

Welcome to the Ahern Insurance Brokerage eForms.

After completing this application please follow these simple instructions:

- 1) Click "Save Application," navigate to your desktop and save a copy of the completed application
- 2) Print & sign the application
- 3) To expedite the application process, email or fax a copy of the completed application to AIB

Fax: (858) 571-9010

Email: Info@AhernInsurance.com

- 4) Please mail the original to:

Ahern Insurance Brokerage
9655 Granite Ridge Drive
Suite 500
San Diego, CA 92123

For additional support you can email techsupport@aherninsurance.com or consult the help file at: <http://www.aherninsurance.com/applications/help.htm>

IMPORTANT!

Once you have filled out your application completely, you must **PRINT, SIGN AND MAIL THE ORIGINAL**

Small Firm Risk Management Questionnaire

To be used for firms with 1–10 attorneys

Please provide additional details in support of a response to any question on a separate attachment.

1. Are departing lawyers' files reviewed by a partner or officer of the Firm? Yes No
2. Have you sued any client for fees in the past five years? (if yes, please explain) Yes No
3. Does your firm utilize an electronic docket control system? Yes No
4. Does your firm have an electronic conflict avoidance system? Yes No
5. Does your firm use engagement letters on all matters? Yes No
6. Does the Firm outline and reduce to writing its billing policy and procedures when agreeing to represent a new client? Yes No
7. Does your firm use non-engagement letters on matters not undertaken? Yes No
8. Does the Firm have a formal system to respond to complaints? Yes No
9. Does the firm have a procedure for evaluating prospective client's financial strength, management expertise, reputation, and history of changing lawyers? Yes No
10. Is information as to all new clients made available on at least a weekly basis to all lawyers of the Firm? Yes No
11. Does the Firm use scope of service letters when taking on new matters for existing clients? Yes No
12. Does the Firm have formal, written procedures regarding the maintenance of custodial accounts and escrow funds? Yes No
13. Do you participate in an office sharing agreement with attorneys not listed on your letterhead? Yes No

If you are a solo practitioner:

Do you have a back up attorney in the event of leave of absence? Yes No N/A

Are you currently listed as a back up for another firm on their application? Yes No N/A

Signature of Owner, Partner or Officer of Firm Date
Name of Firm