorney's annual billings?	Yes	No
3.	Does your estate practice include new wills?	lude a file review by a se	cond attorney not involved in dra	fting on Yes	all No
	D			F aula 6	£ -

4. Does any attorney currently serve as Executor/Personal Representative of an Estate or Trustee of a trust (not including family related matters)? Yes No

If yes, provide a list by attorney with: Name of Estate/Trust, approximate value and description of services provided.

Attorney:

Name of Estate / Trust

Approximate Value

Description of Services

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member of the firm:

FINANCIAL INSTITUTION QUESTIONNAIRE

1. With regard to any financial institution clients(s) within the past six (6) years, has any member or former

	a.	Performed services other than bankruptcy, collection, loan documentation/workow	ut, real est	ate
		closings / foreclosures, title work/conveyances or trust work?	Yes	No
	b.	Served as general counsel, CEO, chairman, president, officer director or member of	•	
		nmittee?	Yes	No
	C.	Had any equity interest or lean commitments?	Yes	No
	d.	Had a bank client declared insolvent or operated under regulatory direction or agree	eement?	
			Yes	No
	lf y	ves to any part of question 1 above, please answer questions 2 through 4.		
2. a	. Na	ame of Financial Institution:		
	b.	Location (City, State):		
	с.	Nature and capacity of services applicant firm provided (please be specific as poss	,	
	d.	Name of firm member(s) or former member(s) who provides or provided above pro	ofessional	
	e.	vices: Dates of services fromto		
	б. f.	Still a client?	Yes	No
	g.	Date of insolvency, take-over or merger, if applicable:		
3. V	Vith	regard to the above institution, has any member of former member of the Firm:		
-		Been a member of any internal committee(s) such as but not limited to the executive	e, loan pol	icy,
		dit or investment advisory committee(s)?	Yes	No
	lf y	ves, please identify the type of committee(s) and dates participation:		
	b.	Acted as director or officer?	Yes	No
	C.	Acted as general counsel?	Yes	No
	d.	Has loan commitments?	Yes	No
	lf y	ves, please describe type and amount:		
	e.	Held stock or other financial interest?	Yes	No
	lf y	res, what is the dollar value of such interest \$, the per	centage o	f
	su	ch interest%, and is the institution: publicly owned/traded	or	
	pri	vately held?		
	f.	Participated in the preparation of a response to regulatory examination reports?	Yes	No
	g.	Participated or assisted in the rendering of advice on regulatory issues?	Yes	No





5. Has any regulatory authority filed a lawsuit against the financial institution or the insured (including any

any director or officer of the above financial institution?

If yes, please provide complete details:



PLAINTIFF QUESTIONNAIRE

Please answer all questions in relation to your plaintiff practice only

a. b.		Yes Yes	No No
C.		Yes	No
d	. Yellow Pages If Yes , please attach copies of this advertising or provide an explanation	Yes	No
2.	Total number of plaintiff cases during the past 12 months:		
3.	Average number of personal injury cases each attorney handles per year:		
4.	Percentage of cases (must equal 100%): Settle before trial?% Cases tried to co	onclusion	?
5.	Percentage of cases referred to you by other law firms?%		
6.	Do you use written referral agreements in all cases which are referred to you?	Yes	No
7.	Do you use written referral agreements in all cases which are referred out?	Yes	No
8.	Do you obtain certificates of insurance in all cases which are referred out?	Yes	No
9.	Average dollar value of all plaintiff cases are: Less than \$25,000 \$25,001 - \$100 \$100,001 - \$500,000 \$500,001 - \$1,000,000 Other:),000	
10.	What percentage of your plaintiff cases are:		
	%Class Action/Mass Tort* %Product Liability %Legal Malp	oractice	
	%Automobile Accident %Slip and Fall %Medical Ma	alpractice	!
	%Workers Comp %Other (Please describe):		
11.	With respect to your answer in Question 10, please state the maximum dollar value of a	ny one ca	ise:
	<pre>\$Class Action/Mass Tort * \$Product Liability \$Legal Malp</pre>	oractice	
	Automobile Accident Slip and Fall Medical Matrix	alpractice	!
	\$Other		
12.	Percentage of recovery your firm takes as fees:%		
13.	Describe the firm's procedure for tracking the Statute of Limitation on each personal	injury ca	se:

14. Name and position of person(s) designated to track the Statue of Limitation on each personal injury case:

* Please complete separate Class Action / Mass Tort supplement.



REAL ESTATE QUESTIONNAIRE

REAL ESTATE PRACTICE - GENERAL

1.	Did any one commercial real estate client generate 10% or more of months?	f firm billings in f Yes	the last 12 No
2.	Have you represented Financial Institutions, Mortgage Brokers or E institutions for Real Estate transactions in the last 10 years?	ankers or any o Yes	other lending No
	If Yes, Please list names of Institutions		
	Have any of these transactions involved Sub-Prime, or Alt-A mortg	•	
	If Yes, Please list names of Institutions.	Yes	No
3.	At any time during the last 10 years, have you formed, mana investments (syndications, general partnerships, limited partnership the purpose of investing in real property?		
	a) If yes – have the annual billings from this work ever exceeded 1	5% of total annu Yes	al billings? No
4.	Does the firm's real estate practice include assisting in the securing your clients?	g of financing ar Yes	nd/or loans for No
5.	At any time during the last 10 years, has the firm, or any atto sought, solicited or sought out investors in real estate mortgages o investments?	•	-

ALLOCATION OF REAL ESTATE BILLINGS BY CATEGORY

			<u>Current Year</u>	<u>Previous Year</u>
a.	Purchase and Sale	Residential	%	%
		Commercial	%	%

Transactions on behalf of buyers or sellers, including negotiation and drafting of purchase agreements, option agreements, deeds and other closing documents, representation at closing and related activities. What is the approximate number of transactions handled in the last 12 months?

Residential Commercial



	What was the largest value Real Estate Transaction in the last 12 months?			
	Resid	lential	\$	
	Commercial		\$	
	b.	Land Use/Development	%	%
	•	esentation of landowners, developers and others development and land use processes.	in zoning, subdivision,	wetlands and
	C.	Mortgages and Deeds	%	%
	•	esentation of lenders or borrowers in financing, r ies including loan documentation.	efinancing or other real	estate lending
	d.	Foreclosures	%	%
	Foreclosure of mortgages, or trustee's sales under deeds of trust and other exercises of remedies in the event of default			
	e. Lai	ndlord/Tenant	%	%
	Representation of landlords or tenants in drafting or negotiating lease terms including litigation and eviction.			
	e.	Condominiums, Cooperatives and Town Hous	se%	%
	Representation of developers, associations, cooperative boards, or individuals in issues arising out of common ownership and common rights of property ownership.			
	f.	Property Valuation/Real Estate Tax Abateme	nt%	%
	•	esentation of property owners before county/loca edings to contest property valuations or assesse	•	
	g.	Other (Please describe):	%	%
	Total	must equal 100%	100%	100%
	te the to	tal number of title opinions issued over the past	2 years:	
	Comme	ercial: # Residential: #	<u> </u>	
1.	Please	indicate the total number of title searches comp	pleted over the past 2 ye	ears by:
	a. Attorneys in your firm: c. Non-attorneys but employees of your firm:			your firm:
	b. Attorneys not in your firm: d. Non-attorney subcontractors:			



If numbers are indicated in c. or d., do you obtain certificate(s) of insurance from all of your subcontracted sources of title searches? Yes No 2. How many Real Estate Title Insurance policies has the firm issued in the last 12 months? #_____ 3. Do you make use of engagement letter when doing title opinions or title searches, specifying who your clients is and what services you are performing for that client? Yes No ENVIRONMENTAL REAL ESTATE 1. Does the Applicant's legal services in connection with a property transfer or leasing transaction include documented procedures to review and address issues such as: a. Whether the type of business in question creates or in the past may have created environmental issues and concerns? Yes No b. Whether any real or personal property owned, or leased now or in the past, or property to be procured is or is likely to be contaminated by hazardous matters (e.g., asbestos, lead, pcbs, etc.)? Yes No c. Whether any specific site locations owned or leased, operated now or in the past, or land or property to be acquired are located in, or contiguous to ecologically sensitive areas (such as wetlands, floodplains, aquifers, or conservations areas, etc.)? Yes No d. Whether any corporate entity connected to the client including all past and present subsidiaries, divisions and spin-offs has ever been fined, penalized, cited, or sued for violating any federal, state, or local environmental law or regulations? Yes No 2. Do you require? Research and analysis of potential real environmental risks before determination of price a. and other central terms and conditions? Yes No b. A thorough review with the client of the economic impacts of known environmental implications and potential advantages of further verification or qualifications of environmental risks, in property transfer or leasing transactions with potential material environmental exposure? Yes No If "NO" to any of the above, are all clients advised in writing to see C. independent professional evaluations of potential environmental exposures? Yes No



ESCROW

1.	a.	Does the firm hold client funds in escrow?	Yes	No
	b.	If yes to 1a, are wire transfer instructions always verified by p	hone contact w	vith the client
		or bank?	Yes	No
	c. If yes to 1a, are wire transfer instructions always sent by e		ypted email or	fax?
			Yes	No
	d.	If yes to 1a, does the firm have a crime policy or bond?		
			Yes	No
		If yes to 1a, b, c or d; please provide a description on the	firm's letterh	ead.

TAXATION AOP QUESTIONNAIRE

What percentage of billings will be?

- 1 Tax Preparation%2 Tax Representations%3 Tax Opinions%4 Tax Certiorari%
- 5 Litigation %

What percentage of representation is for?

1 – Individuals	%
2 – For Profits	%
3 – Not for Profits	%
4 – Estates/Trusts	%
5 – Public Entities	%

What would the average dollar value of tax liability be? \$ _____

Please list any attorneys that are also CPA's:

Does the firm also carry accountants E&O coverage? If so, what is the term and limits.

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Fraud Prevention – General Warning

NOTICE TO ARKANSAS APPLICANTS: Any person who knowingly presents a false or fraudulent claim for payment for a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

NOTICE TO CALIFORNIA APPLICANTS: Pursuant to California Insurance Law, Sec. 1623, this application for insurance is being submitted by an insurance broker who is acting on behalf of an insured.

NOTICE TO COLORADO APPLICANTS: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policy holder or claimant for the purpose of defrauding or attempting to defrauding or attempting to defraud the policy holder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

NOTICE TO D.C. APPLICANTS: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

NOTICE TO FLORIDA APPLICANTS: Any person who knowingly and with intent to injure, defraud, or deceive any insurance company files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

NOTICE TO HAWAII APPLICANTS: For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment or both.

NOTICE TO KENTUCKY APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

NOTICE TO LOUISIANA APPLICANTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

NOTICE TO MAINE APPLICANTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for purposes of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

NOTICE TO MARYLAND APPLICANTS: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud.

NOTICE TO MINNESOTA APPLICANTS: A person who submits an application or files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

NOTICE TO NEW JERSEY APPLICANTS: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

NOTICE TO NEW MEXICO APPLICANTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

NOTICE TO NEW YORK APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime, and shall be also subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

NOTICE TO OHIO APPLICANTS: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

NOTICE TO OKLAHOMA APPLICANTS: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

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NOTICE TO OREGON APPLICANTS: Any person who makes an intentional misstatement that is material to the risk may be found guilty of insurance fraud by a court of law.

NOTICE TO PENNSYLVANIA APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

NOTICE TO TENNESSEE APPLICANTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

NOTICE TO TEXAS APPLICANTS: Any person who makes an intentional misstatement that is material to the risk may be found guilty of insurance fraud by a court of law.

NOTICE TO VIRGINIA APPLICANTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

NOTICE TO ALL OTHER STATE APPLICANTS: Any person who knowingly includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Important Reminder

The coverage for which you are applying is written on a CLAIMS-MADE basis. Only claims first made against you and reported to the Company during the policy period are covered, subject to the policy provisions. The limits of liability stated in the policy are reduced by defense expenses. Defense expenses may also be applied to the deductible, if any. If you have any questions about the coverage, please discuss them with your agent.

Representation and Acknowledgement of Firm's Continuing Duty to Inform

The undersigned is authorized by the firm to sign this application and represents and acknowledges that all information provided by the firm including the application, submits, its supplements, attachments, and answers to any questions our underwriter asks:

- will be relied upon the Company in determining whether to insure the firm and at what rate to insure it;
- are true, correct, accurate, and complete;
- and will be considered a part of any ensuing insurance contract.

Furthermore, the undersigned understands and agrees that the firm has a continuing duty through policy inception and throughout the life of any ensuing insurance contract to update this application, its supplements, attachments, and answers to any questions our underwriter asks.

THE APPLICANT REPRESENTS THAT THE ABOVE STATEMENTS AND FACTS ARE TRUE AND THAT NO MATERIAL FACTS HAVE BEEN SUPPRESSED OR MISSTATED.

COMPLETION OF THIS FORM DOES NOT BIND COVERAGE. APPLICANT'S ACCEPTANCE OF THE COMPANY'S QUOTATION IS REQUIRED PRIOR TO BINDING COVERAGE AND POLICY ISSUANCE.

ALL WRITTEN STATEMENTS AND MATERIALS FURNISHED TO THE COMPANY IN CONJUNCTION WITH THIS APPLICATION ARE HEREBY INCORPORATED BY REFERENCE INTO THIS APPLICATION AND MADE A PART HEREOF.

Applicant:	_Title:
Applicant Signature:	_Date:
Agent/Broker Name:	