Application

PART A: Name and address



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Compulsory Professional Liability Indemnification for Part-time Practice

845 Cambie Street, Vancouver, BC, Canada V6B 4Z9 t 604.669.2533 | BC toll-free 1.800.903.5300 Registration & Licensee Services t 604.605.5311 | f 604.687.0135 TTY 604.443.5700 Email registration@lsbc.org | lawsociety.bc.ca

You may apply for an indemnity fee discount if you are engaged in the private practice of law, and related professional services and activities that further those services, for an average of 25 hours per week or less.

The term "activities that further those services" includes, but is not limited to, practice management, administration and promotion, and professional duties or representation on bodies such as the Law Society of British Columbia, the Canadian Bar Association, the Continuing Legal Education Society and other legal organizations. The term "an average of 25 hours per week or less" means 25 hours per week or less **on average** over successive six-month periods (January to June; July to December), starting from the effective date of your part-time practice and ending when you notify the Law Society of a change in your practice status.

I AIXI A. IIu	inc and addi	000						
1. Given Name	I. Given Name(s) Surname							
2. Full Legal N	lame of Employ	er or Firm						
Address					City			
Province/State			Country		Postal/ZIP code			
Telephone		Fax Email						
PART B: Inc	demnification	informa	tion					
3. Effective da	te of indemnity	coverage	(MMM/DD/YYYY)					
PART C: Pro	ofessional ac	tivities						
you believe are engaged in the	e relevant to the o se activities by h	conditions : lours per w	stipulated in Law Society rules	2-88 to 2-90. vyers, please	d in during the past five years that Please also indicate "how often" you also describe the activities for which ending on those services.			
From (MMM/YYYY)	To (MMM/YYYY)	Name of 6	employer or firm		tion of activities and number of ave been engaged in those activities			
					(continued on next page)			

This section is to be filled out by in-house lawyers only.						
From (MMM/YYYY)	To (MMM/YYYY)		group which may make a	seeking cove	tion of activities for which you are erage and number of hours you will in those activities	
PART D: Pra	actice arrang	ement				
5. Please indicate which of the following classifications describe(s) your practice in its entirety. Please check more than one if applicable.						
☐ A sole pro	prietorship					
☐ A law firm	as an employee	e, partner, o	or contractor			
A law firm or sole proprietorship where you act in private practice through a law corporation incorporated under the Business Corporations Act that is governed by, and a valid certificate of authorization has been issued under, the Legal Profession Act						
A multi-dis	A multi-disciplinary practice					
 Not in private practice and practising exclusively as an in-house counsel as an employee or on a secondment at or with one of the following and opting to pay the indemnity fee :						
 Not in private practice and practising exclusively as a contractor at or with one of the following and opting to pay the indemnity fee:						
PART E: Refund of indemnity fees (if applicable)						
6. In the space below, indicate to whom the refund should be paid.						
Payee						
Address					City	
Province			Country		Postal	
Telephone		Fax	Email			

(continued on next page)

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PART F: Undertaking and declaration of applicant

- 1. I undertake to engage in the private practice of law, and related professional services and activities that further those services, for no more than an average of 25 hours per week or less, beginning on the effective date that I indicated in Part B of this form.
- 2. I declare that I have not had a professional liability insurance or indemnity claim in the past five calendar years in BC or any other jurisdiction for which an indemnity payment has been made.
- 3. I undertake to contact the Law Society as soon as possible if a change in circumstances arises that would alter any part of this undertaking and declaration.

4.	I declare that as a condition of approval of my application, I will make available to the Law Society or its agents all information, including books, accounts and records, which it requires to confirm my eligibility for this discount.						
	Date	Signature of applicant					

(see next page)

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Part-time practice activities

These are the types of activities you should include in your part-time practice activities calculation. This list is not exhaustive:

- any professional services for which the indemnification policy extends coverage (for in-house lawyers, this means the professional services you provide which you believe may give rise to a claim against you by a third party);
- practice management;
- firm administration, and marketing;
- continuing professional development (CPD)*, other continuing legal education such as participation in Canadian Bar Association sections, and other voluntary activities associated with the practice of law or provision of professional services such as mediation training;
- professional duties or representation on bodies such as the Law Society, the Canadian Bar Association, the Continuing Legal Education Society and other organizations; and
- professional services undertaken but delegated to others (e.g. to an articled student or a paralegal).

*If the CPD is subject to a maximum credit allowance, you need include only that maximum in your calculation of hours. If you are a teacher or student at a post-secondary institution, those activities are not part-time practice activities, even if claimed as CPD, and are not included in your calculation of hours.

Part-time practice hours

You may occasionally practise more than 25 hours per week, as long as on average, over consecutive six-month periods, you practise 25 hours per week or less, starting from the effective date of your part-time practice and ending when you notify the Law Society of a change in your practice status. Part-time does not mean practising full-time for a portion of the year and not practising at all for a portion or the balance of the year.

l,	, confirm that I have read and understood the contents of this
information sheet.	
Date	

The information in this form is collected in accordance with Law Society Rule 3-45 and section 26(c) of the Freedom of Information and Protection of Privacy Act, RSBC 1996, c. 165. The information will be used to process your application for a discount for compulsory professional liability indemnification coverage. If you have any questions about the collection and use of this information, contact Registration & Licensee Services at registration@lsbc.org.

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