

**JAMISONPRO APPLICATION
LAWYERS PROFESSIONAL LIABILITY INSURANCE**

PERSONAL INJURY PLAINTIFF SUPPLEMENT

INSTRUCTIONS:

- A. Complete this form, if Applicant's Area of Practice in **Question #11** on Page 3 of the **JamisonPro Application** includes Personal Injury Plaintiff Litigation.
- B. Answer all questions as fully as possible.

This Supplement will form a part of the basic application submitted for the firm named below.

NAME OF APPLICANT: _____

1) Indicate the types of cases handled, including but not limited to admiralty, aviation, asbestos, bodily injury, breast implant, commercial, discrimination, general liability, medical malpractice, personal injury (i.e. false arrest, detention or imprisonment, wrongful entry or eviction or other invasion of private occupancy, malicious prosecution, libel, slander or breach of privacy), products, toxic tort, sexual harassment, tobacco, unfair competition, and wrongful death:

2) Indicate the percentage of time devoted by the Applicant to representation of plaintiffs in the following Areas of Practice. The "Time Devoted" to all Areas must total 100%:

<u>Area of Practice</u>	<u>Time Devoted</u>	<u>Average dollar-size of judgments / awards / settlements</u>
Bodily Injury / Personal Injury	_____ %	\$ _____
Products Liability	_____ %	\$ _____
Medical Malpractice	_____ %	\$ _____
Other (specify below):		
_____	_____ %	\$ _____
_____	_____ %	\$ _____
_____	_____ %	\$ _____
_____	_____ %	\$ _____
_____	_____ %	\$ _____

3) Indicate the percentages of Applicant's litigated cases that are

settled before trial:	_____ %
-	_____ %
tried to verdict:	_____ %
handled on a contingency fee basis:	_____ %

4) Indicate the average dollar-size judgment, award or settlement achieved by the Applicant in all litigated cases within the last five years: \$ _____

5) Indicate the largest dollar-size judgment, award or settlement achieved by the Applicant in a litigated case within the last five years: \$ _____

6) Does any member of the Applicant handle class-action / multiple plaintiff cases? Yes No

If "Yes", indicate the type and number of such cases that have been accepted within the past five years, by Area of Practice:

<u>Area of Practice</u>	<u>Number Accepted</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

7) Does any member of the Applicant accept new cases within six (6) months of the expiration of the applicable Statute of Limitations? Yes No

If "Yes", indicate the number of such cases that have been accepted within the past five years. _____