

LIFE AGENTS PROFESSIONAL LIABILITY SUPPLEMENTAL APPLICATION FOR PRODUCERS MAKING PROPERTY & CASUALTY PLACEMENTS



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THIS SUPPLEMENTAL FORM IS TO BE COMPLETED BY THOSE APPLICANTS PLACING SPECIALIZING IN THE INCIDENTAL PLACEMENT OF PROPERTY & CASUALTY INSURANCE. PLEASE BE SURE TO ANSWER **ALL** QUESTIONS. FAILURE TO DO SO MAY DELAY PROCESSING OR RESULT IN THE SUBMISSION'S DECLINATION.

A Name of Applicant _____
 dba (If Applicable) _____
 Applicant Address _____
 City _____ State _____ Zip _____

B Date Applicant Licensed _____ Total P&C Gross Premiums Written Last 12 Months \$ _____ Total Gross Annual P&C Commissions Earned Last 12 Months \$ _____

C What is the annual percentage breakdown by line of business of the applicant's P&C annual commission income (all lines)?

PERSONAL LINES	COMMERCIAL LINES
<p>a auto standard _____ %</p> <p>b auto non-standard _____ %</p> <p>c property (dwelling) _____ %</p> <p>d watercraft _____ %</p> <p>e umbrella _____ %</p> <p>f other (describe) _____ %</p>	<p>g commercial auto _____ %</p> <p>h BOP/CGL/package _____ %</p> <p>i umbrella/excess _____ %</p> <p>j property coverage _____ %</p> <p>k crop coverage _____ %</p> <p>l workers compensation _____ %</p> <p>m wet marine _____ %</p> <p>n inland marine _____ %</p> <p>o livestock/mortality _____ %</p> <p>p medical malpractice _____ %</p> <p>q professional liability non-medical _____ %</p> <p>r directors & officers _____ %</p> <p>s aviation _____ %</p> <p>t bonds _____ %</p> <p>u short/long haul trucking _____ %</p> <p>v other (describe) _____ %</p>
TOTAL PERSONAL + COMMERCIAL LINES.....100 %	

D List the top four insurance companies by premium volume with which you place business and show the percentage dollar volume placed with each:

INSURANCE COMPANY	PERCENT VOLUME PLACED	CURRENT BEST RATING
_____	_____ %	_____
_____	_____ %	_____
_____	_____ %	_____
_____	_____ %	_____

E Does the applicant write any business on a non-admitted basis? Yes No

F Does the Applicant possess any underwriting authorities? Yes No

THE APPLICATION MUST BE SIGNED AND DATED BY AN OWNER, OFFICER, OR PARTNER.

Signature _____ Date _____
 Name (print) _____ Title _____