

ENROLLMENT CHECKLIST

PIA **FLOOD SOLUTIONS** PROGRAM

Please print and complete the following documents:

1. Agency Data Sheet
2. Flood Solutions Enrollment Form
3. Flood Solutions Producer Agreement
4. Rollover Authorization form (when applicable)
5. W-9 Tax Form
6. Copies of Agency and Individual Producer Licenses.

Fax or email all completed documents to:

Art Brickley
Director, Hartford Flood / PIA Program

FAX (860) 683-8750

EMAIL a.brickley@trumbull-services.com

Agency Data Sheet



Date:

APPOINTMENT

PIA FLOOD PROGRAM

To: The Hartford – Licensing Team

From:

STATE OF:

SECTION I - GENERAL INFORMATION

(Completed by Company)

RO:

AGENCY CODE:

(Completed by Agent)

Agency Name:

Address:

Address:

Phone Number:

Contact Name:

SECTION II - COMPANY REPRESENTATION INFORMATION

Check Applicable Company(s)

<input checked="" type="checkbox"/>	Hartford Fire Insurance Company		Hartford Insurance Company of the Midwest
	Hartford Accident & Indemnity Company		Trumbull Insurance Company
	Hartford Casualty Insurance Company		Hartford Insurance Company Illinois
	Hartford Underwriters Insurance Company		Hartford Insurance Company of the Southeast
	Twin City Fire Insurance Company		Hartford Lloyd's Insurance Company

General Lines of Business

Requested:

<input checked="" type="checkbox"/>	Flood (P&C)					
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(check applicable lines)

SECTION III - AGENCY INFORMATION

1 Is Agency to be licensed in this State? Yes No **(If Yes, please attach copy of a current P/C Agent's License for this State).**

SECTION IV - AGENCY PERSONNEL INFORMATION

Agency Personnel Name	Social Sec. #	Date of Birth	**Is agency Personnel Name Currently Licensed in this state?			
Resident Address (Street, City, Zip Code)			<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Agency Personnel Name	Social Sec. #	Date of Birth	**Is agency Personnel Name Currently Licensed in this state?			
Resident Address (Street, City, Zip Code)			<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Agency Personnel Name	Social Sec. #	Date of Birth	**Is agency Personnel Name Currently Licensed in this state?			
Resident Address (Street, City, Zip Code)			<input type="checkbox"/>	Yes	<input type="checkbox"/>	No



The Hartford **Flood Solutions** Insurance Program

WRITE YOUR OWN FLOOD INSURANCE PROGRAM HARTFORD PRODUCER ENROLLMENT FORM

The information requested below is required in order to enroll your agency to sell flood insurance through The Hartford / PIA Flood Program. Please complete and return this form along with the Agency Data Sheet, **Copies of Agency and all Individual Licenses**, Rollover Authorization and W-9 Tax ID Form to the fax number below. You will receive a Producer Code and PIN # that will allow you to access the NFS online system (www.hartfordfloodonline.com) along with the information necessary for you to write flood insurance on behalf of The Hartford. Please keep a copy of this document for your files.

(Please Print or Type)

Agency Name _____

Street Address _____

Mailing Address _____
(If different from above)

Business Phone # _____ Business Fax # _____

(Please include area code)
E-Mail Address _____

Person to contact for policy-issuance questions _____

Commission checks payable to _____

IRS Tax ID No. _____
(Name on commission checks and Tax ID must correspond with your Federal Tax Return.)

Agency/Agent Name _____
(Exactly as it appears on your license.)

Agency/Agent License No. _____

Errors & Omissions Policy _____
(Dates, Limits, and Co.)

PLEASE ATTACH A PHOTOCOPY OF YOUR CURRENT PROPERTY & CASUALTY LICENSE.

If you are submitting an individual producer license, the following information must be completed.

Name _____
Social Security No. _____ Date of Birth _____

Home Address _____

City, County, State, and Zip Code



FLOOD SOLUTIONS PRODUCER AGREEMENT



BETWEEN

LOCATED IN

COUNTY OF (Producer) STATE OF (City/Town)

HEREAFTER REFERRED TO AS "PRODUCER" AND THE HARTFORD FIRE, HEREAFTER REFERRED TO AS THE "COMPANY".

THE FOLLOWING TERMS AND CONDITIONS SHALL APPLY:

I. The Company hereby grants authority to the Producer to solicit and take applications for insurance against loss by flood on dwellings and general property...

II. THE PRODUCER AGREES

- A. To not alter, amend, or waive any of the terms, rates, or conditions applicable to the policy contracts used by the Company.
B. To promptly mail to the Company each application and the total policy premium due for insurance coverage.
C. To promptly and accurately report all claims and claim related activity to the Company.
D. All new and existing business will be processed via the Flood Solutions Program.

III. THE COMPANY AGREES

- A. To compensate the Producer for acts performed under this Agreement with a percentage of premium (gross premium less cancellations and returns) per new policy issued by the Company...
B. To provide administration services to the Producer using The Hartford's third party flood vendor National Flood Services and their staff.
C. To provide direct bill renewal premium notice to the designated payor of the flood insurance policy prior to the expiration date of the policy.
D. To be responsible for collecting renewal premiums billed directly to policyholders by the Company.

IV. GENERAL AGREEMENTS

- A. The Producer shall be liable for timely payment to the Company of all policy premiums for new flood insurance coverages written by the Producer pursuant to this Agreement.
B. This Agreement between the Company and the Producer applies to the Company Flood Insurance Program only and shall remain in full force and effect until terminated by either party by written notice of such termination given by one party to the other.
C. Company, Producer, and General Agent agree to hold each other harmless from any and all acts, errors, and omissions committed on their behalf under this Agreement.
D. This Agreement and any addendum to this Agreement shall constitute the entire Agreement and shall supersede any and all prior Agreements.
E. If upon termination of this Agreement the Agent has promptly accounted for and paid to the Company all premiums and other monies and securities collected or held for or on behalf of the Company...

DATE ON , BY X

FOR (Agency Name)

(Vendor Use Only)

ACCEPTED ON , 20 BY

FOR Producer # 8960 -

The Hartford welcomes your interest in our Roll-over Program. The following guidelines have been established to make the transition from your current Flood Carrier to Hartford as efficient as possible.

1. We require a Flood Insurance Agreement on file for your agency.
2. A signed authorization form along with the policy information (as indicated below) to begin the rollover process.
3. After verifying that all information is accurate, please initial it before sending it to Hartford's Flood Vendor : NFS. If policy is elevation-rated and the elevations do not appear on the Declarations Page, please include a copy of the elevation certificate.
4. If possible, please submit information on **all** policies at once. This allows time for verification and renewal issuance in a timely manner and eliminates monthly follow up. NFS should receive this information to complete billing **60 days prior** to the earliest renewal dates of the policies. In order for NFS to process a Roll-over/Renewal, the current Declarations Page **must be received at NFS at least 45 days prior to its expiration**. If received less than 45 days prior to expiration the only way NFS can process the renewal is if the current Declarations Page is accompanied by cash, credit card authorization (VISA or Master-card), or a certified check. If any changes are made through the previous carrier, a copy of that change should also be sent to us in order to keep our files correct and ready for the renewal notice to be sent.

NFS will process renewal billing based on documents submitted. Please review all declarations pages and policy renewal listings for accuracy. We will contact you by telephone if we need additional information.

Rollover Documentation

New Federal Guidelines require the following information for single family dwellings, 2-4 family buildings, other residential buildings or non-residential buildings:

A copy of the current declarations page, show the LFE and BFE if elevation rated,

OR

A copy of the declarations page and a copy of the elevation certificate if the LFE and BFE are not on the declarations page.

* A copy of the application and application part 2 must be included if all of the rating information does not appear on the declarations page. If there is an enclosure, the enclosure size must be on the application.

For residential condominium association policies:

A copy of the current declarations page showing the LFE and BFE, the current replacement cost of the building, the number of units in the building, two photographs of the building showing the front and the back of the building.

OR

A copy of the application/application part 2, a copy of the elevation certificate, and two photographs of the building

* A copy of the application and application part 2 must be included if all of the rating information does not appear on the declarations page. If there is an enclosure, the enclosure size must be on the application.

For submit for rate buildings:

A current declarations page, a copy of the signed application & application part 2, a copy of the elevation certificate, a signed variance form, the enclosure worksheet (if applicable), a copy of the elevated building determination (if applicable), some clear photos of the building and breakaway walls memo if “V” zone.

NOTE: While a current declarations page is required to establish effective dates, a declarations page from a prior term may be used for elevation data if the LFE and the BFE are contained on the declarations page and the property address on the dec matches the property address being insured.

NOTE: For ALL “V” zone properties (rated with elevation information), we must also have the replacement cost & actual date of construction.

AUTHORIZATION TO PROCESS FLOOD POLICY RENEWALS

The undersigned, having determined to transfer flood insurance policies to

THE HARTFORD

Insurance Company, a "Write Your Own" (WYO) Company, serviced by National Flood Services, Inc. (NFS) authorizes NFS to process and renew all Flood Insurance Policies submitted to NFS through its Rollover Program.

As agent of record for these policies, I _____,
(Agent's Name)

accept responsibility to notify the insured and other interested parties of the change of insurer.

Renewal Processing Start Date* _____
(Month/Day/Year)

***Renewal notices will not be mailed out for policies renewing prior to this date.**

Producer Name or Principal _____

Contact Person for Rollover _____ Ext: _____

Agency Name _____

Agency Address _____

(Authorized Signature)

(Date)

(Print Name and Title)

