



Agency Appointment Profile

Thank you for your interest in doing business with Minglewood Risk. At Minglewood Risk, we are dedicated to providing our retail agency partners with superior products and services.

To be considered for approval to become a partner with Minglewood Risk please complete this form and return along with the following documents:

- Copy of P&C Licenses for all states you conduct business.
- Copy of current E&O Declarations Page including any named insured endorsements or recent endorsements changing the coverage or limits.
- Completed and signed W-9 form.

Agency Name (Tax filing name for 1099): _____

DBA: _____

FEIN#: _____

Agency Principal Name: _____

Agency Principal Email Address: _____

Agency Physical Address: _____

Agency Mailing Address: _____

Phone Number: _____ Website: _____

Accounting Contact Name: _____ Phone#: _____

Accounting Contact Email: _____

Please note the following terms of agreement:

1. No authority is granted to you (The broker) to bind any business without prior authorization from Minglewood Risk.
2. The broker hereby guarantees to Minglewood Risk the payment in full of all premiums, fees, and taxes for policies placed by the broker under this agreement.
3. The broker agrees to promptly report and transmit to Minglewood Risk all claims or losses reported to the broker.
4. The broker agrees to maintain during this agreement acceptable evidence of errors and omissions coverage with a limit of liability of at least \$1,000,000 each loss. Evidence of this coverage will be forwarded to Minglewood Risk upon request.
5. The broker agrees not to use the name Minglewood Risk in any advertising or other material of a public nature.
6. This agreement will remain in force until terminated. Either party may terminate the agreement without cause by providing the other party with at least thirty (30) days written notice.

Should you have any questions or concerns about this agreement please contact your representative at Minglewood Risk.

Thank you for your interest in partnering with Minglewood Risk.

Signature of agency representative: _____

Printed Name: _____

Title: _____

Date: _____