

PRODUCER APPOINTMENT PROFILE

Date: _____ Email Address: _____

Phone: _____

Fax: _____

Agency Name: _____

Agency Address: _____
Street City State Zip

Mailing Address: _____
Street City State Zip

Taxpayer ID#: _____ Social Security#: _____

☐ Corporation ☐ Partnership ☐ Sole-Proprietorship ☐ LLC

Corporate Name: _____

AGENCY PRINCIPALS AND PRODUCING AGENTS

AGENCY PRINCIPALS

<u>Name, SS# & License #</u>	<u>Title / Position</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

AGENTS SIGNING APPLICATIONS

<u>Name</u>	<u>License# / Email Address</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

AGENCY DATA

Agency Manager: _____

Business Hours: _____

Errors & Omissions Carrier: _____

Policy#: _____ Effective Date: _____

Limits: _____ Deductible: _____

ADDITIONAL LOCATIONS (NEW PROFILE FOR EACH LOCATION REQUIRED)

PRODUCTION INFORMATION

Top Condo X-WIND Property Markets: Approximate Volume:

1. _____
2. _____
3. _____

Top Condo General Liability Markets: Approximate Volume:

1. _____
2. _____
3. _____

Top Condo Difference in Conditions Markets: Approximate Volume:

1. _____
2. _____
3. _____

**PLEASE ATTACH A COPY OF AGENT(S) LICENSE(S) AND A COPY OF E&O
DECLARATIONS PAGE**

Company Use Only

Agency Code#: _____

Date Appointed: _____

Appointed By: _____