



AGENCY PROFILE

Agency Information

Agency Name:

Physical Address:

City:	County:	State:	Zip:
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Mailing Address (if different):

City:	County:	State:	Zip:
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Telephone:

Fax:

Agency Email:

Web Site (URL):

Agency License #:

Agency Tax ID #:

Year Established:

Other States Licensed:

Hours of Operation:

Satellite Offices:

E&O Carrier Limits:

Bond Carrier Limits:

Associations:

Other Business Activities:

Agency Principles

(1) Name:	Title:	SS#:	DOB:
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License #:	Email:	Bus. Phone:
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Home Address:	Hm Phone:
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(2) Name:	Title:	SS#:	DOB:
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License #:	Email:	Bus. Phone:
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Home Address:	Hm Phone:
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(3) Name:	Title:	SS#:	DOB:
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License #:	Email:	Bus. Phone:
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Home Address:	Hm Phone:
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Agency Personnel - Appointed Producers & CSRs

# of Employees:	# of CSRs:	# of Commercial Producers:
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Are all Producers Licensed: (Yes) (No)	Primary Contact (s):
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Commercial Lines Carriers - Top 3 Commercial P&C Carriers Represented by the Agency

Company Name:		Contract: (Yes) (No)
Company Volume:	Book Profile:	Years Represented:
Company Name:		Contract: (Yes) (No)
Company Volume:	Book Profile:	Years Represented:
Company Name:		Contract (Yes) (No)
Company Volume:	Book Profile:	Years Represented:

Carriers You No Longer Represent, But Have Represented In the Past 5 Years

Carrier	Year Terminated	Reason

Agency Performance

Current Premium:	Current Revenue:
Premium Volume Distribution:	
Commercial Lines:	Amount Financed:
Personal Lines:	Amount Financed:
Do you use E&S carriers? (Yes) (No)	Do you use MGA or Brokers? (Yes) (No)
Please list your primary relationships:	
1.	
2.	
3.	
4.	
5.	

Current & Previous Premium Finance Companies Utilized

Company	Year Terminated	Reason

Premium Finance Profile

# of Finance Contracts/Yr	Est. Financed Premiums/Yr	How do You Choose a Financing Partner? Please Rank 1-4 (1 = high, 4 = low)		How Do You Prefer to Receive Notices and Bulletins?
1 - 10 <input type="checkbox"/>	\$0 - 100K <input type="checkbox"/>	Service / Relationship	_____	Fax / E-Mail (circle one)
11 - 25 <input type="checkbox"/>	\$100 - 500K <input type="checkbox"/>	Interest Rates	_____	Commercial Fax #: _____
26 - 50 <input type="checkbox"/>	\$500K - 1M <input type="checkbox"/>	Ease of Use / Technology	_____	Primary E-Mail: _____
51+ <input type="checkbox"/>	\$1M + <input type="checkbox"/>	Term Flexibility	_____	

Technology Profile

Agency Mgmt System	Network Structure	Technology Contacts
AMS Prime: <input type="checkbox"/>	Internet Connectivity: DSL / Dial-Up (circle one)	Primary: _____
AMS Sagitta: <input type="checkbox"/>	# of Remote Offices: _____	E-Mail: _____
AMS 360: <input type="checkbox"/>	Connection Type: Dedicated / VPN / Terminal	Phone: _____
DORIS: <input type="checkbox"/>	Operating System: _____	Fax: _____
Applied Systems: <input type="checkbox"/>		Alternate: _____
TAM / TAM Online: <input type="checkbox"/>	Website	E-Mail: _____
XDTI / Nexure: <input type="checkbox"/>	Web Address: _____	Phone: _____
ebixASP: <input type="checkbox"/>	May we provide a link to your site? <input type="checkbox"/> Yes <input type="checkbox"/> No	Fax: _____

Agent References - Please Provide 3 Other Agents as References

Name	Contact	Phone

I UNDERSTAND THAT, AS A PART OF PREMCO FINANCIAL CORPORATION'S PROCEDURE, A ROUTINE INQUIRY MAY BE MADE WHICH WILL PROVIDE APPLICABLE INFORMATION CONCERNING CHARACTER, GENERAL REPUTATION & PERSONAL CHARACTERISTICS. UPON WRITTEN REQUEST ADDITIONAL INFORMATION AS TO THE NATURE AND SCOPE OF THE REPORT, IF ONE IS MADE, WILL BE PROVIDED.

_____ **Date**

_____ **Agent Principle**

PFS-PFC Use Only

Date Received: _____	Agent ID: _____	Funding Source: <input type="checkbox"/> Agency <input type="checkbox"/> Company
Bank Name: _____	Routing #: _____	Direct Deposits: <input type="checkbox"/> Yes <input type="checkbox"/> No
		Account #: _____