

EPL - Exclusive Advantage Supplemental Claim Form

This form is to be completed if any question in Section V-A. of the EPL - Exclusive Advantage Application is answered "Yes". Please complete a separate form for each claim or incident and answer all questions fully. Prior to attaching to the application a principal, partner or officer of the applicant must sign and date this form and attach it to the signed application.

1. Name of Applicant: _____
 2. Name of individual(s) are implicated in the allegations:
[Defendant(s)]: _____ Title: _____
[Defendant(s)]: _____ Title: _____
[Defendant(s)]: _____ Title: _____
 3. Name of individual raising allegations (Plaintiff): _____
 4. Date of alleged Wrongful Employment Practice (WEP) or Third Party Wrongful Act (TPWA): _____
 5. Date Applicant became aware of alleged WEP or TPWA: _____
 6. How did Applicant become aware? a) ___ Verbal complaint from employees or Third Party b) ___ Written notice from employee (Third Party) or employee's (Third Party) attorney c) ___ Verbal/written notice from someone else other than involved employee or Third Party d) ___ Filing with state agency e) ___ Filing with EEOC f) ___ Receipt of lawsuit g) ___ Other (please detail) _____
 7. Name of Insurer Claim Reported to (if any): _____
 8. Has an attorney been involved? _____ If yes, name of attorney & law firm: _____

Does attorney specialize in Employment Practice Liability litigation? Yes No
 9. Present status of Claim/Incident: _____ Pending _____ Closed _____ In Suit
 10. If Closed, Date Closed: ___/___/___ Total Damages/Settlements Paid: \$ _____ Total Defense Expenses Paid: \$ _____
 11. If EEOC/State Agency filing:
 - a. Has right to sue letter been issued? . . . Yes No If yes, Date issued: ___/___/___
Date right to sue expires (or did expire): ___/___/___
 - b. Has determination of fault been decided? . . . Yes No
If yes, what was determination? _____
 12. If pending, is employee demanding a settlement amount? Yes No What is the amount? \$ _____
Has employer offered a settlement amount? Yes No What is the amount? \$ _____
Amount of legal expenses incurred to date: \$ _____
 13. Detailed description of employee's complaint and Applicant's response (attach separate sheet, if necessary).

 14. What steps have been taken to prevent similar claims? _____

- If complaint was Sexual Harassment, has the alleged perpetrator been disciplined or terminated? Please explain.

I understand information submitted herein becomes a part of my EPL - Exclusive Advantage Application and is subject to the same warranty and conditions.

Applicant's Authorized Signature (Partner/Officer/Owner) Title Date Signed