



STRICTLY CONFIDENTIAL

VICTORIAN SOLICITORS' PROFESSIONAL INDEMNITY INSURANCE

**NOTICE TO LEGAL PRACTITIONERS'
LIABILITY COMMITTEE**

LEGAL PRACTITIONERS
LIABILITY COMMITTEE
ABN 45 838 419 536

Level 31, 570 Bourke Street
Melbourne VIC 3000
DX 431 Melbourne
Ph: 9672 3800
Fax: 9670 5538
www.lplc.com.au

1. INSURED SOLICITOR(S): _____

2. ADDRESS (MAIN OFFICE): _____

3. EMAIL : _____

4. ABN No: _____
5. FIRM OFFICE(S) IN WHICH ALLEGED ACT OR OMISSION OCCURRED:

6. HAVE YOU CLAIMED AN INPUT TAX CREDIT ON YOUR PREMIUM? **YES/NO**
7. ARE YOU INTENDING TO CLAIM AN INPUT TAX CREDIT ON YOUR PREMIUM? **YES/NO**
8. Please attach to this Notice a schedule showing:-
 - (a) the names of all partners in the practice at the date of instructions from the client;

and
 - (b) the names and present addresses of all partners subsequently admitted to or retired from the practice up to the date of completion of the file.
9. (a) Date of instructions: _____ / ____ / ____
(b) Date of circumstances, acts or omissions allegedly giving rise to claim or possible claim: _____ / ____ / ____
(c) Date such circumstances, acts or omissions first known to insured: _____ / ____ / ____
10. If claim made, date first made: _____ / ____ / ____

11. Amount of claim or possible claim: \$ _____

12. Name of claimant or possible claimant: _____

13. Name and address of claimant's or possible claimant's solicitor:

14. Short description of the nature of the allegations made or anticipated (unless already fully advised in writing):

15. Has any complaint concerning these circumstances been made to the Law Institute? YES/NO

If yes,

(a) give details and date of complaint:

(b) do you authorise the Legal Practitioners Liability Committee to inspect the Law Institute file? YES/NO

16. **Name** of person(s) handling the matter at the time of the act or omission giving rise to the claim or possible claim:

Status: Principal: Qualified Employee:

Consultant: Clerk:

DATED THIS _____ DAY OF _____ 20 _____

SIGNED: _____

Complete and return to:

The Claims Solicitor
Legal Practitioners' Liability Committee
Level 31/570 Bourke Street
Melbourne VIC 3000
DX 431 MELBOURNE

Tel: 9672 3800
Fax: 9670 5538