



New Agency Prospect/Appointment Form

I. Agency Prospect Information

Agency Name: _____	Sales Field: _____
Address: _____ _____	Years in Business: _____
PO Box: _____	Principal: _____
Phone: _____	PL Manager: _____
Fax: _____	CL Manager: _____
Website Address: _____	
Appointment Type: All Lines <input checked="" type="checkbox"/> PL Only <input type="checkbox"/> CL Only <input type="checkbox"/>	
Checklist of required documents for submitting Prospect approval Prospect will not be submitted for approval if the below documents are not attached to this form	
Agency Write-Up by DMM	<input type="checkbox"/>
Completed New Agency Appointment Summary	<input type="checkbox"/>
3 Year Loss Reports for top 3 Personal Lines Markets	<input type="checkbox"/>
3 Year Loss Reports for top 3 Commercial Lines Markets	<input type="checkbox"/>

II. Agency Appointment Information

Agency Tax ID #: _____	
Licensed States: WA <input type="checkbox"/> OR <input type="checkbox"/> ID <input type="checkbox"/> UT <input type="checkbox"/>	
Choicepoint Node ID: _____	Agency Services Contact: _____
Agency Management System: _____	Version: _____
E& O Carrier: _____	Policy #: _____
Checklist of required documents for New Agency Appointment Set-up Agent will not be set-up if the below documents are not submitted upon appointment approval	
Copy of Agency License for applicable state(s)	<input checked="" type="checkbox"/>
List of office personnel showing title, department and email address	<input checked="" type="checkbox"/>
W-9 Request for Taxpayer Identification Number and Certification	<input checked="" type="checkbox"/>
Current YTD and Prior Year Agency Profit & Loss Statements	<input checked="" type="checkbox"/>
Current YTD and Prior Year Agency Balance Sheet	<input checked="" type="checkbox"/>
Form FS245 – Authorization Agreement for Automatic Deposits	<input type="checkbox"/>
Blank Check or Deposit Slip for Automatic Deposits	<input type="checkbox"/>
Form FS223 – Authorization Agreement for Agency Sweep (Optional)	<input type="checkbox"/>
Blank Check or Account Withdraw Slip for Agency Sweep	<input type="checkbox"/>

III. Agency Number/Group Number/UW Assignments

Agency Number Assigned: _____	Group Number Assigned: _____
Underwriter Assignments:	
Personal: _____	Team: _____
Commercial: _____	Team: _____
Farm: _____	Team: <u>FR1</u>