

Advocis Insurance E&O Claims Submission Form

Name (as it appears on your Certificate of Insurance)

Name _____

Member/Insured Information

Firm Name _____ Date Reported _____

Member Policy # _____ Certificate # _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Email _____

Person alleged to have committed error:

Name _____ Position _____

Claimant Information:

Name _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____

Claimant's Lawyer Information:

Name _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Email _____

Did you receive a Statement of Claim or any other Court documents?

Yes No

If **yes**, when were you served? _____

If no, when did you first become aware of the claim or potential claim?

Date _____

If no, is this a Notice for Advice Only?

Did you report this to your compliance officer?

Product Service Carrier

Name _____
Mailing Address _____
City _____ Province _____ Postal Code _____

Agency/Dealer Business Placed Through

Name _____
Mailing Address _____
City _____ Province _____ Postal Code _____

Agency/Dealer Compliance Officer

Name _____
Mailing Address _____
City _____ Province _____ Postal Code _____
Telephone _____ Email Address _____

Describe the nature of error alleged to have been committed:

Describe nature of and estimated amount of damage or loss by the claimant:

Additional comments which may be of assistance in handling this claim:

Person in your office to contact for additional information:

Name _____ Telephone _____

Reported by:

Name _____
Signature _____ Date _____

Contact Information

Please submit copies of any and all documentation related to this matter. Furthermore, include a copy of your certificate of insurance along with this form and the related correspondence.

Advocis Broker Services Inc.
10 Lower Spadina Avenue, Suite 700, Toronto, ON M5V 2Z2
Email: claims@absinc.ca
For additional information: 416.646.9888 • 877.646.9888
Fax: 647.245.2227