



FINANCIAL SERVICES INC.

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LAW FIRM FINANCING APPLICATION FORM

Completion of the Law Firm Financing Application Form is intended to provide BridgePoint with general information concerning your law firm to assist us in making an informed lending decision. After reviewing the Application Form, it may be necessary for us to obtain additional information to enable us to properly assess your financing requirements and design a financing programme that meets your objectives.

You acknowledge that BridgePoint may also undertake an independent investigation to corroborate the information provided in this application form from public sources including on-line search services (PPSA, Bankruptcy, etc.).

You agree that you shall ensure that all information provided to BridgePoint constitutes full, true and plain disclosure of your firm's legal practice and does not omit information that BridgePoint would reasonably rely on in making an informed lending decision. You acknowledge and agree that BridgePoint is relying on the accuracy of this information and that any misrepresentation, innocent or otherwise may expose BridgePoint to significant financial losses.

Instructions

Please complete the attached application.

1. Enter the requested information into the appropriate spaces on this form as applicable.
2. Once completed, please return by fax to our office at (416) 941-9035.

Privacy

BridgePoint covenants to maintain the confidentiality of all information concerning your legal practice and ensure that our review complies with your professional obligations with respect to solicitor-client privilege and protects the confidentiality of your Client and his or her affairs. All information provided to BridgePoint shall strictly be used for the purpose of evaluating your loan application.

CONTACT US FOR MORE INFORMATION:

1.888.800.4966

Date	Loan Amount Requested
MM / DD / YYYY	\$

Principal Repayment Preferences	
Fixed Term <input type="checkbox"/> Years (1 – 5) #:	Upon Settlement of Pre-determined Files <input type="checkbox"/>

Interest Payment Preferences	
Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Upon Settlement of Pre-determined Files <input type="checkbox"/>	

SECTION A	LAW FIRM OVERVIEW
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Law Firm Name

Address

City	Province	Postal Code
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Telephone	Fax
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Primary Contacts	
<i>Contact Name #1</i>	<i>Contact Name #2</i>
<i>Office Telephone</i>	<i>Office Telephone</i>
<i>Mobile Telephone</i>	<i>Mobile Telephone</i>
<i>Fax</i>	<i>Fax</i>
<i>Email</i>	<i>Email</i>

How many offices does your firm have?

Does your firm practice in more than one jurisdiction?
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Yes No

If “Yes” – please list the other jurisdictions where your firm provides legal services (whether in Canada or otherwise):
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What is your firm's approximate breakdown in personnel by position?

<i>Position</i>	<i>Number of Personnel</i>	<i>Average Years of Experience</i>
Partners:		
Associates:		
Paralegals:		
Law Clerks:		
Executive Assistants:		
Other:		

How is the business of your firm structured?

Partnership Professional Services Corporation Sole Practice

Who are the principal equity partners of the legal practice?

<i>Name:</i>	<i>Ownership Position %</i>	<i>Year of Call</i>

Do you have a shareholders' or partnership agreement for your firm?

Yes No N/A

Do you have "Key Man" insurance for the senior partners?

Yes No N/A If "Yes" – what are the policy limits: \$

SECTION B

OVERVIEW OF LEGAL PRACTICE

Approximately how many active files is your firm currently managing? What percentage of these files involve contingency fee arrangements?

%

What percentage of these files are plaintiff personal injury files?

%

Excluding personal injury what other practice areas is your firm involved (including insurance defence files)?

	%
	%
	%
	%

In relation to your personal injury practice, what is the approximate breakdown in the type of legal claims being litigated by your firm?

Motor Vehicle Accidents	%
Slip & Fall Accidents	%
Medical Malpractice	%
Other – <i>Please Specify:</i>	%
Other – <i>Please Specify:</i>	%

For MVA cases, approximately what percentage of these cases involve litigating both Accident Benefit and Tort Claims?

%

For MVA cases that do not have both a Accident Benefit and Tort claim, what is the breakdown between files with Accident Benefit Claims versus Tort Claims:

Accident Benefit Claims %: _____ Tort Claims %: _____

Do you have other third parties manage the Accident Benefit claims or Tort claims (if applicable) on your behalf?

Yes No

If you answered “Yes” to the previous question, how are your arrangements with these parties structured?

Ongoing Case by Case Occasional

If applicable, please identify the party(ies) managing your clients’ Accident Benefit or Tort claims:

<i>Accident Benefit Claims</i>	<i>Tort Claims</i>
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Please provide the following information relating to file intake/settlement activity for the past three years (where applicable):

<i>Year</i>	<i>Files Opened</i>	<i>Non-MVA Files Closed</i>	<i>MVA AB Claims Closed</i>	<i>MVA Tort Claims Closed</i>
2012 (to date)				
2011				
2010				
2009				

Have any partners or lawyers left your firm over the past two years, and are you presently aware of any potential departures?

Yes No

If you answered “Yes” to the previous question, please provide the names of those who have left your firm with their year of call:

<i>Name</i>	<i>Year of Call</i>

Have any partners or lawyers recently joined your firm over the past three years (excluding articling students)?

Yes No

If you answered "Yes" to the previous question, please provide the names of those who have joined your firm with their year of call:

Name	Year of Call

Have any clients transferred their file to your firm from another lawyer or law firm in the past twelve months?

Yes No If "Yes" – how many? #

How does your firm primarily attract new files?

Key Contacts in Ethnic/Other Communities <input type="checkbox"/>	Health Care Referrals <input type="checkbox"/>
General Advertising <input type="checkbox"/>	Paralegal Referrals <input type="checkbox"/>

Other – Please Describe:

What is the expected value of recovery for the average client file (including legal fees and disbursements)? \$	What is the minimum expected value of recovery for any client file accepted by your law firm? \$
What are average expected legal fees recovered per file for your firm? \$	If applicable, do your contingency fee arrangements require clients to pay for disbursements? Yes <input type="checkbox"/> No <input type="checkbox"/>
For disbursement expenditures on active files what percentage is paid immediately when incurred? %	Versus paid upon resolution of the claim and/or file? %
What is the average amount invested in disbursements per client file? \$	What is your average recovery rate for paid disbursements (i.e. as a percentage of the total value of disbursements paid)? %

SECTION C OVERVIEW OF FINANCIAL & ADMINISTRATIVE ISSUES

Please identify existing sources of credit:

<i>Creditor</i>	<i>Credit Available (\$)</i>	<i>Credit Drawn (\$)</i>	<i>Loan Maturity (Year)</i>

Does your firm have credit, management or other consulting agreements or arrangements in place with family members or non-arm's length parties (including any companies or other business entities related, affiliated, or associated with any of the Lawyers)?

Yes No If "Yes" – please describe:

Are there any other material payment obligations or other liabilities presently outstanding for your law firm in with an aggregate value in excess of \$50,000? (i.e. either periodic on a per annum basis or a one-time commitment)

Yes No If "Yes" – please describe:

Does any lawyer or principal of your law firm have any outstanding liabilities to the Canada Revenue Agency based on an assessment or re-assessment of previously filed Income Tax returns or otherwise?

Yes No

Is any lawyer or principal of your law firm currently being investigated, audited, or re-assessed by the Canada Revenue Agency?

Yes No

Is or has any lawyer or principal of your law firm (either currently or formerly employed or otherwise associated) been disbarred, suspended, investigated or otherwise sanctioned by the Law Society or the applicable body governing the legal profession in the jurisdiction in which you provide legal services?

Yes No If "Yes" – please provide details:

Is any lawyer at your law firm currently the subject of a client complaint or under investigation by the applicable body governing the legal profession in the jurisdictions in which you provide legal services, or subject to a criminal or quasi-criminal investigation by Police or other regulatory authorities, or subject to an investigation by any other body for conduct that negatively reflects or breaches the lawyer's ethical and/or professional obligations?

Yes No If "Yes" – please provide details:

Are all lawyers at your law firm licensed to practice law and deemed to be members in good standing with the applicable body governing the legal profession in the jurisdictions in which you provide legal services?

Yes No

Is there any other information concerning your law firm, its principals and employees, that if not disclosed would make any statement or information provided in this application form inaccurate or misleading or would otherwise reasonably be required by BridgePoint to make an informed lending decision?

Yes No

ADDITIONAL COMMENTS

(If additional space is required, please attach notes to form)

SECTION D

OVERVIEW OF FINANCIAL & ADMINISTRATIVE ISSUES

I certify that I am authorized to act on behalf of the law firm and am in a position to confirm that information provided in this loan application is true, accurate, and complete as of the date of this application.

Form completed by: (Print Name)

Signature	Date
	MM / DD / YYYY

Please fax the completed Application Form to: 416.941.9035. If you require assistance, please call: 1.888.800.4966