

Broker Profile

Name of Broker:					
State:		Zip:			
	E-mail:				
	State:	State:			

CSR's/Underwriting: (name, phone number and email):

	Business Mix %	Commission %	States writing in	Companies Represented	Average Firm Size and/or Number of Firms
Commercial	%	\$			
Professional	%	\$			
Lawyers PL					
Med Mal					
Architects					
Accountants					
Other:					
Personal	%	\$			
Life, A & H	%	\$			
TOTAL	%	\$			

1. Does your agency operate as a Wholesaler, Retailer, MGA with Binding Authority or Combination?

____% Wholesale

_____% Retail _____% MGA Binding Authority

2. Does your agency hold an E & S license? Yes No

3. Do you generate sub-produced business? Yes No (If "Yes," please explain on a separate sheet of paper).

- Do you have an exclusive agreement or have underwriting authority on behalf of another Lawyers Professional Liability 4. carrier? \Box Yes \Box No
- Has any member of your Agency received any action by a State Insurance Department or other regulatory Agency? 5. Yes No (If "Yes," please explain on a separate sheet of paper).
- Is there any pending or threatened litigation or judgments within the past five (5) years against any of your Brokers, 6. Agents or any of the Principals? Yes No (If "Yes," please explain on a separate sheet of paper).

*Please attach completed Brokerage Agreement, W9, Agency license, Agent (producer) license and E&O certificate with Broker Profile.