

Broker/Agency Information Proposal Response Form

Broker/Agency Information

Name:

Address:

Telephone:

Check One: Broker Independent Agent Direct Writer

Licensed in MN: Yes No

Name of Primary Account Executive:

Name of Primary Assistant:

Locations of branch offices/affiliates that would assist in servicing the City of Moorhead:

Number and Names of Minnesota Cities served:

Fees

Describe the method by which the fees and expenses to the broker are calculated and paid by the insurance company. If services are to be paid on a commission basis, please indicate commission structure.

What services would you classify within the fee income and what services would you classify outside the fee income? List your fees for any additional services which may exceed the scope of duties and responsibilities contemplated within the fees.

Describe the agency's Errors and Omissions limits:

Qualifications – Primary Account Executive (attach resume)

Primary Account Executive for this account:

Length of time with Agency/Company:

Length of Career in Insurance or Risk Management:

Professional/Association Designations:

Number of Public Entity Clients	#	Number of Other Clients	#
Property		Property	
Liability		Liability	
Automobile		Automobile	
Workers' Compensation		Workers' Compensation	

Work history includes experience in (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Commercial Underwriting | <input type="checkbox"/> Personal Lines Underwriting |
| <input type="checkbox"/> Commercial Claims | <input type="checkbox"/> Risk Management |
| <input type="checkbox"/> Agency Account Servicing | <input type="checkbox"/> Agency Marketing |

Qualifications – Primary Assistant (attach resume)

Primary Assistant for this account:

Length of time with Agency/Company:

Length of Career in Insurance or Risk Management:

Professional/Association Designations:

Number of Public Entity Clients	#	Number of Other Clients	#
Property		Property	
Liability		Liability	
Automobile		Automobile	
Workers' Compensation		Workers' Compensation	

Work history includes experience in (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Commercial Underwriting | <input type="checkbox"/> Personal Lines Underwriting |
| <input type="checkbox"/> Commercial Claims | <input type="checkbox"/> Risk Management |
| <input type="checkbox"/> Agency Account Servicing | <input type="checkbox"/> Agency Marketing |

Please include resumes of all people that will be involved in this account.

ANY CORPORATE RELATIONSHIP BETWEEN BORKER/AGENT AND INSURER SHALL BE FULLY DIVULGED.

Questions

Provide a brief history of your agency and your agency's overall capabilities. Elaborate on experience with public entities and Minnesota Cities.

Please describe how claims are handled and your role in assisting the City with keeping the cost of premiums and claims down.

What type of services will your agency provide and how do they differentiate your agency from others?

References- Provide three (3) references from present and/or recent clients, two (2) of which must be from public entities. Include name, phone number, email address, and Account Executive.