



AGENCY INFORMATION

Agency Name: _____

Legal Name (if different from above): _____

Mailing Address:

Physical Address:

Phone Number: _____ Fax Number: _____

Website: _____

What lines of business do you write in your agency?
(Select all that apply)

- Commercial P&C Professional Liability Personal Lines
- Commercial Transportation Garage
- Other: _____

(Please specify)

Are you a part of any Aggregators, Groups or Trade Associations?
(Please list all):

Key Contacts:

Owner: _____ Email: _____

If you have any specific designated people that should receive the following items, please provide their contact name and email address:

Main Office Contact: _____ Email: _____

Accounting: _____ Email: _____

E-Document Delivery: _____ Email: _____

Renewals: _____ Email: _____

