



FREEDOM SPECIALTY™

# Lawyers Professional Liability Insurance

# Oil and Gas Supplement

NAME OF APPLICANT: \_\_\_\_\_

1. Provide the following information in respect to work undertaken in the field of oil and gas in the last five years.

Name of Attorney	Years Experience	% of Time Devoted Per Year
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Provide a list of **your** oil and gas clients (*please attach separate addendum for additional clients*):

Name of Client	Type of Business	Type of Clients	Gross Billable Dollars
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(e.g., private owner, corporation, multi-investor, etc.)

3. Does any member of the firm provide services in the areas of oil and gas in which they have any ownership interest?  Yes  No  
If "Yes", provide details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Are title searches performed in conjunction with oil and gas and related areas of practice?  Yes  No  
If "Yes", what percentage? \_\_\_\_\_

If "Yes", a Title Agents / Agency Supplement is required

5. Is the firm handling any environmental issues with any oil and gas clients?  Yes  No  
If "Yes", an Environmental Supplement is required

I declare that the information submitted herein is true to the best of my knowledge and I understand that it becomes a part of my Professional Liability Application.

\_\_\_\_\_  
Signature of Applicant Title Date  
(Must be signed by a Managing Partner or Officer of the Firm)