Law Society of Nunavut

INSURANCE EXEMPTION CERTIFICATE AND UNDERTAKING

To: The Executive
Law Society of Nunavut

I, _____, HEREBY CERTIFY THAT:
(print or type name)

INSTRUCTIONS, DELETE #1 OR #2, AS APPROPRIATE

1. (a) I am an active member or am applying for membership in the Law Society of Nunavut;

(b) I am employed by, and my professional services are provided exclusively to:
(i) a government or government agency; or
(ii) an employer who does not practice law; and

(c) I do not render or will not be rendering legal services of any kind to the public in Nunavut.

- or

2. (a) I am an active member or am applying for membership in the Law Society of Nunavut;

(b) I do not ordinarily reside or carry out my principal practice of law in Nunavut;

(c) I am covered by errors and omissions insurance which provides indemnification to a minimum of $1,000,000.00 and which covers my practice of law in Nunavut, which insurance is carried through:

_____; and
(*Name of Insurer and Law Society)*

(d) I will provide further information, upon request, respecting my insurance coverage.

I UNDERTAKE to notify the Law Society immediately if there is a change in my status such that the foregoing statements are no longer applicable.

DATED at _____, this _____ day of _____, 20 _____ .

)
)
)
_____) **_____**
(Witness) **)** ***(Signature)***

LAW SOCIETY OF NUNAVUT

Form F

STATUTORY DECLARATION

I, _____

of _____ , in _____

SOLEMNLY DECLARE THAT:

(a) I am applying for membership in the Law Society of Nunavut;

(b) I am applying for a change of status from an inactive to an active member of the Law Society;

[delete (a) or (b) as applicable]

(c) I will not maintain a client trust account in Nunavut with respect to that membership;

(d) If I do set up a client trust account in Nunavut I will immediately notify the Law Society of Nunavut and I will comply with the *Rules of the Law Society of Nunavut* and any other requirements of the Law Society; and

(d) I make this declaration in lieu of completing an Accountant's Report in Form E under the *Rules of the Law Society of Nunavut*, conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

DECLARED BEFORE ME at _____)
)
this _____day of _____ ,)
)
20_____ .)
)
)

_____ _____
A Notary Public in and for the Province of) Declarant's signature

_____
)
)

NB. IF THIS DOCUMENT IS EXECUTED OUTSIDE OF NUNAVUT, IT MUST BE SWORN BEFORE A NOTARY PUBLIC, UNDER SEAL. IF EXECUTED WITHIN NUNAVUT, IT CAN BE WITNESSED BY EITHER A NOTARY PUBLIC OR A COMMISSIONER OF OATHS.

Law Society of Nunavut
P.O. Box 149, Iqaluit, NU, X0A 0H0
Phone:(867) 979-2330 Fax:(867) 979-2333

AUTHORIZATION

I, _____, authorize the Law Society of Nunavut to make enquiries concerning my background, character and fitness for admission, and I also authorize the disclosure of information about myself to the Law Society of Nunavut by any person or body possessing it, provided that such information will be used by the Law Society of Nunavut only for the purpose of this application for membership in the Law Society of Nunavut, and will otherwise be treated in strict confidence.

_____ _____

Date Applicant's Signature