

National Advantage Insurance Services, Inc.

License # 0821992

Application for Appointment

Agency Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of Principal(s): _____ Agency license # _____

Tel: (____) _____ - _____ Fax: (____) _____ - _____ Email: _____

Year Established: _____ Number of Employees: _____ Number of Producers: _____

E&O Carrier: _____ Limits: \$ _____

Standard / Preferred Markets in office: 1) _____ 2) _____

3) _____ 4) _____ 5) _____

Annual Volume in Standard / Preferred Markets:

Personal Lines \$ _____ Commercial Lines \$ _____ Commercial Auto \$ _____

Agency Specialty / Niche Marketing Programs: 1) _____ 2) _____

3) _____ 4) _____ 5) _____

Annual Volume in Excess / Surplus Lines Marketplace:

Personal Lines \$ _____ Commercial Lines \$ _____ Commercial Auto \$ _____

Please provide names of MGA's / Surplus Lines Brokers / Wholesalers you are currently doing business with and your approximate annual volume:

Personal Lines:

	Wholesaler Name	Wholesaler Name	Annual Volume
Auto Excess	1) _____	2) _____	\$ _____
Auto PD	1) _____	2) _____	\$ _____
Auto Liab	1) _____	2) _____	\$ _____
Boats	1) _____	2) _____	\$ _____
Dwls / HO's	1) _____	2) _____	\$ _____
Floater	1) _____	2) _____	\$ _____
Umbrellas	1) _____	2) _____	\$ _____

Commercial Lines:

Auto Excess	1) _____	2) _____	\$ _____
Auto / Truck PD	1) _____	2) _____	\$ _____
Auto / Truck Liab	1) _____	2) _____	\$ _____
Contractors	1) _____	2) _____	\$ _____
Cargo	1) _____	2) _____	\$ _____
Gen'l Liability	1) _____	2) _____	\$ _____
Monoline Prop	1) _____	2) _____	\$ _____
Professional Liab	1) _____	2) _____	\$ _____
Property Pkgs	1) _____	2) _____	\$ _____
Umbrella / Excess	1) _____	2) _____	\$ _____

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Which Specialty and Excess / Surplus Lines Insurance Companies is your agency most comfortable with and feel are the most competitive?

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Do the MGA's / Surplus Lines Brokers / Wholesalers you are currently doing business with have access to the above Specialty and Excess / Surplus Lines Insurance Companies?

Yes _____ No _____

Which specific classes of business does your agency feel National Advantage Insurance Services will be of the greatest assistance?

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

What Annual Volume do you anticipate placing with National Advantage Insurance Services?

Personal Lines \$ _____ Commercial Lines: \$ _____ Commercial Auto: \$ _____

Submitted by

_____/_____/_____
Date

Title

Where did you hear about us? _____

What finance company do you prefer to use? _____

Please submit this application with proof of E & O coverage and a copy of your license.

Thank you and we look forward to doing business with your agency!

PO Box 1065, Tustin Ca 92781 / Tel: 714 505-1015 / Fax: 714 505-1025

email: susie@naisins.com