



offered exclusively through **New Empire Insurance Services**

## CONDOPAK BROKER PROFILE

Thank you for your interest in being appointed as a select CondoPak agent! Although you may already be approved for business with New Empire Insurance Services for other programs, CondoPak is a separate appointment process. Note that CondoPak is only available to retail agents at this time.

**Please complete this application in its entirety. Incomplete applications will not be approved. The applicant must be an agency principal or a person with similar authority.**

### APPLICANT INFORMATION

Agency Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Agency Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Agency Phone: \_\_\_\_\_ Agency Fax: \_\_\_\_\_

Agency Principal(s): \_\_\_\_\_

Years in Business: \_\_\_\_\_

#### Approximate overall agency premium volume:

- < \$1,000,000
- \$1,000,000 - \$5,000,000
- \$5,000,000 - \$10,000,000
- \$10,000,000 - \$25,000,000
- >\$25,000,000

#### Approximate Community Association volume:

- < \$1,000,000
- \$1,000,001 - \$3,000,000
- \$3,000,001 - \$5,000,000
- >\$5,000,000

#### What percentage of the agency's overall volume is Community Association risks?

- <10%
- 10% - 25%
- 25% - 50%
- >50%



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Please list the top four (4) carriers which you place Community Association risks:

1.

2.

3.

4.

In which CondoPak eligible states do you currently place business (check all that apply):

- |                             |                             |                             |                             |                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> AL | <input type="checkbox"/> CT | <input type="checkbox"/> DC | <input type="checkbox"/> DE | <input type="checkbox"/> GA | <input type="checkbox"/> IL | <input type="checkbox"/> IN |
| <input type="checkbox"/> KY | <input type="checkbox"/> MA | <input type="checkbox"/> MD | <input type="checkbox"/> ME | <input type="checkbox"/> MI | <input type="checkbox"/> MS | <input type="checkbox"/> NC |
| <input type="checkbox"/> NH | <input type="checkbox"/> NJ | <input type="checkbox"/> NY | <input type="checkbox"/> OH | <input type="checkbox"/> PA | <input type="checkbox"/> RI | <input type="checkbox"/> SC |
| <input type="checkbox"/> TN | <input type="checkbox"/> VA | <input type="checkbox"/> VT | <input type="checkbox"/> WI | <input type="checkbox"/> WV |                             |                             |

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

If you are not already appointed to place business with New Empire Insurance Services (separate from CondoPak), please attached the following:

- Copies of agency licenses in all states in which you intend to place business
- A copy of the declarations page of the agency's Errors and Omissions policy

**Email your completed Agency Appointment Application along with any required documentation to [condopak@newempiregroup.com](mailto:condopak@newempiregroup.com)**