

Agency Name: _____ Years in Business: _____

Agency DBA (if applicable): _____ # of Locations: _____

Mailing Address: _____

Physical Address: _____

Agency Phone #: _____ Fax #: _____

Website: _____ Agency FEIN: _____

Contact Name: _____ Contact Email: _____

Type of Ownership: Sole Proprietor Partnership Corporation LLC

Agency License Name: _____ License #: _____

E&O Coverage Limit: _____ E&O Deductible: _____ E&O Expiration: _____

Hours of Operation: _____ Business Entity NPN: _____ Lexis Nexus Node: _____

Additional Location Address [1]: _____

Phone #: _____ Contact: _____ Contact Email: _____

Additional Location Address [2]: _____

Phone #: _____ Contact: _____ Contact Email: _____

Principal Name: _____ DOB: _____

Cell #: _____ SSN: _____ TXDL: _____

Email Address: _____

How did you hear about Breckenridge General Agency? Comp rater Industry event Facebook BreckGen Rep

LinkedIn Twitter Other _____

Is your agency present on any of the following social media sites? Facebook LinkedIn Instagram Twitter

What comparative rater does your agency use? ITC/Turbo rater QuickQuote EZLink None

What agency management system do you use? _____ Source of Advertisement: _____

List any industry organization affiliations: _____

