



**EPL Immigration Practices Defense Coverage**

**Applicant:** \_\_\_\_\_

1. Have any losses, lawsuits, administrative proceedings, governmental investigations, hearings or demands been made against the Applicant or any entity or person proposed for this insurance during the past five (5) years alleging violations of the Immigration Reform Control Act of 1986 or any other similar federal, state or local laws or regulations?

Yes

No

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant's Authorized Principal or Officer