



CPA PROFESSIONAL LIABILITY BALLPARK QUOTE FORM



Firm Name _____		Date Firm Est. _____	
<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> P.A. <input type="checkbox"/> L.L.C. <input type="checkbox"/> L.L.P. <input type="checkbox"/> Other			
Mailing Address _____			
City _____	County _____	State _____	Zip _____
Primary Physical Address _____			
City _____	County _____	State _____	Zip _____
Phone (____) _____		Fax (____) _____	
Email Address _____		Web Address www. _____	
Best Way to Contact <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Fax		Contact Person _____	
Current Premium _____		Current Limits \$ _____ /\$ _____	
Current Deductible \$ _____		<input type="checkbox"/> Per Claim Deductible <input type="checkbox"/> Aggregate Deductible	
Current Coverage <input type="checkbox"/> Occurrence <input type="checkbox"/> Claims-Made, Retroactive Date _____			
Current Expiration Date _____			

Practice Profile	#	F/T / P/T
CPA Owners, partners or officers		
Non CPA Owners, partners or officers		
Other CPAs		
Other Degreed Accountants		
Other Professional Staff with billed time		
Staff not otherwise categorized		

Gross Annual Revenue	Fiscal Year End	Revenues
Second prior fiscal year		\$ _____
Prior fiscal year		\$ _____
Estimated current fiscal year		\$ _____

Areas of Practice- Indicate the percentage of gross income for the prior fiscal year the firm derived from the following areas of practice. Total of all items must equal 100%.

General Accounting Services	%	Consulting Services	%
Bookkeeping		Management Advisory Services	
Write up		Litigation Support	
Payroll Services		Business Investment Advice	
Other (<i>attach description</i>)		Valuations and Projections	
Tax Services	%	Special Services	%
Individual		ERISA	
Business		SEC Engagements other than tax	
Estate/Trust		Fiduciary Services	
Attest Services	%	Executor/Trustee other than tax	
Compilations		Personal Financial Planning	
Reviews		Forensic Accounting	
Public Entities Audit		Personal Business Management	
Non Public Entities For Profit Audit (assets less than / equal to \$50M)		Elder Care	
Non Public Entities For Profit Audit (assets greater than \$50M)		Forecasts and Projections	
Non-Profit Audit		Registered Investment Advisory	
Benefit Plan Audit		Real Estate Agent	
Governmental Audit		Life/Health Insurance Agent	
Other Audit			
Information Technology	%	Other Services (<i>attach description</i>)	%

Limits of Liability

Per Claim/Aggregate	
\$100,000 / \$200,000	
\$250,000 / \$500,000	
\$500,000 / \$1,000,000	
\$1,000,000 / \$2,000,000	

Deductible Options

\$1,000	
\$2,000	
\$3,000	
\$4,000	
\$5,000	

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