PRODUCER INFORMATION FORM (PIF)

DATE (MM/DD/YYYY)

PROVIDE ALL APPLICABLE INFORMATION TO AVOID PROCESSING DELAYS

CARRIER: | NAIC CODE (if known):

1. FORM TYPE

☐ NEW CONTRACT

☐ NEW APPOINTMENT

RESIDENT STATE:

LINE OF AUTHORITY / LINE OF BUSINESS

☐ PROPERTY	☐ ACCIDENT, HEALTH & SICKNESS	☐ LTC
☐ CASUALTY	☐ ANNUITY	☐ SURETY
☐ PERSONAL LINES	☐ VARIABLE LIFE	☐ LIMITED LINES
☐ LIFE	☐ VARIABLE ANNUITY	

IF REQUESTING NON-RESIDENT FL APPOINTMENT, LIST COUNTY(IES) (if known):

☐ ADDITIONAL APPOINTMENT STATE(S):

☐ DEMOGRAPHIC CHANGE

☐ TERMINATION TERMINATION DATE (MM/DD/YYYY): TERMINATION REASON:

2. APPOINTMENT INFORMATION

TYPE OF APPOINTMENT

☐ INDIVIDUAL ☐ AGENCY / FIRM

TYPE OF BUSINESS ENTITY

☐ SOLE PROPRIETOR ☐ CORPORATION ☐ PARTNERSHIP ☐ LLC ☐ LLP

3. FINRA REGISTRATION INFORMATION (if applicable)

FINRA LICENSED / REGISTERED? (Y / N): ☐ SERIES 6 ☐ SERIES 7 ☐ SERIES 63 ☐ SERIES 65 ☐ SERIES 66 ☐

FIRM AFFILIATION: | FIRM CRD #: | INDIVIDUAL CRD #:

4. E&O POLICY INFORMATION (if applicable)

POLICY CARRIER:	EFFECTIVE DATE:	POLICY LIMIT (per claim):
POLICY NUMBER:	EXPIRATION DATE:	AGGREGATE:

5. INDIVIDUAL INFORMATION

FULL LEGAL NAME	PREFIX	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX

CURRENT RESIDENCE ADDRESS (Including County) | BUSINESS MAILING ADDRESS

BIRTH DATE (MM/DD/YYYY)	NPN #	SOCIAL SECURITY #	BUSINESS PHONE (AC, No, Ext)	BUSINESS FAX (AC, No)	BUSINESS E-MAIL ADDRESS

OTHER NAMES USED

PREFIX	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	NAME TYPE (Check One) ALIAS	MAIDEN	PREVIOUS
					☐	☐	☐
					☐	☐	☐

6. ASSIGNMENT OF COMMISSION (if applicable)

☐ AGENCY / FIRM

☐ INDIVIDUAL

AGENCY / FIRM PRODUCER CODE (if known) | WRITING AGENT NUMBER (if known)

7. AGENCY / FIRM

NAME AND ADDRESS

DESIGNATED RESPONSIBLE PRODUCER | NPN # (if applicable)

LICENSING CONTACT:

CONTACT PHONE (A/C, No, Ext):

CONTACT FAX (A/C, No):

MAILING ADDRESS (if different from above)

CONTACT E-MAIL:

AGENCY / FIRM NPN #: | FEIN:

AGENCY / FIRM PRODUCER CODE:

AGENCY / FIRM WEBSITE ADDRESS:

8. GENERAL AGENT (GA) (if applicable)

GENERAL AGENT (GA) NAME AND ADDRESS (if applicable)

CONTACT NAME

CONTACT PHONE (A/C, No, Ext)

CONTACT FAX (A/C, No):

MAILING ADDRESS (if different from above)

CONTACT E-MAIL

FEIN

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9. INDIVIDUAL - BACKGROUND QUESTIONS

FORM UTILIZES REPRINTED ELEMENTS FROM THE NAIC'S UNIFORM LICENSING APPLICATION PROVIDED WITH PERMISSION FROM THE NAIC. www.naic.org

The Applicant must read the following very carefully and answer every question. All written statements submitted by the Applicant must include an original signature. Enter Y for a "YES" response. Enter N for a "NO" response (unless stated otherwise).	**Y / N**
1a. Have you ever been convicted of a misdemeanor, had a judgment withheld or deferred, or are you currently charged with committing a misdemeanor? You may exclude the following misdemeanor convictions or pending misdemeanor charges: traffic citations, driving under the influence (DUI), driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license You may also exclude juvenile adjudications (offenses where you were adjudicated delinquent in a juvenile court)	☐
1b. Have you ever been convicted of a felony, had a judgment withheld or deferred, or are you currently charged with committing a felony? You may exclude juvenile adjudications (offenses where you were adjudicated delinquent in a juvenile court)	☐
If you have a felony conviction involving dishonesty or breach of trust, have you applied for written consent to engage in the business of insurance in your home state as required by 18 USC 1033? (If this question is not applicable, enter N/A)	☐
If so, was consent granted? (Attach copy of 1033 consent approved by home state.) (If this question is not applicable, enter N/A)	☐
1c. Have you ever been convicted of a military offense, had a judgment withheld or deferred, or are you currently charged with committing a military offense?	☐
NOTE: For Questions 1a, 1b and 1c, **"Convicted"** includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere or no contest, or having been given probation, a suspended sentence, or a fine. If you answer "YES" to any of these questions, you must attach to this application: a) a written statement explaining the circumstances of each incident, b) a copy of the charging document, c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.	
2. Have you ever been named or involved as a party in an administrative proceeding, including FINRA sanction or arbitration proceeding regarding any professional or occupational license or registration? "Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation, sanctioned or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license, or registration. "Involved" also means having a license, or registration application denied or the act of withdrawing an application to avoid a denial. INCLUDE any business so named because of your actions in your capacity as an owner, partner, officer or director, or member or manager of a Limited Liability Company. You may EXCLUDE terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee. If you answer "YES", you must attach to this application: a) a written statement identifying the type of license and explaining the circumstances of each incident, b) a copy of the Notice of Hearing or other document that states the charges and allegations, and c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.	☐
3. Has any demand been made or judgment rendered against you or any business in which you are or were an owner, partner, officer or director, or member or manager of a limited liability company, for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding? Do not include personal bankruptcies, unless they involve funds held on behalf of others. If you answer "YES", submit a statement summarizing the details of the indebtedness and arrangements for repayment, and/or type and location of bankruptcy.	☐
4. Have you been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement? If you answer "YES", identify the jurisdiction(s): _____	☐
5. Are you currently a party to, or have you ever been found liable in, any lawsuit, arbitration or mediation proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? If you answer "YES", you must attach to this application: a) a written statement summarizing the details of each incident, b) a copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, or mediation proceedings, and c) a copy of the official documents, which demonstrates the resolution of the charges or any final judgment.	☐
6. Have you or any business in which you are or were an owner, partner, officer or director, or member or manager of a limited liability company, ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct? If you answer "YES", you must attach to this application: a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and b) copies of all relevant documents.	☐
7. Do you have a child support obligation in arrearage? If you answer "YES", a) by how many months are you in arrearage? **# MONTHS:** _____	☐
b) are you currently subject to and in compliance with any repayment agreement?	☐
c) are you the subject of a child support related subpoena / warrant?	☐
(If you answered "YES", provide documentation showing proof of current payments or an approved repayment plan from the appropriate state child support agency.)	

10. BUSINESS ENTITY - BACKGROUND QUESTIONS

FORM UTILIZES REPRINTED ELEMENTS FROM THE NAIC'S UNIFORM LICENSING APPLICATION PROVIDED WITH PERMISSION FROM THE NAIC. www.naic.org

Please read the following very carefully and answer every question. All written statements submitted by the Applicant must include an original signature. Enter Y for a "YES" response. Enter N for a "NO" response (unless stated otherwise).	**Y / N**
1a. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, ever been convicted of a misdemeanor, had a judgment withheld or deferred or is the business entity or any owner, partner, officer or director of the business entity, or member or manager currently charged with, committing a misdemeanor? You may exclude the following misdemeanor convictions or pending misdemeanor charges: traffic citations, driving under the influence (DUI), driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license You may also exclude juvenile adjudications (offenses where you were adjudicated delinquent in juvenile court)	☐
1b. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, ever been convicted of a felony, had a judgment withheld or deferred or is the business entity or any owner, partner, officer or director of the business entity or member or manager of a limited liability company currently charged with, committing a felony? You may exclude juvenile adjudications (offenses where you were adjudicated delinquent in a juvenile court)	☐
If you have a felony conviction involving dishonesty or breach of trust, have you applied for written consent to engage in the business of insurance in your home state as required by 18 USC 1033? (If this question is not applicable, enter N/A)	☐
If so, was consent granted? (Attach copy of 1033 consent approved by home state.) (If this question is not applicable, enter N/A)	☐
1c. Has the business entity or any owner, partner, officer or director of the business entity or member or manager of a limited liability company, ever been convicted of a military offense, had a judgment withheld or deferred, or is the business entity or any owner, partner, officer or director of the business entity or member or manager of a limited liability company, currently charged with committing a military offense? **NOTE:** For Questions 1a, 1b and 1c, **"Convicted"** includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere or no contest, or having been given probation, a suspended sentence, or a fine If you answer "YES" to any of these questions, you must attach to this application: a) a written statement identifying all parties involved (including their percentage of ownership, if any) and explaining the circumstances of each incident, b) a copy of the charging document, c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.	☐
2. Has the business entity or any owner, partner, officer or director of the business entity, or manager or member of a limited liability company, ever been named or involved as a party in an administrative proceeding, including a FINRA sanction or arbitration proceeding regarding any professional or occupational license, or registration? Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation, sanctioned or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license or registration. "Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. You may EXCLUDE terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee. If you answer "YES", you must attach to this application: a) a written statement identifying the type of license, all parties involved (including their percentage of ownership, if any) and explaining the circumstances of each incident, b) a copy of the Notice of Hearing or other document that states the charges and allegations, and c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.	☐
3. Has any demand been made or judgment rendered against the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding? Do not include personal bankruptcies, unless they involve funds held on behalf of others. If you answer "YES", submit a statement summarizing the details of the indebtedness and arrangements for repayment.	☐
4. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, ever been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement? If you answer "YES", identify the jurisdiction(s): _____	☐
5. Is the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, a party to, or ever been found liable in any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? If you answer "YES", you must attach to this application: a) a written statement summarizing the details of each incident, b) a copy of the Petition, Complaint or other document that commenced the lawsuit arbitrations, or mediation proceedings and c) a copy of the official documents which demonstrates the resolution of the charges or any final judgment.	☐
6. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct? If you answer "YES", you must attach to this application: a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and b) copies of all relevant documents.	☐

11. SUPPORTING DOCUMENTS CHECKLIST

THE FOLLOWING DOCUMENTS (WHERE NOTED AND APPLICABLE) MUST ACCOMPANY THE PIF TO AVOID PROCESSING DELAYS OR CONSIDERED DEFICIENT. CHECKLIST:

APPLICABLE DOCUMENTS:	PRODUCT TRAINING CE REQUIREMENTS:
☐ SUPPORTING DOCUMENTS FOR ALL "YES" RESPONSES	☐ LTC (8 hr Initial Partnership Training)
☐ W9	☐ LTC (4 hr Ongoing Training)
☐ ERRORS & OMMISSIONS CERTIFICATE	☐ AML (ANTI MONEY LAUNDERING)
☐ AGENT AGREEMENT	☐ ANNUITY SUITABILITY
☐ AGENCY AGREEMENT	☐ STATE SPECIFIC REQUIREMENTS:
☐ BUSINESS ASSOCIATE AGREEMENT (BAA)	☐ COMPANY SPECIFIC REQUIREMENTS:
☐ COMMISSION AGREEMENT	☐
☐ EFT BANK INSTRUCTION WITH VOIDED CHECK	
☐ ASSIGNMENTS OF COMMISSIONS	
☐	

12. REMARKS

13. SIGNATURE

I acknowledge and agree that this Producer Information Form does not constitute a contract of any kind. I further consent to the disclosure of the Producer Information Form and background information to government or regulatory agencies.

I understand that I am obligated to immediately report any event that changes any of the information, in any manner, which I have provided on this application.

I hereby certify that all of the information herein is accurate and complete. Finally, I acknowledge and agree that my appointment will, in part, be based on this Producer Information Form and background information, and any falsification, misrepresentation or omission of information from this form may result in the withholding or withdrawal of any offer of appointment or the revocation of appointment by the Company whenever discovered.

INDIVIDUAL PRODUCER (if applicable)

I hereby certify that all of the information submitted in this application and attachments are true and complete.

SIGNATURE	FULL LEGAL NAME (Print or Type)	DATE (MM/DD/YYYY)

BUSINESS ENTITY (if applicable)

On behalf of the business entity, the undersigned owner, partner, officer or director of the business entity, or member or manager of a limited liability company, hereby certifies that all of the information submitted in this application and attachments are true and complete.

Must be signed by the Agency or Broker / Dealer's Designated Producer

SIGNATURE	FULL LEGAL NAME (Print or Type)	
TITLE		**DATE (MM/DD/YYYY)**