



Seacoast Brokers, LLC - Agency Information Form

Complete all fields & Email to AgencyServices@SeacoastBrokers.com
Any missing fields or forms will result in a processing delay.

AGENCY DETAIL

Agency Legal Name _____

dba _____

Mailing Address _____

City _____ State _____ Zip _____

Location Address (if different than mailing) _____

City _____ State _____ Zip _____

County _____

Phone _____ Fax _____

Legal Status: Corporation ___ Individual ___ Partnership ___ Other Type _____

FEIN/Social Security # _____ W-9 attached ___ Year Started _____

Personal Lines/HO _____% / _____% Commercial Lines _____%

AmWINS Agency: Yes ___ No ___

How did you hear about Seacoast Brokers? Seacoast Rep ___ AmWINS ___ Other _____

Employees: #Administrative _____ #Agents _____ #CSR'S _____

List 3 Admitted Markets

1 _____

2 _____

3 _____

List 3 Surplus Lines Markets

1 _____

2 _____

3 _____

AGENCY CONTACTS:

Website Address _____

Principal _____ Email _____

CSR _____ Email _____

AGENCY CONTACTS continued:

Accountant _____ Email _____

Personal Lines Mgr _____ Email _____

Claims Mgr _____ Email _____

Agency Document Delivery Email _____

AGENTS

Name _____ License # _____ Email _____

Name _____ License # _____ Email _____

Name _____ License # _____ Email _____

Name _____ License # _____ Email _____

- Provide at least 1 Agent Info for initial setup
- Include copy of current E & O Dec page
- Include a copy of completed W-9
- Include a copy completed Electronic Commission Form
- Additional Locations? Must complete separate form per location.

ACKNOWLEDGEMENT - Please read and initial the below items:

___ I agree to maintain an Error & Omissions policy - \$1,000,000 minimum limit to be updated annually.

___ I agree to maintain a producer license in the licensing state and will adhere to the laws and responsibilities of that state.

___ I agree to maintain signed copies of application and diligent effort &/or state forms, will keep complete accurate records and accounts of all transactions. Seacoast Brokers, LLC reserves the right to request files when necessary.

___ I agree to notify Seacoast Brokers, LLC when an employee has been terminated so the agent's website access can be inactivated.

___ I agree that we do not have the authority to appoint other agents or subagents outside of the agency staff.

___ I agree that the login information for the Seacoast Brokers, LLC website is for the sole purpose of submitting business to Seacoast Brokers, LLC and will not be provided to any third parties.

___ I acknowledge that I and the agency are properly licensed as an insurance agent / agency and have all necessary licenses required to do business.

Principal Signature

Date

Electronic Commission Form Required

Agency Legal Name _____

Mailing Address _____

City _____ State _____ Zip _____

Accounting Contact _____

Accounting E-Mail/Phone _____

I hereby authorize Seacoast Brokers LLC to initiate credit entries to this checking or savings account indicated below and the bank/financial institution named below to credit such entries to this account.

Name of Bank/Financial Institution _____

Address _____

City _____ State _____ Zip _____

Please attach voided check or deposit ticket from the account to be credited.

Transit/ABA Number of Bank/Financial Institution: _____

Account Number at Bank/Financial Institution: _____

Type of Account: _____ Checking _____ Savings

Signature _____

Date _____

This authorization will remain in effect until I advise Seacoast Brokers in writing to change my election.

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.	See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p>2 Business name/disregarded entity name, if different from above</p> <hr/> <p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
		<p>5 Address (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p>6 City, state, and ZIP code</p> <hr/> <p>7 List account number(s) here (optional)</p> <hr/>	<p>Requester's name and address (optional)</p> <hr/>

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-			-				
or											
Employer identification number											
				-							

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.