

## **New Surplus Lines Licensee Questionnaire**

| Date:   |   |
|---|---|
| Individual's Name:  | Pennsylvania Surplus Lines License No:  |
| Address listed on License:  |   |
|   |   |
| Effective June 4, 2003, Act 147 went into ereciprocity of licensing to all producers including  | ffect in the Commonwealth of Pennsylvania. Pennsylvania offers surplus lines licensees. |
| all surplus lines licensees located in the United Stothe requirements of the Surplus Lines Law a information below and email to Agency Services |   |
| Licensee Email Address:   |   |
| Licensee Telephone Number:  |   |
| Are you affiliated with a corporation or partneYesNo If Yes, fill out the   | rship that has a PSLA Customer ID for your location? e fields below:                    |
| Agency Name:  | Agency Surplus Lines License No:  |
| Agency Address:   | PSLA Customer ID:   |
|   | Agency Telephone Number:  |
| Are you affiliated with a corporation or partne for your location? No   | rship that has a PSLA Customer ID for another location but not e fields below:          |
| Agency Name:  | Agency Surplus Lines License No:  |
| Agency Address:   |   |
| Do you belong to an Agency that does not have   | ve a PSLA Customer ID?  |
| YesNo If Yes, fill out the  |   |
| Agency Name:  | Agency Surplus Lines License No:  |
| Agency Address:   |   |
| Are you a sole proprietor that does not have aYesNo If Yes, fill out the  | PSLA Customer ID?   |
| Individual/DBA Name:  | Surplus Lines License No:   |
| Individual/DBA Address:   |   |
|   |   |

Once PSLA receives this information we will update our records and assign, if necessary, a Customer ID number.