

**LOCUM PRACTITIONERS  
(applicable to Law Firms, Law Corporations &  
Limited Liability Law Partnerships)**

**Law Society of Singapore**

**Compulsory Professional Indemnity Scheme (the Scheme)**

**1 April 2010 to 31 March 2011**

**Instructions For Completion Of Insurance Application And GIRO Forms**

**A. Application Form**

- 1) The Application Form (Form) must be completed in full, leaving no blank spaces. Only one Form per Law Practice (ie Law Firm/Law Corporation (LLC)/Limited Liability Law Partnership (LLP)) needs to be completed. It must be signed by the Sole-Proprietor, Partner or Director (as appropriate).
- 2) This Form comprises 2 parts:
  - a) **Part A** – applicable when engaging any Locum Practitioner as at 1 April 2010 or at any time during the period of insurance.
  - b) **Part B** – applicable when extending the period of engagement of any Locum Practitioner during the period of insurance.
- 3) The completed and signed original Form must be submitted to Lockton Companies (Singapore) Pte Ltd (Lockton Companies) as follows:

**Part A** – before the Locum Practitioner commences engagement.

**Part B** – seven (7) days prior to the expiry of the initial period of engagement of the Locum Practitioner or latest within three (3) days of the commencement of the extended period of engagement.
- 4) Upon receiving the completed and signed original Form (Part A or B, as appropriate), Lockton Companies will confirm the issue of Evidence of Insurance relating to the Locum Practitioners to the Law Society. It will send hard copies of the Evidence of Insurance to the Law Practices later.  
**(Please note that copies of the Form will not be accepted).**

**B. Evidence of Insurance**

Evidence of Insurance will be issued to the Law Practice for the:

- a) period of engagement, and
- b) extended period of engagement as applicable.



**C. Premium**

1) The premium for each Locum Practitioner is based on the tenure of engagement as shown in the Tables below.

**Table 1 - Primary Premium**

Applicable to all Law Practices for the Limit of Indemnity of S\$1,000,000 each and every claim inclusive of costs and expenses under the Primary Policy.

Tenure	Percentage of Premium*	Minimum Premium (S\$)
< 1 month	15%	300.00
1 to 3 months	30%	750.00
> 3 to 6 months	60%	Not Applicable
> 6 to 9 months	80%	Not Applicable
> 9 to 12 months	Annual Premium	Not Applicable

\* Based on Annual Premium per Practitioner for the Policy Year for each Law Practice.

**Illustration of premium computation:**

**Eg. 1. Assume:**

Applicable Rating Schedule is B (Standard Premium)

Total Number of Practitioners (including Foreign Lawyers & Singapore Lawyers) as at 1 April 2010: 4

Excess Level: 2 Excess Amount: S\$12,500

Total Number of Locum Practitioner(s): 1

Period of Engagement: 1 month

Annual Premium per Practitioner as at 1 April 2010 : S\$2,420.00  
 Premium for Locum Practitioner : 30% x S\$2,420.00  
 = S\$726.00 + GST (7%)

Premium for Period of Engagement : = S\$750.00\*

*\* Please note that the minimum premium for tenure of 1 month is S\$750.00. Therefore this is the premium to be paid plus GST.*

**Table 2 - Excess Premium**

Applicable to LLCs & LLPs only for the additional Limit of Indemnity of S\$1,000,000 each and every claim inclusive of costs and expenses under the Excess Policy.

Tenure	Percentage of Premium*	Minimum Premium (S\$)
< 1 month	15%	100.00
1 to 3 months	30%	200.00
> 3 to 6 months	60%	Not Applicable
> 6 to 9 months	80%	Not Applicable
> 9 to 12 months	Annual Premium	Not Applicable

\* Based on Annual Premium per Practitioner for the Policy Year for each LLC/LLP.





**Insurance Application Form for Locum Practitioners – 2010/2011**  
**Part A – applicable when engaging any Locum Practitioner as at 1 April 2010 or**  
**subsequently during the period of insurance**

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I/We hereby apply for insurance for the Locum Practitioner(s) detailed in the next page. I/We agree to pay the premium within **seven (7) days** of commencement of the period of engagement for each Locum Practitioner.

Name of Law Firm\*/LLC\*/LLP\* : \_\_\_\_\_  
(\*delete as appropriate)

Address : \_\_\_\_\_

E-mail address : \_\_\_\_\_

Telephone/Fax : \_\_\_\_\_

Administrative Officer/Contact Person : \_\_\_\_\_

Total number of Practitioners as at  
1 April 2010(or for Law Firms/LLCs/  
LLPs formed after 1 April 2010 during  
the period of insurance, the date when  
formed) : \_\_\_\_\_

Total number of Locum Practitioners  
for whom this Application is made : \_\_\_\_\_

Applicable Rating Schedule (A, B, C or D): \_\_\_\_\_ Excess Level (1,2 or 3): \_\_\_\_\_ Excess Amount: S\$ \_\_\_\_\_

*Please proceed to the next page(s)*



Locum Practitioners (2010/2011) – Part A

Name of Law Firm\*/Law Corporation (LLC)\*/Limited Liability Law Partnership (LLP)\* : \_\_\_\_\_  
 (\*delete as appropriate)

Part A - Details for each Locum Practitioner

Names of Locum Practitioners as in their Practising Certificates	Date Admitted to the Singapore Bar	Admission No.	No. of Years in Practice	Name(s) of Supervising Practitioner(s)	Period of Engagement		Premium for Period of Engagement plus GST
					From	To	

Signature:	Date:
Full Name:	Stamp of Law Firm/LLC/LLP:
Designation:	

*(Please use additional sheet(s) of paper, if necessary)*



**Insurance Application Form for Locum Practitioners – 2010/2011  
Part B – applicable for extended period of engagement**

I/We hereby apply for insurance for the extended period of engagement for the Locum Practitioner(s) named below. I/We agree to pay the premium within **seven (7) days** of the commencement of the extended period of engagement for each Locum Practitioner.

Name of Law Firm\*/Law Corporation (LLC)\*/Limited Liability Law Partnership (LLP)\* : \_\_\_\_\_

**Extended Period of Engagement**

Names of Locum Practitioners as in their Practising Certificates	Initial Period of Engagement	Extended Period of Engagement		Premium for Period of Engagement plus GST
		From	To	

<b>Signature:</b>	<b>Date:</b>
<b>Full Name:</b>	<b>Stamp of Law Firm/LLC/LLP:</b>
<b>Designation:</b>	

*(Please use additional sheet(s) of paper, if necessary)*