



REQUEST FOR EXEMPTION AND PRORATED REFUND (2019)

Name: _____ Bar No.: _____

Last Day of Private Practice with Principal Office in Oregon: _____, 2019*

*Please note: the cost of PLF coverage is prorated to the month. This means you must pay 1/12th of the annual assessment for each full or partial month of practice. For example, if your Last Day of Private Practice in Oregon was July 1, you will have to pay for PLF coverage for the month of July. If your Last Day of Private Practice with Principal Office in Oregon was June 30, you will not have to pay for PLF coverage for the month of July.

Make assessment refund check (if any) payable to:

_____, Payee

Address: _____

Details on the scope of PLF exemption categories can be found under Leaving Private Practice under the Assessments & Exemptions tab on the PLF website at www.osbplf.org.

I. I hereby certify that following the date shown above I am exempt from maintaining malpractice coverage with the Professional Liability Fund under the terms of PLF Policy 3.400 (copy attached) for the following reason:

I. My principal office is outside of Oregon.

If you were admitted to the Oregon State Bar under reciprocity (OSB Admission Rule 15.05), you engage in private practice in Oregon, and your principal office is outside Oregon, Rule 15.05 requires you to maintain malpractice insurance for your Oregon law practice substantially equivalent to Professional Liability Fund coverage. By signing this Request for Exemption form, you are certifying that you have complied with this requirement.

II. I do not engage in private practice in Oregon, either full-time or part-time, with or without remuneration, and I am exempt for the following reason.

- I am employed exclusively as a government attorney or judge.
- I am employed exclusively by a corporation or business entity (including non-profit organizations).
- I work exclusively as an employee or independent contractor for a legal aid or public defender office which provides me with professional liability coverage as required by the PLF.
- I am presently employed in a non-law related field.
- I am retired from the private practice of law.



Professional Liability Fund

- I work as a law clerk/supervised attorney not engaged in the private practice of law.
- I am presently unemployed.
- Other (specify): _____.

2. I hereby apply for a prorated refund (if applicable) of my 2019 PLF assessment in accordance with PLF Policy 3.400. The refund should be made payable and sent to the address as shown above.

3. In seeking this exemption I hereby certify the following:

(1) I will not engage in any private practice of law in Oregon with my principal office in Oregon after my Last Day of Private Practice in Oregon as stated on page 1 of this form. This means, among other things, that I will not consult with a current, former, or prospective client, partner, fellow shareholder, associate, employee, or associated lawyer concerning the ongoing progress or handling of an existing matter or new matter unless permitted to do so within the scope of my exemption. (Note: You are permitted to inform a former client or the new attorney handling a matter for the former client about the status of the matter and explain your past actions in representing the client, but you should not provide any ongoing advice or professional services to the client or new attorney.)

(2) I understand that I will be required to pay my full 2019 annual PLF assessment if I return to PLF coverage during 2019 with a gap in continuous coverage of less than two full calendar months as provided in PLF Policy 3.400(C).

(3) I agree to notify the PLF immediately if my status changes from exempt to non-exempt at any future time in 2019.

(4) If leaving private practice, I have made arrangements to safely store my closed client files. To obtain a closed client file, a client should contact:

Name: _____

OSB No.: _____

Telephone: _____

Dated: _____

Signature

Note: By filing this Request for Exemption and Prorated Refund, you will automatically receive extended reporting coverage based on your 2019 PLF Coverage Plan. If you return to PLF coverage later in 2019, the extended reporting coverage will automatically terminate as of the date you return to coverage pursuant to Section I.4.b of the 2019 Coverage Plan and you will receive the same Retroactive Date pursuant to PLF Policy 3.100 as you had before you obtained extended reporting coverage. If you return to PLF coverage in a later year, you will receive a new Retroactive Date pursuant to PLF Policy 3.100. For further information and a copy of PLF Policy 3.100 governing Retroactive Dates or PLF Policy 3.620 governing extended reporting coverage, please contact the PLF.

Note: You must seek an exemption annually even if you are out of state or on extended reporting coverage. If you commence the private practice of law during the balance of the year with your principal office in Oregon as defined in PLF Policy 3.180, you must notify the Professional Liability Fund immediately. You may not continue your exemption if you engage in the private practice of law and maintain your principal office in Oregon at any time in 2019 after your Last Day of Private Practice in Oregon.

Note: This Request for Exemption from the Professional Liability Fund assessment does not change your Oregon State Bar Membership status. If you wish to change your status from active to inactive, please contact Regulatory Services at the Oregon State Bar for the proper forms or refer to your membership directory. You do not have to be an inactive member to be exempt from the PLF assessment.



Professional
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NOTE: Refer to the PLF Website at www.osbplf.org for important information concerning exemption categories, requirements, and limitations. For assistance in completing this form, please call the PLF Accounting Department at (503) 924-1771 or (800) 452-1639.

PLF POLICY 3.400

PRORATION FOR ATTORNEYS LEAVING PRIVATE PRACTICE DURING THE PLAN YEAR

(A) An attorney with PLF coverage who leaves the private practice of law in Oregon during the Plan Year is entitled to proration of the applicable PLF assessment if the attorney meets the criteria stated in subsection (B). The attorney shall pay a proportionate assessment on the basis of one-twelfth of the total assessment for each partial or full calendar month that the attorney was in private practice, including the month the attorney leaves private practice. No reduction, proration, or refund shall occur for any service charge, late payment charge, or other charges or fees paid or owed by the attorney. Attorneys seeking proration of the applicable PLF assessment under this policy shall be required to complete an Application for Proration and sign a Request for Exemption.

(B) To qualify for proration of the applicable PLF assessment under this policy, an attorney must cease to engage in any private practice of law which would require PLF coverage. This means, among other things, that the attorney may not consult with a current, former, or prospective client, partner, fellow shareholder, associate, employee, or associated lawyer concerning the ongoing progress or handling of an existing matter or new matter unless permitted to do so within the scope of the attorney's PLF exemption.

(C) If an attorney obtains proration of his or her assessment under subsection (A) and returns to PLF coverage in the same Plan Year with a gap in continuous coverage of less than two full calendar months, upon returning to coverage the attorney shall be required to pay his or her full annual assessment as if there had been no gap in coverage. In all other cases, an attorney who returns to PLF coverage in the same Plan Year will be assessed according to Policy 3.200(B) upon returning to coverage. Attorneys subject to this subsection may qualify for installment payment privileges according to Policy 3.300(B).

(D) The Retroactive Date for an attorney who obtains proration of his or her assessment under Policy 3.400 and later returns to PLF coverage shall be determined according to Policy 3.100.

(E) If an attorney is paying his or her assessment on an installment basis and will be leaving the private practice of law in Oregon prior to the last calendar month of the next installment period, the attorney may simultaneously (1) file an Application for Proration and Request for Exemption indicating the anticipated date of leaving the private practice of law in Oregon, and (2) pay a reduced installment payment as calculated by the Fund based on the anticipated date of leaving the private practice of law in Oregon. The attorney shall be responsible for notifying the Fund immediately if the attorney's actual last day of private practice in Oregon is different than the date previously indicated to the Fund, and shall be required to pay immediately any additional assessment amounts which may be due based upon the correct date.