

Medical Protective Application/ Paper

Following are recommendations for completion of the Medical Protective application.

- **The requested delivery date for the quote must be ten days after you submit the application online and 21 days for a paper application.**
- Page 1.I.B&C...the combined percentage of practice for all office and hospital locations must total 100%.
- Page 2.F...underwriters request that all data be completed.
- Page 4.II.D, Page 5.III.D & Page 12.IX.A...these questions are similar...please complete in full detail...attachment is appropriate...
- Page 4.III.C...this question is of importance and may require attachments of a detailed CV...
- Page 5.III.E...underwriters are very interested in a complete answer and lack of memberships can be misinterpreted.
- Page 6.IV.C...hours per week is important and will have an impact on the premium, i.e., less than 20 hours or less than 10 hours per week will contribute to a reduction in premium and fund surcharge.
- Page 10.VII. & Page 11.VIII...completion of every detail of every claim is essential for underwriters to complete their task to provide us with a confirming quotation.
- Page 12.IX.A...full detail is essential.
- Page 12.IX.B...in most cases, you will be checking occurrence...if it is claims made, please call me.
- Page 12.IX.C...the requested effective date will agree with the same question occurring on the very top of page 1.

Please note if you are a member of a group practice, the annual term will agree with the renewal date of the group...please call to confirm.

- Page 12.IX.F...State...IN...limits desired...250,000/750,000.

If you also are practicing in another state, please call me.

- Page 13.X & XI...it is essential that these two boxes be initialed.