

AGENCY MANAGEMENT CORPORATION

P. O. Drawer 15989
Baton Rouge, La. 70895
225-293-5900 877-707-5877
Fax: 225-293-0718

AGENCY ANALYSIS

DATE: _____

1. AGENCY NAME _____

STREET ADDRESS _____

MAILING ADDRESS _____

TELEPHONE NO. _____ FAX NO. _____

LICENSE NO. _____ CORPORATION [] INDIVIDUAL []

ESTABLISHED _____ SS# or FEDERAL ID: _____

E & O CARRIER & POLICY NO. . _____

E&O LIMITS _____ EMPLOYER'S ID NO. _____

2. TOTAL NUMBER OF EMPLOYEES, INCLUDING PRODUCERS _____

PERSON WHO HANDLES COMPANY ACCOUNTS _____

3. WHO SHOULD RECEIVE GENERAL CORRESPONDENCE:

4. AGENCY PRINCIPALS:

NAME	POSITION	EMAIL ADDRESS	YRS IN BUSINESS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. KEY EMPLOYEES

NAME	POSITION
_____	_____
_____	_____
_____	_____

AGENCY ANALYSIS

6. TOTAL PREMIUM VOLUME IN AGENCY:

\$ _____ STANDARD \$ _____ E & S

(E & S COMMERCIAL \$ _____ E & S PERSONAL \$ _____)

7. LIST MAJOR STANDARD COMPANIES

YEARS REPRESENTED

_____	_____
_____	_____
_____	_____
_____	_____

8. WHAT E & S MARKETS/BROKERS HAVE YOU USED:

_____	_____
_____	_____

9. WHAT PREMIUM VOLUME MAY WE EXPECT AND BY WHEN? _____

10. ATTACH A RECENT BALANCE SHEET AND PROFIT AND LOSS STATEMENT

Without these documents, we cannot issue a Brokerage Agreement.

SIGNED:

TITLE

ATTACHMENTS:

- **Recent Profit & Loss Statement**
- **Recent Balance Sheet**
- **Copy of Dec Page for current E&O policy**
- **Copy of current license(s) – individual &/or corporation**