

Application for Foreign Cover

1. Name (Mr/Mrs/Miss/Ms)

2. Practice Address

3. In respect of which system of law do you wish to apply for cover?

4. Are you authorised and qualified to practise in the above system?

5. Since when have you practised in the above system of law?

6. In which jurisdiction do you practise or intend to practise the above system of law?

7. Are you authorised to practise in the above system of law in all those jurisdictions?

8. In what capacity do you practise in those jurisdictions e.g. as a sole practitioner, in a partnership, or an employee?

9. Have any claims been made or intimated against you arising out of or in any way connected with your practice in the above system of law? If YES, please provide full details of any such claim(s) in box 17.

YES
NO

10. Are you aware of any circumstances which may give rise to a claim against you arising out of or in any way connected with your practice in the above system of law? If YES, please provide full details of any such circumstance(s) in box 17.

YES
NO

11. Have you ever applied for professional indemnity insurance for your practice in the above system of law and had your application for cover refused or accepted subject to conditions? If YES, please provide full details of any such refusal(s) in box 17.

YES
NO

