

Broker Licensing & Appointment Documents Coversheet

Email or fax a copy of this cover sheet to:



PROFESSIONAL GROUP PLANS



All fields are required unless otherwise noted.

Agency Legal Name: _____

DBA (if applicable): _____

Federal Tax ID #: _____

Agency Business Address: _____

Commission Address (if different then above): _____

State & License #: _____

(Provide all state license information where you will be doing business)

Producer (Licensed Agent): _____

Agent's Resident Address: _____

SSN: _____ Birth Date: _____

State & License #: _____

(Provide all state license information where you will be doing business)

County (Florida only): _____

Note (New Mexico): New Mexico has recently updated and changed license numbers, please verify that you are providing the most current issued number.