

21st Century General Agency Inc.

Producer Application Form

Agency Name _____

Physical Address _____

City _____ State _____ Zip _____

Mailing Address _____

City _____ State _____ Zip _____

Years Experience at this Agency Address _____

If less than 5 years, insurance experience at prior agencies _____

If prior position was not in the insurance industry, please list positions held and occupation prior to becoming an agent

Agency Telephone Number _____ Fax _____

Agency License Number _____ Eff/Exp Date _____

Non Res Lic No _____ State _____ Eff/Exp Date _____

Federal Tax TIN or Social Security Number _____

Errors and Omissions Insurer _____

E&O Limits _____ Expiration Date _____

Type of Agency ____ Individual ____ Partnership ____ Corporation

Year Agency established _____

Total Agency Employees ____ Total PP Auto _____

Average Number Years Auto Experience _____

List any other branch offices for this agency:

Name _____ Contact _____

Mailing Address _____

Physical Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

Producer Application Form (Cont)

Name _____ Contact _____
Mailing Address _____
Physical Address _____
City _____ State _____ ZIP _____
Phone _____ Fax _____

Is the agency engaged in any other type of business? If so, what? _____
Are any commissions paid to anyone outside your office? _____

1. Principal Partners and/or Corporate Officers

Principal Name _____ Title _____
Home Address _____ Years _____
City _____, State _____ Zip _____
Social Security Number _____ Date Of Birth _____
Home Phone Number _____
Ever Been Convicted of a Felony? Yes _____ No _____
Ever Declared Bankruptcy? Yes _____ No _____
Ever Been Convicted of a Felony? Yes _____ No _____ If yes, please explain

Ever been known by, used, or conducted business or opened bank accounts in any other name? Yes _____ No _____ Please explain if yes _____

Ever been refused an insurance license, or had your license suspended or revoked in any state? Yes _____ No _____ If yes, which state and explain _____

2. Principal Partners and/or Corporate Officers

Principal Name _____ Title _____
Home Address _____ Years _____
City _____, State _____ Zip _____
Social Security Number _____ Date Of Birth _____
Home Phone Number _____
Ever Been Convicted of a Felony? Yes _____ No _____
Ever Declared Bankruptcy? Yes _____ No _____
Ever Been Convicted of a Felony? Yes _____ No _____ If yes, please explain

Ever been known by, used, or conducted business or opened bank accounts in any other name? Yes _____ No _____ Please explain if yes _____

Ever been refused an insurance license, or had your license suspended or revoked in any state? Yes _____ No _____ If yes, which state and explain _____

	Company	Date Appointed	Commission % New & Renewal	Written Premium	Loss Ratio
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____

What Companies, If any, have cancelled your appointment during the last three years?

Company	Cancellation Date	Reason
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do You Advertise? Yes _____ No _____

Do you have a yellow page ad? Yes _____ No _____ If yes, in which citie(s) _____

Do you do business regularly with car lots? _____

Answer and Explain Your Criteria for Reviewing Potential Insured's:

Do You Review MVR's Yes ___ No ___ Comments _____

Do You Inspect Vehicles? Yes ___ No ___ Comments _____

Do You Obtain Photos ? Yes ___ No ___ Comments _____

Do You Give Phone Quotes? Yes ___ No ___ Comments _____

Do You Bind Risks Over The Phone Yes___ No _____

Has Your Agency or Any of Your Employees Ever Been Under Investigation
by or Subject to Discipline From the Department of Insurance?

Yes ___ No ___ If Yes:

Date _____

Cause _____

Action _____

I have read the above and to the best of my knowledge, the information provided is true and correct. I understand that according to the Fair Credit Reporting Act 21st Century General Agency Inc. has the right to routine verification of information pertinent to the acceptance of appointment which may include an investigative consumer report. Upon my written request, 21st Century will disclose in writing the nature and scope of the investigation requested, if such a report is procured.

Agent Signature

Date

ATTENTION – IMPORTANT

The following documents MUST be included with this Application before your agency can be considered for an appointment.

Production and Loss Run Reports From 3 Of your 5 most frequently used auto markets. Please include both a inception to date and a year to date report.

Copy of the declaration sheet for your E&O coverage.

Copy Of All licenses