

Approved _____

Declined _____

TEXAS SPECIALTY UNDERWRITERS, INC. Agency Information Form

Name of Agency _____ Year Established _____

Type of Business Individual Partnership Corporation

Individual S.S.N. _____ Corporate IDS# _____

Physical Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

Website _____ Email Address _____

Telephone # _____ Fax # _____

ALL POLICIES AND ENDORSEMENTS & STATEMENTS ARE EMAILED TO AGENT

Email address for your agent statement _____

Email address to email your commercial lines _____

Email address for your personal lines _____

How did you hear about Texas Specialty Underwriters, Inc.? _____

Branch Offices yes no If yes, please list.

Location _____ City _____ State _____ Zip _____

Phone # _____ Fax # _____

Location _____ City _____ State _____ Zip _____

Phone # _____ Fax # _____

Agency Principals

Name _____ Title _____

Duties _____ email _____

Name _____ Title _____

Duties _____ email _____

Name _____ Title _____

Duties _____ email _____

Staff Members

Name _____ Title _____

Duties _____ email _____

Name _____ Title _____

Duties _____ email _____

Name _____ Title _____

Duties _____ email _____

Standard Companies Represented

Company _____ Annual Premium Volume \$ _____

Commercial Lines % _____ Personal Lines % _____

Company _____ Annual Premium Volume \$ _____

Commercial Lines % _____ Personal Lines % _____

Company _____ Annual Premium Volume \$ _____

Commercial Lines % _____ Personal Lines % _____

1. Bank Reference _____
City _____ State _____ Phone # _____
Bank Officer Name _____ Title _____

2. Have any companies retire from you agency or withdrawn your authority on any particular types of business in the last year? yes no If yes, please explain.

3. Have you or your agency ever filed bankruptcy in a court in the United States? yes no
If yes, attach statement giving details and circumstances.

4. Have any errors and omissions claims been made during the past five years against your agency, or any of its past or present partners, executive officers, directors, solicitors, office brokers or employees, any predecessors in business or against any corporation that you or your agency was employed by, associated with or had an interest in? yes no if yes, attach statement giving full details and status of each claim including dates, basis of claim and amount of claim.

5. Does your agency specialize in any particular line of insurance? If so, explain.

6. Why does your agency wish to contract with **Texas Specialty Underwriters, Inc.?**

7. Does your agency participate in brokering business with other local recording agents?
 yes no

8. I warrant that the information listed in this application is true to the best of my knowledge and I understand that any false information stated in this application could negatively influence the decision of my agency for appointment with **Texas Specialty Underwriters, Inc.**

Signed _____
Agency Owner/Corporate Officer

Date _____

The Fair Credit Reporting Act Public Law 91-508 requires us to disclose to the prospective agent, that as part of our routine procedure, the Company may inquire as to the character, general reputation, personal characteristics and mode of living of said prospective agent. This information will be obtained through a regular reporting Company.