

Real Estate Development Supplement

Please type or print clearly in ink. If space is insufficient to answer any question fully, attach a separate sheet. Answer all questions completely.

Firm Name: _____ Policy Number: _____

1. **Firm's Real Estate Lawyers** – Please provide the following:
 - a. What is the average collective number of years of Real Estate specific legal experience for those real estate lawyers who currently are associated with your firm? _____
 - b. Relative to those lawyers contemplated in the above question, what approximate percentage of their collective total annual billable hours, on average, are spent on real estate related matters?..... _____
 - c. How many real estate lawyers have left your firm within the past twelve (12) months?..... _____
2. **Firm's Commercial Real Estate Clients** - Relative to your current commercial real estate clients, please indicate the approximate total number of clients would fit into each of the following categories?

Client Type	Number of Years Client has been in Operation	Length In Years of Firm's Relationship with Client
_____ Real Estate Developers	_____ Less than 1	_____ Less than 1
_____ Real Estate General Partnerships	_____ 1 to 5	_____ 1 to 5
_____ Real Estate Limited Partnerships	_____ 5 or more	_____ 5 or more
_____ Real Estate Joint Ventures		

3. On how many of the following have you provided any kind of legal service or advice to anyone at any time during the past two years? (Please indicate a number next to each item. If your answer is "None" for a particular item, please enter a "0".)

- _____ Commercial Real Estate Purchase or Sales
- _____ Commercial Real Estate Loans or Financing
- _____ Commercial Real Estate Start-Up Development Projects

4. **Dual or Multiple Representations** - Check each box below if, at any time during the past two (2) years, you have represented or provided any kind of legal service to any of the dual or multiple parties shown below, relative to the same basic real estate matter or transaction. Please attach a detailed description relative to each box that is checked, including a description of any actions you took to address any potential conflict of interests Issues or exposure.

- | | |
|---|--|
| <input type="checkbox"/> Dual or multiple investors, owners, partners or joint ventures | <input type="checkbox"/> Developers and Lender |
| <input type="checkbox"/> General Partner and Limited Partner | <input type="checkbox"/> Lessor and Lessee |
| <input type="checkbox"/> Contractor and Developer | |

5. During the past two (2) years, have any of the following situations occurred? Please attach a detailed description relative to any "Yes" answer. Have you:

- a. Provided any legal service, or other service to any past or present client, or on any commercial land or property or development project, that has gone into, or become the subject of, any kind of litigation involving buyer, seller, or lender, or any foreclosure, sheriffs sale, receivership, trusteeship, liquidation, or any voluntary or involuntary bankruptcy proceeding? Yes No
- b. Performed any service or rendered any advice or any opinion relative to any financial, economic, appraisal or valuation analysis or opinion for a client or any other party? Yes No
- c. Accepted compensation for legal or other services on the basis of a commission or percentage of the dollar value or sale price of any transaction? Yes No

I/We declare that this information is complete, accurate, and true to the best of our knowledge. I/We understand that this information becomes a part of our professional liability application and is subject to the same representations.

X _____
Signature of Owner, Partner, or Principal Title Date