

# COMMERCIAL AGENCY APPLICATION FORM

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## COMPANY DETAILS

1. Full Company Name Including All Trading Titles

2. Full Postal Address And Post Code  
(Please Include Any Branch Offices On The Information Sheet Attached)

3. Contact Details

Telephone:

Fax:

Email:

Website:

4. Date Business Established

5. Type Of Organisation

Public Limited

Limited

Partnership

Sole Trader

6. Company Registration Number

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7) Name And Address, Age And Insurance Experience Of All Directors/Partners

	Name And Address	Age	Experience
1			
2			
3			
4			

8) Has Any Director, Partner Or Executive Ever Been Declared Bankrupt Or Been Compounded By Creditors?

Yes  No  If Yes Please Provide Details In The Attached Information Sheet

9) Has Any Syndicate, Insurance Company Or Lloyds Broker Ever Cancelled Or Refused Your Agency?

Yes  No  If Yes Please Provide Details In The Attached Information Sheet

10) Is The Company Associated With Any Other Firm Of Insurance Brokers, Intermediaries Or Financial Advisers?

Yes  No  If Yes Please Provide Details In The Attached Information Sheet

11) Is The Company Associated With, Owned Or Controlled By Any Other Company Not Connected With The Insurance Industry?

Yes  No  If Yes Please Provide Details In The Attached Information Sheet

12) When Is Your Financial Year End

13) What Was Your Brokerage Income Last Financial Year

14) What Is Your Estimated Brokerage Income Current Financial Year

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15) Number Of Staff

Full Time:

Part Time:

16) Name And Address Of Bankers

17) Name And Address Of Accountants

18) Name, & Contact Details Of Accounts Person Within Your Organisation

19) Fca Firm Reference Number

20) Please Give Details If You Are A Registered Member Of Any Governing Body &/Or Trade Association?

21) Please Provide Details Of Your Professional Indemnity Cover

Insurer:

Limit Of Indemnity:

Excess Applicable:

Renewal Date:

22) Does The Firm Purchase Fidelity Cover?

23) Does The Firm Purchase Directors And Officers Insurance?

Yes  No

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24) Do You Hold Client Money In Separate Non-Statutory / Statutory Bank Accounts?

Yes  No

If Yes Please Confirm Type Of Bank Account Used:    Non-Statutory Trust                     Statutory Trust

If No Please Confirm Type Of Bank Account Used:    Company Trust                     Biba Trust

25) How Long Has The Company Dealt With The London Market?

26) Please Confirm Your 5 Largest Accounts With Whom You Place Business

1

2

3

4

5

27) Which Classes Of Business Does The Company Place?

28) What Binding Authorities Do You Currently Operate?

29) Who Are Your Main Competitors?

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30) Do You Obtain Your Business Via Sub-Brokers Or Direct?

31) What Lloyd's / London Brokers Do You Use?

## Additional Information

Question	Details

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Question	Details

I/ We warrant that the information given by Me / Us is true, complete and accurate in all respects. I / We undertake to advise Direct Insurance London Market immediately of any alterations to the information disclosed in this application.

I/ We authorise Direct Insurance London Market to make any enquiries that are deemed necessary in connection with this application.

This application has been completed by: -

Signed:  Date:

Name:  Position In Company:

As a valued customer we don't want you to miss out and will send you the latest exclusive insurance products and newsletters via email unless you tick the box below.

Please note that if you currently receive our messages, ticking the box will remove you from our newsletter.

no - i don't want to receive the latest insurance products offered or newsletter.

no - don't share my details with carefully selected companies outside diua for marketing programmes.

By submitting your details you consent to their use in accordance with your preferences indicated above and our privacy policy.