

Prospective Agent Information

Agency Legal Registered Name:	Agency Tax ID#	Area Code + Tel. #	FAX #		
Mail Address:			Mail Zip:		
Location: (if different from mailing address)			Loc. Zip:		
City:	State:	County:			
Agency Contact: Agency Contact Title:		Agency Contact Email Address: Agency Website(U		Agency Website(URL)	
Business Structure:					
Sole Proprietorship ¹ Partnership ¹ Corporation					

Agency Automation: Please provide the following information. If no answer, please type none.

Agency Mgmt System (i.e. Applied, AMS, Etc.) Vendor Version		Comparative Rater (i.e. EZLynx, Setwrite, etc.)	Vendor Version:
Choicepoint J Node:			

Do You Want Download?	Ivans Acct. # :	Download contact Name:	Download contact Email:	Download contact phone:
Transaction Filing? YES [∫] NO	Transformation Station? (Applied) YES [〔] NO	Get Real-Time?	Transact Now? (AMS)	

KEY PERSONNEL DATA: List Agency Principals and all Personal Lines Managers, Supervisors, and CSRs:

Name:	Title/Position:	Soc. Sec. # & D.O.B.	Yrs. Exp?	%Time PL?
Name:				
				%
Name:				%
				/0
Name:				%
Name:				
				%
Name:				%
				70
Name:				%
Name:				%
				70

Agency Staffing & Revenues:

Total # of agency employees:	PL Commission Revenue: \$	% Change from last year	PL Growth Goal%
Total # of PL employees:	Total # of PL CSRs:		
Total # of PL Customers/Insureds (Not Policies)	Total # of PL Producers:		
% of PL Customers with both Auto/HO	Total # of PL policies:	Current PL Client Retention	%

Carriers in Your Agency: Prior Year End Written Premium (WP)

Top 5 Carriers:	Direct Contract or thru MGA?	PL WP (\$)	Auto WP(\$)	*Auto Loss Ratio%	Home WP (\$)	*Home Loss Ratio %
	Totals:					

*Attach actual company results for the last 3 years

Flood Carrier Name	Flood ID:	Flood Written Premium	Commission %	Boat/Yacht Carrier	Total WP Boat/Yacht	# of Customers Boat/Yacht

Please provide the following information. If no answer, please type none % of customers serviced by a company service center?	Personal Lines %
% of transactions via upload/download?	
% of accounts paying by EFT or credit card?	
% of claims reported directly to carrier?	
Do you currently track your Source to Sale?Yes/No	
Do you track clients quoted as well as Sales? Yes/No	
Do you track lost business? Yes/No How do you tra	ack?
If yes, how many do you lose on average per month?	
How many Auto quotes do you average monthly?	
How much Auto new business do you average month	hly?
How many Homeowner quotes do you average mont	thly?
How much Homeowners new business do you avera	age monthly?
What are your best sources of new business for the agency?	?
How does your agency generate leads?	
Advertising Direct MailSponsorships	Speaking EngagementsCommunity Events
Other – please explain	
What area do you market? This city only or surrounding area	as as well? Please explain
Do you solicit all personal lines of insurance, i.e. Flood, Value	uable Items, Umbrella and Boat? Yes/NO
Does the agency use an incentive program with producers or	r CSR's?
Yes/No If Yes, please explain	
Does the agency have a written business or marketing plan?	Yes/No If yes, please attach.
Does the agency have a perpetuation plan? Yes/No	
Is agency currently dealing with an extraordinary service cons	nstraint?Yes/No

If yes – please explain______