



**Del Rio**  
DISCOUNT CORPORATION

**Agency Profile and Authorization to Release Information**

Agency Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Cell \_\_\_\_\_ E-mail \_\_\_\_\_

Resident 2/20 Agent's license number \_\_\_\_\_

Date opened \_\_\_\_\_ other locations? \_\_\_\_\_

**Owners/Officers: (Include all owners)**

Names(s) \_\_\_\_\_ SS Number \_\_\_\_\_ D.O.B. \_\_\_\_\_

Names(s) \_\_\_\_\_ SS Number \_\_\_\_\_ D.O.B. \_\_\_\_\_

Name(s) \_\_\_\_\_ SS Number \_\_\_\_\_ D.O.B. \_\_\_\_\_

**Owner(s) Information**

Owner's home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Drivers license # \_\_\_\_\_



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**Underwriting Information:**

1. Personal Auto% \_\_\_\_\_ 2. Commercial Auto% \_\_\_\_\_  
3. Commercial% \_\_\_\_\_ 4. Homeowner's% \_\_\_\_\_  
5. Other (list) % \_\_\_\_\_

What is your cancellation ratio? \_\_\_\_\_

Surplus Lines Ratio% \_\_\_\_\_ Admitted Carrier Ratio% \_\_\_\_\_

Are you account current with any companies? If so, which ones?

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Does your agency bind any policies thru Truepremium?

- If so, which companies?
1. \_\_\_\_\_
  2. \_\_\_\_\_
  3. \_\_\_\_\_
  4. \_\_\_\_\_
  5. \_\_\_\_\_



**Del Rio**  
**DISCOUNT CORPORATION**

**Auto Carriers**

**Commercial Carriers**

**Homeowners Carriers**

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**ACH**

**Would your agency prefer Del Rio Discount to process your down payment checks as well as cash payments received on our behalf (if approved to do so)?**

**Yes** \_\_\_\_\_

**No** \_\_\_\_\_

**Authorization to Release Information**

I/We hereby authorize Del Rio Discount Corporation to order an *Equifax* credit bureau report on the principle(s) of the agency.

\_\_\_\_\_  
Agency Owner-(Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Licensed Agent's name

\_\_\_\_\_  
Agent License #

**Enclosed:**

**Copy of Agent's E &O Policy /220 License(s) /Voided Agency Check**

January 2011