



Producer Questionnaire
(Please submit typed responses only)

Date of Request: _____

BASIC AGENCY INFORMATION SECTION

Name of Agency: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Broker FEIN: _____

Requestor's Name, Phone & Email: _____
Principals Name, Phone & Email: _____
Marketing Manager's Name, Phone & Email: _____
System Agency Admin's Name, Phone & Email: **(this is the person you would want to handle the training & set up for Program Connect):** _____

Are you an AIG appointed agent? Yes No
If you answer "yes", please provide your AIG producer code: _____
**Please provide copies of Agency Licenses for all States in which you wish to do business*

Do you have a Surplus Lines License? Yes No
If you answer "yes", please provide the name for which it is issued: _____
**Please provide copies of Agency SURPLUS LINES Licenses for all States in which you are able to file Surplus Lines Taxes*

Is your agency a wholesaler or retailer? **Retailer** **Wholesaler** (select only one)

Please indicate your agency size in terms of total premium volume:
0-5 Million _____ 25- 50 Million _____
5-25 Million _____ 50 Million + _____

How many years has your operation been in business? _____

FUTURE PROGRAM/PRODUCT DEVELOPMENT SECTION

Does your agency specialize in Class or Line of business? Yes No
Do you have an existing "program" relationship on this business? Yes No
Would you be interested in rounding out or reviewing this program? Yes No
Do you have a book(s) of business within your agency which are homogeneous or represent a specific market segment and account for \$250,000 in premium for which you would be interest in developing a product or program.? Yes No
Please list or name these classes/programs and contact your AIRISK Middle Market Program Manager.

INTERNAL USE ONLY

Add Producer to ProgramConnect: Yes No
Given Producer User Passwords: Yes No
Give Producer Administrator Password: Yes No
Add Producer to Launch List: Yes No
Code Producer Premium to MMPM Branch _____



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Please note the agencies estimated existing premium volume by program below:

	\$0- \$50K	\$50K- \$250K	\$250K- \$500K	\$500K- \$1,000,000	\$1,000,000 +
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Architects & Engineers E&O:

Amateur Sports (Team/Leagues):

Commercial Auto:

Construction

Trade Contractors:

General Contractors:

Commercial & Other Contractors:

Railroad Protective Liability:

Check this box , and note all premium in Commercial & Other if breakdown unavailable

Education Related

Private Schools (K-12):

Colleges & Universities:

Charter Schools:

Check this box , and note all premium in Private Schools if breakdown unavailable

Employment Related Practices:

Errors & Omissions – Professional Liability

Home Inspectors:

Insurance Agents & Brokers:

Real Estate Agents & Brokers:

Travel Agents/Tour Operators:

Miscellaneous Classes:

Check this box , and note all premium in Miscellaneous if breakdown unavailable

Health Care Related

Misc. Facilities (under 50K):

Hospitals & other (over 50K):

All Other Healthcare:

Check this box , and note all premium in All Other if breakdown unavailable

Human Services

Adoption & Foster Care Services:

Residential Facilities:

All Other Social Services:

Check this box , and note all premium in All Other if breakdown unavailable

Hospitality & Entertainment

Liquor Liability (mono-line):

Special Events Liability:

Special Events Liquor Liability:

Real Estate (Lessors Risk Only)

Personal Lines:

Property (mono-line):

**Please email your completed questionnaire back to your AIRISK contact or
 AIRisk2@aig.com, THANKS!!!**