

# Notice of Failure to Have Professional Indemnity Insurance



Queensland | *Legal Profession Act 2007* | section 354(2)

QLS FORM 4 (LPA) | version 6

To: Queensland Law Society, 179 Ann Street, Brisbane Qld 4000

(Insert name of applicant/practitioner)	
I,	
(Insert address of applicant/practitioner)	
of	
	Postcode
hereby give notice that I am a person who must, under s353 of the <i>Legal Profession Act 2007</i> ('the Act'), have professional indemnity insurance and became aware on:	
(Insert date)	
that I will not/ was not covered by professional indemnity insurance that complies with the requirements of a regulation mentioned in s353(3) of the Act as from/ between:	
(Insert date)	

Signed
Date

**Privacy statement**

**WE RESPECT YOUR PRIVACY.** This form asks for *personal information*. Please refer to our **Personal Information Collection Notice** for more details. The notice can be accessed **here**. If you have any questions or are unable access it online, please contact us on 1300 367 757.