

## Broker Application Form

Company Name:.....

Address:.....

.....

Web-site address (if applicable):.....

Contact Name:.....

Telephone No. .... Fax. No..... E-mail.....

1. What is your approximate annual commission income?.....
2. How many staff do you employ? Directors:..... Managers:.....Administration:.....
3. Please provide your FSA (Financial Service Authority) authorisation number.....
4. a) Do you have professional indemnity insurance for £250,000 limit of indemnity?.....  
b) Can you confirm that your professional indemnity insurance will remain in place during any period of any agreement with Temple?.....
5. Has your company been involved in any legal disputes with any insurers or clients during the last 3 years? If the answer is yes, please provide full details separately.
6. Please provide approximate numbers for the following:-
  - a) Motor Insurance Clients:.....
  - b) Household Insurance Clients:.....
  - c) Commercial Clients:.....
  - d) Clients with Commercial Legal Expenses Insurance Policies:.....
7. Who is your current main provider of Commercial Legal Expenses?.....
8. Do you have any group or affinity schemes and/or do you specialise in any trade or industry? If yes please provide details:

Signed:..... Position in Company:.....

Dated:.....

**Fax or post to Temple at:  
Portsmouth House, 1 Portsmouth Road, Guildford, Surrey, GU2 4BL  
Facsimile: 01483 300943**