

Westport Insurance Corporation

ANCILLARY SERVICES SUPPLEMENT

Applicant Instructions:

- Answer all questions in ink. If answer is none, state "none."
- If space is insufficient to answer all questions fully, use separate sheets of paper.

1. In addition to legal services, what professional services does the firm provide?

- | | |
|--|---|
| <input type="checkbox"/> Actuarial | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Tax Consulting | <input type="checkbox"/> Financial Planning |
| <input type="checkbox"/> Lobbying | <input type="checkbox"/> Investment Consultant/Brokers |
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Mergers & Acquisition Consulting /Incubation |
| <input type="checkbox"/> Case / Forensic Investigation | <input type="checkbox"/> Agency/Professional Representation |
| <input type="checkbox"/> Expert Witness | <input type="checkbox"/> Patent/Trademark Agents |
| <input type="checkbox"/> Human Resources Consulting | <input type="checkbox"/> Environmental Consulting |
| <input type="checkbox"/> General Consulting | <input type="checkbox"/> Other (Please identify): _____ |

2. Please describe in detail the nature and types of professional services in which the Applicant is engaged. _____

3. Please indicate if any of the following services are provided to clients by the law firm or a related entity (**check all that apply**):

- Advice given to be used in disclosure documents or prospectuses to investors
- Handling of monies and investment instruments belonging to others
- Management of ERISA, pension or Employee Benefit Plans
- Advice given regarding investments in commonly traded securities
- Advice given regarding investments in specialty areas (e.g. commodity futures, real estate, options, private placements, unregistered securities, direct placements, oil and gas joint ventures, foreign securities or limited partnerships)
- Advice given regarding client's medical, mental or emotional condition
- Environmental hazard or clean-up advice
- Valuation of property
- None of these are applicable

4. If service is provided by attorneys, does the applicant use engagement letters to clearly delineate between legal services and other professional services provided by the attorney? N/A Yes No

5. If service is provided by non-attorneys, is the work done under the direction and supervision of a senior attorney in the firm? N/A Yes No

6. Is the service provided by a separate legal entity? If so, please complete Appendix A for each legal entity. Yes No

7. Please provide the following for each person providing this ancillary services:

Names of Principals/Employees	Professional Qualifications / Designations	No. of Years in Practice

8. Has any claim been brought against the Applicant or any of its partners, directors, officers, trustees or employees relating to the provision of professional services other than legal services? Yes No
If yes, please complete a Claim Supplement for each claim.

9. Has the Applicant or any partner, director, officer, trustee or employee been subject to disciplinary action as a result of these professional services? Yes No
If yes, please explain. _____

10. Is the Applicant aware of any instances arising out of the performance of professional services (other than legal) that could give rise to a claim? Yes No
If yes, please complete a Claim Supplement for each claim.

I understand information submitted herein becomes a part of the application and is subject to the same conditions as stated on the Application.

THIS SUPPLEMENT MUST BE SIGNED BY AN OWNER, PARTNER OR PRINCIPAL OF THE FIRM.

Signed: _____
 Partner, Officer and/or Owner Title

Date: _____

The Applicant understands and agrees that she or he is obligated to report any changes in the information provided in this application that occur after the date of the application and before policy inception.

Appendix A

1. Name of Entity:

2. Type of Entity: Partnership
 Privately Held Corporation
 Publicly Traded Corporation
 Other, **please specify:** _____
3. Date Formed: ____/____/_____
4. Managed By Firm or Any Employee of Firm: Yes No
5. Separate E&O Coverage: Yes No
6. Ownership of the Firm:
 Entity is wholly owned by the firm
 Entity is wholly owned by attorneys in the firm
 Entity is wholly owned by both the firm and attorneys in the firm
 Majority interest is held by the firm
 Majority interest is held by attorneys in the firm
 Majority interest is held by both the firm and attorneys in the firm
 The firm and/or its attorneys hold minority interest
 Other, **please specify:** _____
7. Gross Annual Revenue (Most Recent 12 months) \$ _____
Estimated Gross Annual Revenue (Next 12 months) \$ _____
8. How are services provided? **(check all that apply):**
 Services are performed by employees of the entity who are not also employees of the law firm
 Correspondence written on separate letterhead
 Utilize fee agreements that are separate from legal service fee agreements
 Utilize written contracts or engagement letters which define the scope of services to be rendered
 Conduct business out of a separate office other than where the law firm is located
 Subject to a written policy regarding conflicts of interest between the entity and the firm
 Subject to annual audit or review by the firm
 None of the above are applicable
9. Are common clients of these separate entity(ies) given written notice of the firm's interest? Yes No