

PRESCRIBED CONSENT
(Letterhead of Claimant)

(Date)

[Name and Address of Member Firm]

Dear :

Re: Conflict of Interest Posted by Financial Interest in
 Canadian Lawyers Liability Assurance Society (CLLAS)

As we previously informed you, we wish to retain the services of your firm to represent our interest against _____ (the “CLLAS member”) in a matter which may give rise to the CLLAS member making a claim against CLLAS under its policy of professional liability insurance. You have informed us that the CLLAS member is one of the ten member firms of CLLAS, along with your firm.

We confirm having received and considered the Conflict of Interest Policy of CLLAS, a copy of which is attached as Schedule A, section 3 of which prescribes the conditions on which your firm may act for us in this matter.

For the record, we also attach, as Schedule B, a copy of the disclosure statement which you provided to us outlining your involvement in CLLAS and the involvement of your firm/affiliate in Colchester Reinsurance Limited, one of CLLAS’s reinsurers.

For our part we accept the conditions set forth in section 3 of CLLAS’s Conflict of Interest Policy and confirm that your firm has met its obligations to us as contemplated in the conditions.

We are satisfied that full disclosure of your financial interest in CLLAS has been made to us and, in full awareness thereof, we wish to have you represent our interest in this matter.

Yours very truly,

01/07/20