

MAPLE LEAF INSURANCE AGENCY, INC. (M.L.I., Inc.)
 6635 HARLOW DR.
 BREMERTON, WA 98312
 PHONE: (360) 479-6364 / FAX: (360) 479-6381
PRODUCER PROFILE

A. COMPANY INFORMATION

1. Name of Firm: _____
2. Principal Address: _____
3. Mailing Address: _____
4. Telephone: _____ Fax: _____
5. Are you a- Corporation: _____ Partnership: _____ Individual: _____
6. Taxpayer ID Number: _____

B. PRINCIPALS AND PERSONNEL

1.

Breakdown of Staff	Number
Principals/Partners, Owners	
Officers, Managers	
Other Employees	
Total Staff	

2. Principals/Officers/Brokers/Contacts

Name	Title/Position	Duties

C. OPERATIONS

1. Do you write business outside of state of domicile: YES: _____ NO: _____
 If yes, please describe which states: _____
2. Does your agency operate as wholesalers, MGA, retailer or combination?
 Retail: ____% Wholesale Brokerage: ____% MGA with binding authority: ____%

D. LEADING COMPANIES REPRESENTED AND APPROXIMATE ANNUAL VOLUME:

E. Please attach evidence of E & O Coverage and copy of Agency License.