



# CLAIM INFORMATION SUPPLEMENT

**Applicant's Instructions:**

1. This information is to be completed by Applicant who has been involved in any claim or suit or who is aware of an incident which may give rise to a claim. **COMPLETE ONE FOR EACH CLAIM OR INCIDENT.**
2. If space is insufficient to answer any questions fully, use reverse side of this page or attach a separate sheet.
3. Answer all questions **COMPLETELY.**

**(Please Type or Print)**

1. Full name of Applicant: \_\_\_\_\_
2. Full name of individual(s) of firm involved in the claim: \_\_\_\_\_
3. Full name of Claimant: \_\_\_\_\_
4. Indicate whether (*Circle One*): **Potential Claim/Incident**      **Claim**      **In Suit**
5. Date of alleged error: \_\_\_\_\_
6. Date of Claim: \_\_\_\_\_
7. Additional defendants: \_\_\_\_\_
8. **IF CLOSED:** Indicate whether (*Circle One*):
 

	<b>Out-of-Court Settlement</b>	<b>Court Judgment</b>
Total Loss Paid including Deductible: \$	\$ _____	Defense Cost Paid: \$ _____
9. **IF PENDING:**

Claimant's Settlement Demand:	\$ _____
Defendant's Offer for Settlement:	\$ _____
Insurer's Loss Reserve:	\$ _____
Deductible:	\$ _____

**Yes**    **No** Is Claim in Suit? If yes, amount asked in summons: \$ \_\_\_\_\_
10. Name of Insurer: \_\_\_\_\_
11. Description of Claim: (Provide enough information to allow evaluation and use reverse side if additional space is required.)
  - a. Alleged act, error or omission upon which Claimant bases claim: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  - b. Description of case and events, including area of practice out of which the claim arose: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  - c. Description of the type and extent of injury or damage allegedly sustained: \_\_\_\_\_  
 \_\_\_\_\_

*I understand information submitted herein becomes a part of my Professional Liability Application and is subject to the same warranty and conditions.*

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

Reviewed by (for TLIE Internal Purposes): \_\_\_\_\_  
 SUPP-IP2-06/10

**(Space for Additional Explanation on Back if Needed)**

