



Hamond & Co., Inc.
 Hamond Safety Management LLC
 Hamond Associates LLC

1983 Marcus Avenue
 Suite C102
 P.O. Box 3408
 Lake Success, NY 11042-0408

Prospective Broker Questionnaire:

516.488.2800
 800.285.2258
 FAX 516.488.2167

Name: _____

Address: _____

- How many years have you been in business? _____
- When did you first receive your insurance license? _____
- What states are you licensed to do business? _____
- How many people are licensed who produce business? _____
- What lines of business do you write? _____
- What is the volume of your book of business? \$ _____
- What is the size of your contractors book business? \$ _____
- Which other carriers/wholesalers do you do business with?

- Who is your current E&O carrier and what are the coverage limits? _____
- ✓ Has your Agency/Brokerage ever had a license denied, revoked, suspended, cancelled or non-renewed by any State? _____ Yes _____ No
- ✓ Is your Agency/Brokerage indebted to any insurance company, general agent, manager or broker? _____ Yes _____ No
- ✓ Has your Agency/Brokerage filed for, or been discharged from, any bankruptcy, insolvency, or assignment for the benefit of creditors with a filing or discharge date, whichever is later, within the last five years? _____ Yes _____ No
- ✓ Has your Agency/Brokerage ever been disciplined, fined, or censured by a state insurance department or any regulatory body or court? _____ Yes _____ No
- ✓ Is your Agency/Brokerage now the subject of any complaint, investigation, or proceeding that could result in a "Yes" answer to any of the previous questions? _____ Yes _____ No

Signature _____ Date: _____

Please complete and return signed to: Ryu@hamondgroup.com or by fax to 516-488-2167