Flood Agency Appointment Form

SELECTIVE INSURANCE SM

Agency Information *This form should be completed for each agency location and returned via DocuSign.*

Date _____

Agency Name *As it appears on your W9*: _____ Ph: _____ Fax: _____ Email: _____

Agency Ownership: _____ **/** Is the Mailing and Physical Address the same? Yes ☐ | No ☐ **|** IIABA Member: Yes☐ No☐ Member ID#: _____

Agency Mailing Address:_____ City: _____ St:_____ Zip:_____

Agency Physical Address:_____ City: _____ St:_____ Zip:_____

Will you be conducting business in any of the following States: DE, FL, HI, IA, KY, LA, MA, MD, TN, WA | *Note, if 'Yes' then producer(s) Social Security Number is Required* ☐ Yes ☐ No

Do you plan on conducting business in the state of Washington or New Mexico: *Note, if 'Yes' then all producers must provide a copy of a Flood CE.* Yes☐ No ☐

In the event you have not taken a flood ce course, please visit www.WebCE.com to take a course and obtain prior to your agency set up.

Please indicate which additional State you currently/plan on writing flood policies in: _____

System Access Information
User Access Set Up

***The administrator will have access to quote, endorse, access police's information, run agency reports, and view commission information. All other roles will only have access to quote, endorse, and access policy information*

User First and Last Name	Role	NPN	Social Security Number	Email ID	Phone Number

Agency is required to have at least one Administrator per agency
If Admin is also a producer, please select Admin/Prod Role and NPN and/or SS will be required
***If you have more than 7 users, please submit required information on a separate page.*

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Banking Information

Direct Deposit for Commissions

Bank Name: _____

Bank Routing/Transit #: _____ Bank Account #: _____

Mandatory Email Address for Notifications: _____

Commission statements can be viewed on online under the "My Commissions" tab for administrators.

ACH Set Up Yes☐ No☐

Bank Name: _____

Bank Routing/Transit #: _____ Bank Account #: _____

ACH Authorization Signature:_____

By registering to utilize ACH, you are authorizing us to electronically withdraw flood insurance premium, directly from your bank account at the time of policy issuance. This feature is optional per policy. Note: A Voided check is required.

Appointment Form completed by: _____

Title:_____

Signature:_____

Date: _____

Required and Supporting Documentation

☐ W9 (Required)

☐ E&O Declaration Page (Required)

☐ Voided Check for Direct Deposit (Required)

☐ Voided Check for ACH Payments (If Applicable)

☐ Flood CE (If Applicable)

Selective Flood Services

Please contact you Territory Manager If your agency is interested in learning more about the following services:

- *New and Rollover Business Incentives*

- *System Training for your Staff*

- *Co-Branded Marketing Materials*

- *CE Classes*

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Flood Agency Policy Download Yes☐ No☐

Flood Agency Commission Download *Note: Policy download is required* Yes☐ No☐

Are you brand new to Downloads: Yes ☐ │ No ☐

Agency Name: _____

Agency Code: _____ Agency Sub Code: _____

Agency Download Contact: _____ E-Mail Address: _____

Agency Management System: _____ Version: _____

IVANS® - Automatic Flood Download Instructions

1) Please complete and return this Agency Download Form.
2) To facilitate accurate updating of your policies when data downloads, your policy number needs to be in the same format as ours.
3) Review the policy numbers in your database to make certain the format matches the policy number on a paper Selective DEC page.
4) If needed the origination address for flood is **PDAFLD000001.**
5) Please load the proper NAIC codes into your agency management system *(see codes below).*

1. SICA - Selective Insurance Co. of America…………………..12572
2. SICS - Selective Insurance Co. of Southeast………………...39926
3. SICNY - Selective Insurance Co. of NewYork……………….13730
4. SINE - Selective Insurance Co. of NewEngland…………….11867

Y- Account: _____ User ID: _____

Would you like an initial download of all your documents? Yes☐ No☐

Agency Download Options

Please take advantage of our flood policy download feature.
We can download your flood policies to the following agency management systems:

Applied TAMS	Agency Accelerator
AMS Sagitta	Stone River
Eclipse	FSC Manager (MI Assistant)
Agency Advantage	Jenesis
Applied Vision 4.0	Mass Insurance Systems
DORIS	NASA-Eclipse
AMS 360	Prime Rate-Policy Profiler
Nexsure	QQ Solutions
InStar	Quickfile
QuickFile	QuickQuote
Prime	QQ Evolution
Epic	Quomation-PowerManager
Agency Pro	Rate Now-RateNow
Agency Systems-Newton	SIS-SEMCI Partner
Vertafore (AMS)	Special Agent
AFW & AFW Online	Terrace-Agent Broker System
AMS360	Xznatek-IMS
Prime 2000	XDimensional Technologies-Nexsure
Sagitta Browser/Online	EZ Lynz
Pathfinder	Ebix
InStar- OrionIRS-AIMS-MARS	ITC-Insurance Systems
Vision	TAMOnline
The Agents Choice (DORIS32)	Hawksoft-CMS
The Agents Choice (DOS)	FILESERVERonline
EBIX ASP	Redsgaw Elite
Infinity	Evolution Agency Management-eVo

Please call 877-348-0552 or email floodlicensing@selective.com and speak with one of our licensing representatives
if you have any questions or concerns regarding your appointment process.
We are here to help you!