

DATE: \_\_\_\_\_

RE: ***CITY OF SAMPLE, KANSAS  
PROPERTY & LIABILITY INSURANCE  
MARKET ASSIGNMENT REQUEST & BROKER INFORMATION***

**FIRM:** \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

- List up to three governmental entity accounts your firm currently handles. Include contact name, phone number, years of services with that account, est. size of the account (population).
- Insurers your firm would like to be assigned for exclusive use in presenting the City's property & liability insurance program for consideration – in your order of preference. State if accessed direct or brokered and the number of governmental entity accounts with them through the office location submitting this response.

<b><i>CHOICE #</i></b>	<b><i>INSURER</i></b>	<b><i>DIRECT/BROKERED</i></b>	<b><i># OF GOVERNMENT ACCOUNTS</i></b>
<b><i>#1:</i></b>			
<b><i>#2:</i></b>			
<b><i>#3:</i></b>			

- Organizations which your office directly participates regarding governmental risk management.