



PREFERRED GROUP

PROGRAM INFORMATION QUESTIONNAIRE

CLASS OF BUSINESS:

ADMINISTRATOR:

1. Why should a Carrier write this business?

Is there any: Unique Marketing, Coverage, Legislative and / or Competitive Hook?

2. Who is the Agency / Producer?

3. What is the Marketing Plan for the Subject Business?

- A. Proposed Territory
- B. Agent Selection (How?)
- C. Comments on Competition
- D. Who is writing this business for Producing Agent now?

4. What are the Parameters of the Subject Business?

- A. Premium Estimates for First Three Years. (See Exhibit 1)
- B. Limits Profiles - Property and Liability. (See Exhibit 2)
- C. Total Insured Values by State by County or Zip Code. (See Exhibit 3)
- D. Subject Premium and Loss Data. (See Exhibit 4)
- E. Large Loss Information. (See Exhibit 5)
- F. Commission to Producing Agent?

5. What are Proposed Underwriting Guidelines?

- A. Property: (to include limits & sub limits)
- B. Liability: (to include limits & sub limits)
- C. Exclusions: (classes, situations, territories, etc.)

6. What are Proposed Rating Guidelines?

- A. Property: (by limit, value, and/or deductible)
- B. Liability: (by limit and/or deductible)
- C. Debits and Credits: (conditions allowing and how much)
- D. How will rates be monitored and evaluated?



7. **What are Proposed Policy Forms and/or Endorsements, or Special Filing requirements?**
8. **Is Admitted paper required, or can program be written Non-Admitted?**



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EXHIBIT 1

PREMIUM ESTIMATES

| YEAR | Line of Business | GWP | Line of Business | GWP | Line of Business | GWP |
|------|------------------|-----|------------------|-----|------------------|-----|
| 1st | | | | | | |
| 2nd | | | | | | |
| 3rd | | | | | | |
| 4th | | | | | | |
| 5th | | | | | | |

EXHIBIT 2

LIMITS PROFILE

| Property Limits | # of units | Premium | % |
|-------------------------|------------|---------|------|
| \$0 - \$250,000 | | | |
| \$250,001 - \$500,000 | | | |
| \$500,001 - \$750,000 | | | |
| \$750,001 - \$1,000,000 | | | |
| > \$1,000,000 | | | |
| Total | | | 100% |

| Liability Limits | # of units | Premium | % |
|------------------|------------|---------|------|
| \$50,000 CSL | | | |
| \$100,000 CSL | | | |
| \$300,000 CSL | | | |
| \$500,000 CSL | | | |
| \$1,000,000 CSL | | | |
| Total | | | 100% |



PROGRAM INFORMATION QUESTIONNAIRE

EXHIBIT 4

SUBJECT PREMIUM AND LOSS DATA

LINE OF BUSINESS:

COMPANY:

| YEAR | WRITTEN PREMOIM | EARNED PREMIUM | PAID LOSS | LOSS RESERVE | INCURRED LOSS | LOSS RATIO |
|--------------|--------------------|-------------------|--------------|-----------------|------------------|---------------|
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTAL | | | | | | |



PROGRAM INFORMATION QUESTIONNAIRE

EXHIBIT 5

LARGE LOSS INFORMATION

| DATE OF LOSS | INSURED | CAUSE | LOB | INCURRED AMOUNT | STATUS |
|--------------|---------|-------|-----|-----------------|--------|
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STATUS:O = OPEN; C = CLOSED

(NEED DATA FOR PAST FIVE YEARS)