	RICHMOND NATIONAL	Richmond National Insurance 3951 Westerre Parkway, Ste 200 Richmond, VA 23233
	LAWYERS PROFESSIONAL LIA	
Ι.	INSTRUCTIONS	
2.	Complete in addition to the Richmond National Lawyers Profession All questions in applicable section must be fully answered. If more separate sheet and indicate the question number. Complete all sections where area of practice make up 25% or more does not apply, check the N/A box.	space is needed continue on a
II.	GENERAL INFORMATION	
	ant Name: Number: BANKRUPTCY	
СС	OMPLETE IF THE FIRM REPORTS 25% OR MORE OF GROSS BILLINGS.	N/A
1.	Indicate the number of bankruptcy cases that fall into the following a. For Debtor: b. For Creditor: c. As Trustee:	g categories:
2.	Indicate percentage of bankruptcy cases which are: a. Personal Bankruptcies:% b. Commercial Bankruptcies:% c. Other (specify) :%	
3. 4. 5.	Average years' experience handling bankruptcy: Has the firm conducted training with respect to the 2005 Bankrupt Has the firm adopted a due diligence process for certifying truthful accuracy bankruptcy schedule? If yes, please describe procedure:	Iness and Yes No
6.	 Has the firm adopted a uniform disclosure statement explaining the debtor in bankruptcy? If yes: a. Is this disseminated to all clients? b. Is a copy of this statement maintained for at least two (2) y 	Yes No

7.	Has the firm included a conspicuor Is acting as a debt relief agency an	us statement in all advertising stati d containing all required disclosure	-	🗌 Yes 🗌 No
IV.	COLLECTIONS			
СС	OMPLETE SECTION IF THE FIRM REP	ORTS 25% OR MORE OF GROSS BIL	LINGS. 🗌 N	/Α
1.	Does the Applicant purchase debt	from clients?		🗌 Yes 🗌 No
2.	Please provide a breakdown of the	e firm's collection practice:		
	TYPE OF COLLECTION	% OF COLLECTIONS PRACTICE (TO TOTAL 100%)	AVERAGE AMOUN FIRM PER	
	Consumer:			
	Commercial:			
3.	During the past twelve (12) month How many non-attorneys have ha		ed collections wor	k?
4.	For all attorneys in the firm who h	andle collections, what is the avera	ge number of yea	rs' experience
5.	working in this area of law? Does any member of the firm have as a collection agency?	e an equity interest in an organizati	on operating	🗌 Yes 🗌 No
	If yes, provide details:			
6.	Does the firm have written proced	lures that all attorneys and staff are	e required to	🗌 Yes 🗌 No
	follow to ensure compliance with Act?	the State and Federal Fair Debt Col	lection Practices	
	If no, please explain:			
7.		pt which has been reviewed for cor actices Act and applicable state lav		Yes No
	debts via phone?			
	If no, please explain:			
8.	all federal and state statutes?	rrespondence been reviewed for co	ompliance with	U Yes U No
	Does the firm call debtor's cellular	•		🔄 Yes 🔄 No
10). Does the firm document that the o cellular telephone in compliance v	debtor has granted written permiss vith the Telephone Consumer Prote		🔄 Yes 🔄 No
11	. Please explain how the firm stays practice:	current on state and federal statute		llection
V.	INTELLECTUAL PROPERTY			
	COMPLETE SECTION IF THE FIRM	REPORTS 25% OR MORE OF GROSS	S BILLINGS. 🗌 N	/Α
		professionals who are representing	client interests be	efore the Patent
	and Trademark office:			
	a. Attorneys:			
	b. Patent Agents:			
RNEO	APP LPL 003 0123			2

- 2. For all patent attorneys and patent agents in Applicant Firm, what is the average number of years experience practicing intellectual property law?: _
- 3. For any professional with less than five (5) years of experience, do they work under a senior partner who is responsible for the quality of their work?

Yes No

4. Please provide the a breakdown by billable hours of the types of services rendered in the past year from the following categories:

Intellectual Property Litigation	
Foreign Patent Prosecution	
Domestic Patent Prosecution	
Trademark Copyright Registration & Licensing	
Patent Infringement Counseling	
Domestic Patent Searches & Filings	
Foreign Patent Searches & Filings	
Other (specify):	

5. Indicate the percentage of firm billings derived from the following industries:

Chemical	
Pharmaceutical	
Industrial Mfg.	
Computer/Software	
Biotechnology	
Aviation	
Other (specify):	

6. Please indicate the percentage of clients in the past year which fall into the following categories:

Companies with sales exceeding \$50 million	
Companies with sales between \$25 million and \$50	
million	
Companies with sales up to \$25 million	
Partnerships and/or closely held companies	
Individual Inventors	
Other (specify):	

7. What calendaring or docketing system is employed by the firm to record, monitor, and comply with the filing deadlines and other time limitations in connection with securing patents?

8.	Does your firm expressly prohibit the acceptance of equity or other financial interest in client's product or invention in exchange for legal services?	Yes No
	If no, please explain the procedure or criteria for allowing the above:	
9.	Does your firm use engagement letters, fee agreements and termination letters on all intellectual property clients?	Yes No
	If no, please explain:	
10.	When undertaking a patent search, is it the policy and practice of the firm to set forth in an engagement letter the nature, scope and limitation of the proposed patent search?	🗌 Yes 🗌 No
ΑΡΡ	LPL 003 0123	3

-		he firm eng	gage the service	es of third parti	es to carry ou	t patent searches?	Yes No
	If yes:	plaaca civ	a dataila an ha	w much.			
				w much:			
	D.	Describe s			atë search.		
	C.	What limit	ts of Error and	Omissions is re	quired of thes	e other companies?	
1			onsibility of pay he engagemen		– enance fees, t	axes or annuities	🗌 Yes 🗌 No
	•	please expl					
2				thorization is n	ecessary, are	notices of required	🗌 Yes 🗌 No
	payme	ents sent we	ell in advance c	of the due date	?		
	-			_			
1	14. Must a ?letter	•	nd at least one	other attorney	review and sig	gn off on each opinion	Yes No
1	15. Do lett	ers of audi	tors have to be	approved by a	t least two pa	rtners or officers	🗌 Yes 🗌 No
		Applicant?	a actimata of th	o longth of clic	nt offiliation f	or the firm's intellectu	al proporty
_			ollowing catego	-		or the firm's intellectu	al property
			rs and longer:				
		-	ree Years:	%			
			s to One Year:				
			Six Months:	%			
1	MASS TOR	T/CLASS A					
1	MASS TOR	T/CLASS A	CHON				
		-		RTS ANY PERCE	ENTAGE OF TH	IEIR GROSS BILLINGS.	□ N/A
CON 1. ⊦	/IPLETE SE How many	CTION IF T	HE FIRM REPO or class action	cases does you	r practice curi	rently have open?	_
CON 1. 2.	APLETE SE How many How many	CTION IF T mass tort mass tort	HE FIRM REPO or class action or class action	cases does you cases has your	r practice curi practice close	rently have open? d during the past five (
CON 1. H 2. H 3. \	APLETE SE How many How many What type	CTION IF T mass tort mass tort s of mass t	HE FIRM REPO or class action or class action ort or class act	cases does you cases has your ion cases do yo	r practice curi practice close u handle (det	rently have open? d during the past five (ails regarding issues, ty	
CON 1. H 2. H 3. \	APLETE SE How many How many What type	CTION IF T mass tort mass tort s of mass t	HE FIRM REPO or class action or class action ort or class act	cases does you cases has your	r practice curi practice close u handle (det	rently have open? d during the past five (ails regarding issues, ty	
CON 1. H 2. H 3. \ 6	APLETE SE How many How many What type etc.)?:	CTION IF T mass tort mass tort s of mass t	HE FIRM REPO or class action or class action ort or class act	cases does you cases has your ion cases do yo	r practice curi practice close u handle (det	rently have open? d during the past five (ails regarding issues, ty	
CON 1. H 2. H 3. \ 6	APLETE SE How many How many What type etc.)?:	CTION IF T mass tort mass tort s of mass t	HE FIRM REPO or class action or class action ort or class act	cases does you cases has your ion cases do yo	r practice curi practice close u handle (det	rently have open? d during the past five (ails regarding issues, ty	
CON 1. H 2. H 3. \ 6	APLETE SE How many How many What type etc.)?:	CTION IF T mass tort mass tort s of mass t orneys in th	HE FIRM REPO or class action or class action ort or class act	cases does you cases has your ion cases do yo	r practice curr practice close u handle (det or class action	rently have open? d during the past five (ails regarding issues, ty	
CON 1. H 2. H 3. \ 6	APLETE SE How many How many What type etc.)?: List all atto	CTION IF T mass tort mass tort s of mass t orneys in th	HE FIRM REPO or class action or class action ort or class act	cases does you cases has your ion cases do yo	r practice curr practice close u handle (det or class action # OF YEARS	rently have open? d during the past five (ails regarding issues, ty	
CON 1. + 2. + 3. \ e	APLETE SE How many How many What type etc.)?: List all atto	CTION IF T mass tort mass tort s of mass t orneys in th	HE FIRM REPO or class action or class action ort or class act	cases does you cases has your ion cases do yo	r practice curr practice close u handle (det or class action # OF YEARS	rently have open? d during the past five (ails regarding issues, ty	
CON 1. H 2. H 3. \ 6 -	APLETE SE How many How many What type etc.)?: List all atto	CTION IF T mass tort mass tort s of mass t orneys in th	HE FIRM REPO or class action or class action ort or class act	cases does you cases has your ion cases do yo	r practice curr practice close u handle (det or class action # OF YEARS	rently have open? d during the past five (ails regarding issues, ty	
CON 1. 2. 3. \ 4. - - - - - - - - - - - - -	APLETE SE How many How many What type etc.)?: List all atto	CTION IF T mass tort mass tort s of mass t orneys in th	HE FIRM REPO or class action or class action ort or class action ne firm who har	cases does you cases has your ion cases do yo ndle mass tort o	r practice curr practice close u handle (det or class action # OF YEARS EXPERIENCE	rently have open? d during the past five (ails regarding issues, ty cases:	
CON 1. H 2. H 3. V 4. L 4. L 5. M	APLETE SE How many How many What type etc.)?: List all atto ATTORNEY	CTION IF T mass tort mass tort s of mass t orneys in th NAME	HE FIRM REPO or class action or class action ort or class act ne firm who har s and other sup	cases does you cases has your ion cases do yo ndle mass tort o	r practice curr practice close u handle (det or class action # OF YEARS EXPERIENCE	rently have open? d during the past five (ails regarding issues, ty cases:	5) years? pe of products,
CON 1. H 2. H 3. \ 4. L - - - - - - - - - - - - -	APLETE SE How many How many What type etc.)?: List all atto ATTORNEY Number o Number o	CTION IF T mass tort mass tort s of mass t orneys in th NAME	HE FIRM REPO or class action or class action ort or class action ne firm who har s and other sup professionals (cases does you cases has your ion cases do yo ndle mass tort o	r practice curr practice close u handle (det or class action # OF YEARS EXPERIENCE	rently have open? d during the past five (ails regarding issues, ty cases:	5) years? pe of products,

7. For all mass tort or class action cases handled within the past three (3) years, please provide the following information (use extra pages if needed):

	DATE REPRESENTATION BEGAN (MO/DAY/YR)	ALLEGATION MADE	CAPACITY SERVED*	DEFENDANT NAME	TOTAL # OF MEMBERS	DOLLAR VALUE/ POTENTIAL DAMAGES OF CLASS	CURRENT STATUS
	*For Capacity: LC – Leo (please explain)	ad Counsel; CLC – C	o-Lead Counsel;	LO – Local Counse	el Only; R – Refei	rral Attorney only	r; 0 – Other
8.	If cases are referre	d to other firms	, are these ot	her firms in oth	her jurisdictio	ns?	YesNo
	lf yes, a. Where?:						
		ain a fee for sucl	referrals?			г	Yes 🗌 No
9	Of the number of r			les what are th	he number of	cases L	
5.	In which the firm in				ie number of	eases	
10.	If outside counsel i				nonitor or cor	ntrol	
	such cases:						
11.	Does the firm assu	re that any firm	they co-coun	isel, refer or ac	cept as referr	als carries	🗌 Yes 🗌 No
	Lawyer's Professio						
12.	Do you continue to	work on the ca	se after refer	ral?			🗌 Yes 🗌 No
13.	If you are not the s	ole attorney, do	o you send yo	ur clients a lett	er outlining tl	ne	🗌 Yes 🗌 No
	specific scope of yo	our representati	on? (i.e. advi	sing them whic	h tasks you ar	e or NOT	
	performing, etc.,?						
14.	Provide a detailed	description of a	dvertising and	d submit sampl	es:		
4 5					: /		
15.	Has any claim or po		-		••		YesNo
	any lawyer employ class action case th		•	-			
	explanation.	iat you have hai	iuleu at tills t	inte: ii yes, at	lacii a fuil fiai	Tative	
16	Do you have any k	nowledge of any	<i>i</i> circumstanc	es or event tha	at could give r	ise to a	Yes 🗌 No
10.	potential claim aris				-		
	(past or present), a					•	
	full narrative expla				,	.,	
17.	Attach details of t		history for th	ne past ten (10) years.		
			•				
VII.	PLAINTIFF LITIGAT	ON					
	COMPLETE SECTIO	N IF THE FIRM	REPORTS 25%	GOR MORE OF	GROSS BILLIN	NGS. 🗌 N/A	
	1. Please provide	the a breakdow	n by billable l	hours of the ty	pes of cases h	andled the pa	st year from
		ategories (To Tc	tal 100%):	1		1	
	Auto Related			Medical Malp	oractice		
RNEO /	APP LPL 003 0123						5

Admiralty	Pharmaceutical	
Aviation	Products-related	
Asbestos	Toxic Tort	
Bodily Injury (non-medical malpractice)	Tobacco	
Class Action/Mass Tort	Sexual Harassment	
Discrimination	Workers Compensation	
General Liability	Wrongful Death	
	Other (Specify):	

1.	For all attorneys in the firm who perform in plaintiff's practice e, what is the
	average number of years of experience working in this area of law?

- 2. What is the firm's average litigation case load per year?
- 3. Average number of cases each attorney handles per year:
- 4. What percentage of the firm's litigation cases are settled before trial?
- 5. What percentage of the firm's litigation cases are tried to a verdict?
- 6. What percentage of the cases are handled on a contingency fee basis?
- 7. What is the estimated average dollar size of judgments, awards and settlements in the litigation cases handled by the firm?
- 8. What is the largest judgment, awarded or settlement in a litigation case achieved by the firm in the past three (3) years?
- 9. What percentage of cases is referred by other law firms?
- 10. Does the Applicant use written referral agreements in all cases?
- 11. Does Applicant use written referral agreements in all cases that are referred by you to other law firms?
- 12. Percentage of cases declined or rejected that are not referred to other firms:
- 13. Does the Applicant accept referral cases within six (6) months of the statute of limitations?
- 14. Does the Applicant use written disengagement or non-engagement letters that Includes a warning about potential statute of limitations for all matters not accepted or referred?

VIII. REAL ESTATE LAW & TITLE PRACTICE

COMPLETE SECTION IF THE FIRM REPORTS 25% OR MORE OF GROSS BILLINGS.

REAL ESTATE PRACTICE:

1. Please complete the chart below, totaling 100% of the firms' Real Estate related practice:

	PRECENTAGE	NUMBER OF CASES OR
TYPE OF REPRESENTATION	OF PRACTICE	TRANSACTIONS PER YEAR
Residential Closings		
Commercial Closings		
Land Use/ Development		
Landlord/ Tenant		
Foreclosure – Lender Representation		
Foreclosure – Homeowner Representation		
Financing/ Loan Workouts		
Title Search/ Opinions		
Syndication/ Partnerships		

%

%

%

No

No

No

Yes

Yes

Yes

Yes No

	1031 Exchanges
	Construction Work and Mechanic Leins
	Condominiums, Cooperatives and Town House
	Speculative Real Estate
	Real Estate Investment
	Other (specify):
2.	In the past three (3) years, what is the average annual number of commercial and residential real
	estate purchase or sale transactions handled by the Applicant Firm?
	Residential \$ Commercial \$
3.	In the past three (3) years, what is the maximum dollar value of any commercial and residential real
•	estate purchase or sale transaction handled by the Applicant firm?
	Residential \$ Commercial \$
4	
4.	Does twenty five (25%) or more of the firm's real estate revenue result from any one Yes No
	client?
	If yes, what percent? What services are provided?
5.	Does the firm provide an engagement letter, for each representation, that clearly
	defines the scope of representation?
6.	Does the firm act in a dual capacity in the same real estate transaction? Yes 🗌 Yes 🗌 No
	If yes, does the firm utilize a disclosure form signed by both parties?
7.	Does the firm solicit or seek investors in real estate mortgages or investment?
	During the last five (5) years has the firm provided services to clients who form, Yes 🗌 Yes
01	manage or organize group investments/syndications for the purpose of investing
	in real property?
0	
9.	Does the Applicant have a written policy which requires:
	a. Attendance at all client closings?
	b. Title insurance for all closing property transfers?
	c. Thorough review of title policy exceptions with client?
TITLE	PRACTICE:
10	. Indicate the total number of title opinions issued over the past three (3) years:
	Residential Commercial
11	Please indicate the total number of title searches completed over the past three (3) years by:
	a. Attorneys in the firm
	b. Attorneys not in the firm
	c. Non-attorneys but employees of the firm
	d. Non-attorney sub-contractors
	If a make and indicate alia (d.) aliante alace the firm alatein contificates of income a frame all
	If numbers are indicated in (d.) above, does the firm obtain certificates of insurance from all
	subcontracted sources of title searches? Yes No
	. How many Real Estate Title Insurance policies has the firm issued in the last 12 months?
13	. What title insurance companies doe the firm act as an agent for?
	TITLE CARRIER % OF PREMIUM VOLUME YEARS REPRESENTED
	%
	%
	%

	 14. Does the firm use engagement letters when conducting title opinions or title searches? Yes No 15. Does an attorney supervise all aspects of document preparation and attend all real Yes No estate closings? If no, please explain on separate sheet of paper. 					
IX.	WILLS/ ESTATE / TRUS	ST				
СС	OMPLETE SECTION IF T	HE FIRM REPORTS 25% OR MO	DRE OF GROSS BII	LINGS. 🗌 N/	A	
	Please complete the following estimating the percentage of your estates and trusts work that would fall within each category according to size: Total Assets Est. % of Estate & Trust Work < \$5,000,000					
۷.	•	es in the previous twelve (12) r	-			
	ATTORNEY	NAME OF ESTATE/TRUST	ASSET VALUE	% OF FIRM'S BILLING	iS	
			\$	%	_	
			\$ \$	%		
			\$	%	-	
3.	What services are provided for your client(s)? Check all that apply Preparation of Wills Estate Planning Probate Trust Administration Corporate Formation Tax Opinions Taxation 419(e) Plan Options Asset Protection Guardianship Medicaid Planning Litigation Other: Other: Other: Other:					
4.	investments, or have discretionary control of funds for clients?					
5.	If yes, please describe: Does your firm engage the services of other professional to render investment advice Yes No and/or jointly market with firms offering investment advice? If yes, explain the measures the firm takes to insulate itself from liability based on service rendered by that professional?					
6.						
8.	If the Applicant is not a solo practitioner, is the firm's policy to include a cold review by Yes No a second attorney when drafting all new wills and trusts? Yes No Are dual signatures required on all trust documents? Yes No Does any attorney of the firm currently serve as Executor/Personal Representative/ Yes No Administrator of an estate or Trustee of a trust (not including your own families)? Yes No					
RNEO	APP LPL 003 0123	e the following chart:			8	

ATTORNEY PROVIDED	NAME OF ESTATE/TRUST	ASSET VALUE	DESCRIPTION OF SERVICES

Х. FRAUD WARNINGS

General Fraud Warning: 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.

Applicable Notice to Applicants in:

Alabama	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly
	presents false information in an application for insurance is guilty of a crime and may be subject to restitution, fines
	or confinement in prison, or any combination thereof.
Alaska	Any person who knowingly and with intent to injure, defraud, or deceive an insurance company files a claim
	containing false, incomplete, or misleading information may be prosecuted under state law.
Arizona	For your protection Arizona law requires the following statement to appear on this form: Any person who
	knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.
Arkansas	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.
California	For your protection California law requires the following to appear on this form: Any person who knowingly
	presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment
	of a loss is guilty of a crime and may be subject to fines and confinement in state prison.
Colorado	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 policyholder or claimant for the purpose of
	defrauding or attempting to defraud the policyholder 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.
Delaware	Any person who knowingly, and with intent to injure, defraud or deceive any insurer, files a statement of claim
	containing any false, incomplete or misleading information is guilty of a felony.
District of	WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the
Columbia:	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.
Florida	Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or ar
	application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.
Idaho	Any person who knowingly, and with intent to defraud or deceive any insurance company, files a statement
	containing any false, incomplete, or misleading information is guilty of a felony.
ndiana	A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false,
	incomplete, or misleading information commits a felony.
Kentucky	Any person who knowingly and with intent to defraud any insurance company or other person files a 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.
Louisiana	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.
Maine	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the
	purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.
Maryland	Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who
-	knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be
	subject to fines and confinement in prison.

Minnesota	A person who files a claim with intent to defraud, or helps commit a fraud against an insurer, is guilty of a crime.		
New	Any person who, with a purpose to injure, defraud or deceive any insurance company, files a statement of claim		
Hampshire	containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.		
New Jersey	 Claim: Any person who knowingly files a statement of claim containing any false or misleading information is sult to criminal and civil penalties. Application: Any person who includes any false or misleading information on an application for an insurance polis subject to criminal and civil penalties. 		
New Mexico	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.		
New York	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 also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.		
Ohio	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.		
Oklahoma	Warning: any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim f the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felor		
Oregon	Any person who knowingly and with intent to defraud or solicit another to defraud an insurer: (1) by submitting an application, or (2) by filing a claim containing a false statement as to any material fact thereto, may be committing a fraudulent insurance act, which may be a crime and may subject the person to criminal and civil penalties.		
Pennsylvania	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.		
Rhode Island	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.		
Tennessee	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.		
Texas	Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.		
Virginia	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.		
Washington	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.		
West Virginia	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.		

THIS AREA OF PRACTICE SUPPLEMENT IS ATTACHED TO AND FORMS A PART OF THE RICHMOND NATIONAL LAWYERS PROFESSIONAL LIABILITY APPLICATION. IT IS SUBJECT TO THE SAME PROVISIONS CONCERNING REPRESENTATIONS MADE AS IN THE BASIC APPLICATION.

Name of Applicant:	
Signature of person authorized	Date:
to execute on behalf of the	
Applicant:	
Print name and title of person	
authorized on behalf of the	
Applicant:	
Agent/Broker Name:	

RNEO APP LPL 003 0123