

Covers law firms and solo attorneys. Attorney-owned title agencies also complete CWCO-SUP-TITLE. Complete with ACORD 125.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME	DBA	FEIN	YEARS IN BUSINESS
BUSINESS ADDRESS	CITY / STATE / ZIP	WEBSITE	

Entity type:
☐ Sole practitioner ☐ LLC ☐ Professional corporation ☐ LLP ☐ Partnership

PRIMARY CONTACT / TITLE	PHONE	EMAIL
ATTORNEYS (COUNT)	STATES OF BAR ADMISSION	OFFICES (COUNT)

2 OPERATIONS

PRACTICE AREA	% OF REVENUE

Practice areas: real estate; estates and trusts; family; personal injury (plaintiff); corporate and securities; intellectual property; litigation (defense); criminal; immigration; bankruptcy; tax; other.

2-1 Does the firm handle real estate closings or hold closing funds in trust? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-2 Does the firm do securities, patent, or class-action work? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-3 Does any attorney serve as a director or officer of a client company? ☐ Yes ☐ No
 IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — DEADLINES, CONFLICTS & CLIENT FUNDS

Missed deadlines and conflicts drive legal malpractice claims, and trust accounts are targets for impersonators — in August 2025, buyers wired more than \$449,000 after an email impersonating their attorneys.

3-1 Is there a centralized docket and calendar system with deadlines entered by two people? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-2 Is a conflict check run and documented before every new matter? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-3 Is an engagement letter signed for every matter? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-4 Are non-engagement letters sent for every declined matter? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-5 Are trust accounts reconciled three-way monthly?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-6 Are all wire instructions confirmed by phone using a known number before sending or receiving funds?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-7 Are clients told in writing that the firm never changes wire instructions by email?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-8 Is the applicant currently, or has it previously been, insured on a claims-made professional liability policy?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-9 Has any professional liability carrier declined, cancelled, or non-renewed the applicant?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-10 Does every professional complete the continuing education their license requires?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-11 Are client files kept under a written retention policy?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-12 Has the firm had a malpractice claim, bar grievance, or trust-account loss in the last 5 years?	☐ Yes ☐ No
IF YES, EXPLAIN	

CURRENT PL / E&O CARRIER	RETROACTIVE DATE	LIMIT / DEDUCTIBLE

4 EXPOSURE & RISK QUESTIONS — SUPERVISION, CYBER & BUSINESS RELATIONSHIPS

4-1 Is multi-factor authentication required on email and document systems?	☐ Yes ☐ No
IF YES, EXPLAIN	
4-2 Are lateral hires' prior matters checked for conflicts before they join?	☐ Yes ☐ No
IF YES, EXPLAIN	
4-3 Are business transactions with clients disclosed and consented to in writing?	☐ Yes ☐ No
IF YES, EXPLAIN	
4-4 If yes to 2-3, is the attorney covered by the client company's D&O policy?	☐ Yes ☐ No
IF YES, EXPLAIN	
4-5 Is AI-generated research or drafting checked by an attorney before use?	☐ Yes ☐ No
IF YES, EXPLAIN	

5 REVENUE

ANNUAL GROSS REVENUE (\$)	CONTINGENCY FEE REVENUE (\$)	AVERAGE TRUST BALANCE (\$)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

CYBER / SOCIAL ENGINEERING LIMIT

CRIME / FIDELITY (Y / N)

EPLI (Y / N)

6-1 Has any carrier declined, cancelled, or non-renewed coverage in the last 5 years?

☐ Yes ☐ No

IF YES, EXPLAIN

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED (\$)	OPEN / CLOSED

6-2 Is the applicant aware of any incident, complaint, or circumstance not yet resulting in a claim that could reasonably give rise to one?

☐ Yes ☐ No

IF YES, EXPLAIN

7 RISK MANAGEMENT

7-1 Are closing letters sent when matters end?

☐ Yes ☐ No

IF YES, EXPLAIN

7-2 Does each attorney meet CLE requirements, including ethics and technology?

☐ Yes ☐ No

IF YES, EXPLAIN

8 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: 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 and subjects such person to criminal and civil penalties. (State-specific fraud warnings apply; see state amendatory notice.)

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)

TITLE

DATE

PRODUCER — CORY WASHINGTON & CO. LLC

PRODUCER SIGNATURE (TYPE FULL NAME)

DATE