



TWO-MINUTE P&C E&O SURVEY

(Complete the Survey and Fax to: 302-762-4200)

Interested in comprehensive, cost effective Errors and Omissions coverage? Rockwood Programs is an industry leader in Insurance Agents Errors & Omissions Coverage. Let us compete for your business.

We will contact you three months prior to your policy expiration date to quote your E&O Coverage using our network of A rated (or better) Carriers. [New York Agents Form]

Any questions? Call 877-764-4555, or visit www.rockwoodinsurance.com for additional product information.

Section 1 About Your Business

Company _____

Contact Person _____

Address _____

City _____ State _____ Zip _____

Tel (_____) _____ Fax (_____) _____ E-mail _____

Year Established _____ Number of Locations _____ Captive Agent: Yes No

Non Standard business placed _____ % Business placed with carriers rated B+ or lower (AM Best) _____ %

Gross Annual Revenue* \$ _____ Total Premium Volume (approx) \$ _____

Personal Lines _____ % + Commercial Lines _____ % = 100%

Admitted Markets _____ % + Non-Admitted Markets _____ % = 100%

Approximate breakdown of Revenue (by percent):

Agent..... %

MGA/MGU/Wholesale..... %

Broker..... %

Life & Health..... %

Consultant for Fee..... %

Risk Manager for Fee..... %

Other..... %

Total must equal..... 100 %

Section 2 About your Current Policy

Effective Date: _____ Retro Date: _____

Insurance Carrier: _____

Limits: \$ _____ Deductible: \$ _____ Premium: \$ _____

Section 3 About Your Experience

Has any policy been cancelled or non-renewed?..... Yes No

Have you had any E&O claims last 5 years?..... Yes No

* Revenue = Gross commissions (not netted against sub-producer compensation), policy fee income, insurance-related consulting fees.

Please answer all questions on this form and Fax it to: 302-762-4200