



AMERICAN PROFESSIONAL AGENCY, INC.
Program Administrator

DATE: _____

RE: ACCOUNT #: _____

UNDERWRITTEN BY _____

Dear Client:

This letter is to clarify a recent inquiry received in our office regarding coverage to be provided for a new employee. In order to respond accurately, we need to have the following information completed for each employee:

1. Employee's name _____

2. Employee's exact date of hire _____

3. Employee's highest degree and field of study _____

4. Are you filing a W-2 form? yes no

5. Are you filing a 1099 form? yes no

6. Is the employee licensed, certified or registered?

Please specify (include title and number)

7. The W2 or 1099 form is being filed by yourself
PC general business corporation partnership
non profit corporation LLC

8. California Residents only:

Is the employee a California State Registered

Psychological Assistant? yes no

Upon receipt of the above requested information we will contact you regarding any and all available professional liability coverage.

Sincerely,

American Professional Agency

EXE-186