Renewal Area of Practice Supplement

National Union Fire Insurance Company of Pittsburgh, Pa.

1271 Ave of the Americas FL 37 New York, NY 10020-1304 (A capital stock company, herein called the Company)

N/A

<u>Civil Litigation Plaintiff:</u> If N/A, please check here and proceed to Real Estate:

- 1. For all attorneys in the firm who perform in plaintiff practice, what is the average number of years of experience working in this area of law?
- 2. Average number of cases these attorneys handle per year per attorney?
- 3. Indicate percentage of cases in the following categories

	a. Bodily Injury / Property Damage		%
	b. Class Action / Mass Tort*:		%
	c. Commercial / Contract Disputes:		%
	d. Employment:		%
	e. Legal Malpractice:		%
	f. Medical Malpractice:		%
	g. Malpractice Other (Please describe):		%
	h. Real Estate:		%
	i. Toxic Tort:		%
	j. Workers' Compensation:		%
	k. Other (Please describe):		%
	•	Total:	%
4.	In the past twelve (12) months, what is the average value of all plaintiff cases?	\$	
5.	In the past twelve (12) months, what is the maximum dollar value of any one plaintiff case?	\$	
6.	In the past twelve (12) months, what is the percentage of plaintiff cases referred by you to other law firms for handling?		%

*Class Action / Mass Tort: Please provide the following details on all Class Action matters in which the firm was involved in the past five (5) years: (If no Class Action matters were handled, please so indicate)

Date Representation Began	Subject Matter	Capacity Served (1)	On Behalf (2)	Was the Class Certified Y/N?	Total # of Class Members	Total Damages	Status
Note (1): LC - Lea Only	ad Counsel, CLC - Co-Lead (Counsel, LC	O - Local Cour	nsel Not	te (2): P - P	laintiffs, D - L	Defendants

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Real Estate: If N/A, please check here and proceed to Debtor & Creditor Collections

1. In the past twelve (12) months, what is the average annual number of commercial and residential real estate purchase or sale transactions?

Residential: Commercial:

2. In the past twelve (12) months, provide the values of any commercial and residential real estate purchase or sale transaction handled by the Applicant Firm:

Largest Dollar Value Transactions:		Average Do	llar Value of Transactions:
1. Residential \$	Commercial \$	Residential \$	Commercial \$
2. Residential \$	Commercial \$	Residential \$	Commercial \$
3. Residential \$	Commercial \$	Residential \$	Commercial \$
4. Residential \$	Commercial \$	Residential \$	Commercial \$
5. Residential \$	Commercial \$	Residential \$	Commercial \$

3. In the past twelve (12) months, of the total commercial real estate transactions handled by the Applicant Firm, what percentage involved syndications, master limited partnerships, REITs, or any other transaction involving more than five (5) passive investors?

%

- 4. In the past twelve (12) months, what is the average annual number of real estate transactions other than purchase or sale handled by the Applicant Firm in each category below?
 - a. Mortgages / Refinancing:
 - b. Foreclosures / Loan Workouts:
 - c. Title Searches / Document Preparation:
 - d. Landlord / Tenant Disputes:

- e. Litigation other than foreclosures:
- f. Zoning, Eminent Domain, Tax Assessment Appeals:
- g. Other (describe):
- 5. In the past twelve (12) months, with respect to title work handled by the Applicant Firm, please provide the average annual number of residential and commercial title searches performed in each category below:

	Party Performing Search	Residential Searches	Commercial Searche	es	
	a. Lawyer of Applicant Firm				
	b. Non-lawyer employee of Applicant Firm:				
	c. Lawyer not a member of Applicant Firm:				
	d. Non-lawyer subcontractor:				
6.	Does the Applicant Firm, or any lawyer for whom	n coverage is sought, wholly o	own a title agency?	Yes	No
	a. If "Yes", is coverage sought for such Title Age	ency as an additional insured	on policy?	Yes	No
	b. Are at least 75% of the clients of said Title Ag	gency also clients of the Appli	icant Firm?	Yes	No
7.	In the past twelve (12) months, has any lawyer fagent?	for whom coverage is sought	acted as a title insurance	Yes	No

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Dε	ebtor & Creditor Collections: If N/A, please check here and proceed to Corporate Formation/Alteration:		
1.	1. Has the Applicant Firm ever received an allegation or otherwise been put on notice that it has violated any provisions of the Fair Debt Collections Practices Act ("FDCPA"), or any similar state or local "fair debt collection" laws?		
2.	What is the total number of non-lawyer staff involved in debt collection matters on behalf of creditor client	ts?	
<u>Cc</u>	orporate Formation/Alteration: If N/A, please check here and proceed to Intellectual Property:		
	Are any lawyers affiliated with the Applicant Firm employed as General Counsel or Regulatory Counsel		
	by any client for whom the Applicant Firm has provided Corporate Formation / Alternation legal services?	Yes	No
2.	Are any lawyers affiliated with the Applicant Firm providing Securities or Mergers & Acquisitions advice?	Yes	No
	If "Yes" to the above, that Securities or M&A advice is being given, please complete the Securities and/or M&A Supplements		
<u>Inf</u>	tellectual Property: If N/A, please check here and proceed to Entertainment:		
1.	Are any lawyers handling intellectual property matters for the Applicant Firm a member of Patent Bar?	Yes	No
2.	In the past twelve (12) months or in the next twelve (12) months, has any lawyer working for the Applicant Firm handled or plan to handle any Patent cases?	Yes	No
<u>Er</u>	ntertainment: If N/A, please check here and proceed to Merger & Acquisitions:		
1.	Please indicate the percentage of the entertainment work derived from:		
	Film % TV % Music % Sports % Other %		
2.	Has there been any change to the Applicant Firm's high profile, entertainment, sports, performers, publishers/authors designers, fine arts, media or other public figure clients?	Yes	No
	If "Yes" to the above, please provide the details below.		
	Client Name Client Field Types of Dates of Legal Services Provided	Still a Cl	ient?
		,	
3.	Has the Applicant Firm or any lawyer for whom coverage is sought:		
	a. Served as a talent agent or manager and/or negotiate personal appearances or product endorsements for any of the Applicant's entertainment clients?	Yes	No
	b. Taken a percentage of a transaction or deal as compensation for legal services?		
	Taken a percentage of a maneachen of dear as compensation for legal convices.	Yes	No
	If N/A, please check here and proceed to Financial Institutions: In the past twelve (12) months, how many separate instances has the Applicant Firm provided legal services or advice for each of the following transactional categories:		
	In the past twelve (12) months, how many separate instances has the Applicant Firm provided legal services or advice for each of the following transactional categories:		
	In the past twelve (12) months, how many separate instances has the Applicant Firm provided legal		

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۷.	In the past twelve (12) months, plea Applicant Firm rendered any legal s Mergers		., -	equisitions	. willout till	
	(combined ass	ets)		chase price)		
	\$		\$			
	\$		\$			
	\$ _.		\$			
Fir	nancial Institutions: If N/A, plea	ase check here and co	ompleted the signature section	on below:		
	Within the past twelve (12) months, THAN loan documentation, bankrup	have any services be	een provided to financial insti	tutions OTHER	Yes	No
	Has the firm provided financial institution services, or approved loans for any	financial institution?			Yes	No
	Has any member of the firm acted as a Director or Officer, held more than 1% equity interest, or had a loan exceeding \$50,000 with a financial institution client of the firm?		Yes	No		
4.	Has any past or present financial in declared insolvent, or become contriguous government agency?	rolled or operated by t	the FDIC, OCC, OTS, or any		Yes	No
	If "Yes" to any of the above, please	provide details below		I	1	
	Financial Institution Name, City and State	Services Provided by the Firm	Director, Officer, General Counsel or Regulatory Counsel? Y/N	Total Attorney Equity Value in Client	Date Servi	
LA	PPLICANT UNDERSTANDS THE IN WYERS PROFESSIONAL LIABI PRESENTATIONS AND CONDITION	ILITY INSURANCE				
Si	gn and date in ink					
Sig	gnature:		Title:	Da	te:	
Pri	nt Name:		Name of Firm:			

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