

E&O EASY ESTIMATE Questionnaire

Name insured: _____

Physical address: _____

Website: _____

Contact name & position: _____

Phone: _____ Email: _____

Are you currently a contracted Utica National P&C agent? _____

Individual completing form and position: _____

Associations you are a member of: _____ Date established with current ownership: _____

Is 50% or more of your premium volume crop insurance? _____ if yes provide % _____

Is more than 25% of your business surety bonds, long haul trucking, aviation, wet marine or professional liability? _____

If yes, provide % _____

Have you had any E&O claims/incidents over \$500 in the last three years? _____ If Yes, how many: _____

Percentage of total agency commissions by line: Personal Lines _____% + Commercial Lines _____% + Life & Health _____%=100%

Percentage of non-standard/assigned risk placed by line: Personal Lines _____% Commercial Lines _____%

Total annual (new & renewal) property & casualty premium volume: \$ _____

Staff count (include owners and principals): Full-time (over 20 hours): # _____ Part-time (20 hours or less): # _____

Percentage of your agency's property & casualty premium volume placed: _____

Direct with carriers (as agent/broker): _____% Through any other 3rd party (e.g., wholesaler, surplus lines broker, MGA or other retail agent): _____% As a broker (business placed on behalf of other entities): _____% As an MGA or Program Administrator: _____%

Percentage of your agency's property & casualty premium volume that is received or assumed from the following:

Direct from insureds: _____% Other agents: _____%

Does 60% or more of your staff, including owners, have an insurance designation (CIC, CPCU, AAI, CISRF, LUTCF, CPIA)? _____

Current E&O carrier: _____ Expiration date: _____ Retroactive date: _____

Limits: \$ _____ Claim/\$ _____ Aggregate _____ Current Premium: _____

Deductible: \$ _____ Claim/\$ _____ Aggregate _____ Type: Loss only: _____ Loss & expense: _____

This questionnaire is for **premium indication only** and is **NOT an offer of coverage NOR is it bindable**. If premium indication is acceptable, please complete a Utica National application to submit to underwriting for further consideration.

*Please return completed questionnaire via email to
[Lisa Farnham <lisaf@pianc.net>](mailto:lisaf@pianc.net)*