

Form of Confirmation of Run-Off Cover

THE LAW SOCIETY OF IRELAND

CONFIRMATION OF RUN-OFF COVER

Name of Firm:

Address of Firm:

Period of Insurance:

Name of Underwriter(s) or Lloyd's syndicate(s) (in the case of Lloyd's syndicates the number(s) of the syndicate(s) providing the cover should be noted, together with the percentage of cover provided by each syndicate):

We confirm that for the period of insurance specified above Run-Off Cover in accordance with the Minimum Terms and Conditions (as defined by the Solicitors Acts 1954 to 2002 (Professional Indemnity Insurance) Regulations 2007 as amended by the Solicitors Acts 1954 to 2008 (Professional Indemnity Insurance) Regulations 2009 and the Solicitors Acts 1954 to 2008 (Professional Indemnity Insurance) (Amendment (No 2)) Regulations 2009, the Solicitors Acts 1954 to 2008 (Professional Indemnity Insurance) (Amendment) Regulations 2010 (hereinafter "the Regulations") is in place and that the Run-Off Cover provided is in compliance with the requirements of the Regulations in respect of the conduct of business by the above named Firm.

Signed by: _____

For and on behalf of: _____

*Please note that the confirmation of cover should either be printed on your professional notepaper or contain your company stamp.

THIS FORM SHOULD ONLY BE COMPLETED BY A QUALIFIED INSURER OR THE BROKER WHO HAS ARRANGED THE RUN-OFF COVER