

Welcome to The Hartford

New appointment agency information form.

Thank you for your interest in a Property & Casualty appointment from The Hartford. To start the process, please complete this document and return it to us by emailing NewAppointmentTeam@thehartford.com.

General Agency Information			
Agency name:		Principal name:	
Agency street address, city, state, zip code:		Principal phone:	
Agency mailing address, city, state, zip code:		Principal email:	
Agency phone:		Primary contact name (If different from principal):	
Agency email:		Primary contact phone (If different from principal):	
Agency fax:		Sub location primary contact email (If different from principal):	
Agency website URL:		Is the primary contact authorized to sign contracts?	Yes No
Agency tax ID:		Do you want to receive agency loss notifications?	Yes No
Agency ownership type:			
Please select one or more of these options as appropriate:	Black/African American Asian American Asian Pacific American Hispanic American/ Latino/Latina	Native American LGBTQ Female	Person with Disability Veteran Prefer Not to Answer

Prior Appointment With The Hartford

Has your agency ever applied for appointment or been appointed by The Hartford?

Yes

No

If yes:

When?

Does your agency currently have premium placed with The Hartford through another agency, broker or aggregator?

Yes

No

If yes, what's the total written premium with them?

Why are you looking to leave them?

How many years has your agency been in business?

Employee Information

Do you conduct background checks on your employees?

Yes

No

If yes, how often?

Number of all licensed employees (e.g.,: producers, account executives and CSRs):

Agency Production

What's your agency's total written premium?

% of premium for:

Commercial Lines:

Personal Lines:

Commercial Lines Insurance

Please list your top 3 Commercial Lines carriers by total written premium:

1.

\$

2.

\$

3.

\$

New monthly quote flow volume:

Issue rate:

What are your top 3 industries that you prospect/target and the total written premium associated with each industry?

1.

\$

2.

\$

3.

\$

Please place the total written premium of your top three Commercial Lines book (i.e., General Liability, Property & General Liability, Workers' Compensation, Auto, etc.)

1.

\$

2.

\$

3.

\$

Global Specialty Insurance

Premium volume of monoline Professional liability (coverage that would be written standalone and not included in a package):

\$							
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Percentage of monoline business by:

Cyber	%	Miscellaneous	%	Other	%
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Percentage of monoline Professional E&O business placed on a direct basis vs through a wholesale broker:

	%
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Top three carriers for monoline Professional E&O business:

- 1.
- 2.
- 3.

Certification

By my signature below, I certify that the information provided herein is complete and accurate. If an appointment is offered to me and my agency, I understand that a background check may be conducted on me and all staff members in my employ as part of the appointment process.

I confirm that the production statement, carrier financial and loss statements that accompany this application are only for my agency and that these reports completely and accurately represent my agency's production for the most recent three calendar years.

Signature:		Date:	
Print name:		Title:	

Access to The Hartford's Electronic Business Center (EBC) and Agency Education

The Electronic Business Center (EBC) is The Hartford's Agent website for:

New Business quoting and issuance | Servicing policies | Claim and Billing information Forms and Marketing material | Reference and Training material

Please identify an EBC administrator. This person will be responsible for registering new users, applying user permissions, and maintaining records.

The Hartford's Agency Education & Consulting Team will provide training on Hartford systems and products. Please identify a contact for Agency Education to schedule training:

EBC Administrator Name		Training Contact Name	
EBC Administrator Name		Training Contact Name	
EBC Administrator Name		Training Contact Name	
What Agency Management System do you use?		Do you want Agency Download?	Yes No

Agency Management System

If you use an Agency Management System (AMS) and wish to enroll in our Download Services, please complete this section.

Agency Management System:

IVANS "Y" Account:	Yes	No, looking to set one up
If Yes: IVANS "Y" Account:		User ID:

Vendor: Click here to enter text.	System: Click here to enter text.	Version (required): Click here to enter text.
Download type requested (Daily download will be set up.)		
For Commercial Insurance: Setup option for Applied only	BOP	Package
Monthly Commission Statement:	Yes	No

For questions about Agency Management System, call Agency Interface Services (AIS) at 877-322-4833, Monday-Friday, 8:00 a.m. – 8:00 p.m. ET.

Next Steps after you have received your producer codes:

1. Call your management system vendor to let them know you are going to download with The Hartford.
2. Input codes – NAIC codes **and** Company-specific Coverage codes – into your agency management system if your vendor requires it. These can be accessed on the eBusiness Center (EBC®), or accessed from the Automation Solutions page in the Quick Links box on your EBC Home (For assistance with entering codes in your system, please contact your vendor).

For additional download offerings, please have your EBC System Administrator access the AMS dashboard on the EBC

Licensed Producers

Name and Email		Name and Email	
Name and Email		Name and Email	
Name and Email		Name and Email	
Name and Email		Name and Email	

Checklist of Requirements Before Submitting

Did you complete this form in its entirety? Also be sure to attach the following items to the email after you click Submit.

- Agency Resident License Copy (Resident and Non-Resident) and Assumed Name Certificate, if applicable
- *Errors and Omissions Dec Page (\$1M minimum)
- Please prepare a pipeline of accounts to review with your New Appointment Recruiter or Small Business Sales Representative
- Principal Data Form
- FCRA Consent Form

Submit

Click the submit form button and follow the instructions based on the email type you use.

Note: You will receive the option of local email such as Outlook or web-based such as Gmail or Yahoo

1. If using a local email such as Outlook, a message will open with this form attached, simply attach the other required documents listed above and click send.
2. If you use a web-based email, you will have the option to save this form to your computer. Once saved, attach it along with the other required documents and send to NewAppointmentTeam@thehartford.com

For more information, contact your recruiter.

