

MEDICAL LIABILITY MUTUAL INSURANCE COMPANY

APPLICATION: DENTIST PART-TIME INSURANCE

Dentist Name: _____

A premium discount will be provided to qualified dentists whose total practice to be covered under a MLMIC policy will not exceed sixteen (16) hours in any given week.

I. Date of Birth: Month _____ Day _____ Year _____

II. Requested effective date: _____ (please note, the earliest date this change can become effective is the day following the postmark date on the envelope containing the application.)

III. How many hours weekly do you spend in your total dental practice? (Include all professional activity as a dentist, even if covered by other insurance).

Hours By Day of Week

	<u>In Office</u>	<u>Other</u>	<u>Total Hours</u>
Sunday	_____	_____	_____
Monday	_____	_____	_____
Tuesday	_____	_____	_____
Wednesday	_____	_____	_____
Thursday	_____	_____	_____
Friday	_____	_____	_____
Saturday	_____	_____	_____

(a.) Of these, how many hours are (will be) covered by insurance other than that provided (to be provided) by MLMIC? _____ Hours per week (if none, list none).

Describe all activities covered by such insurance and name the insurance company (companies):

(Note: As a condition for a reduced rate of premium an endorsement will be attached to your policy excluding coverage for these activities.)

(b.) State the number of hours and describe all activities for which you require coverage under a MLMIC policy. _____ Hours per week

Activities: _____

As a further condition for a reduced premium, I herein consent to an audit of my records to substantiate the limited hours of practice to be covered by MLMIC insurance.

Signature

NEW YORK STATE INSURANCE DEPARTMENT REGULATION 95 DECLARES THAT:
"ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION."

Date

Signature