



Commonwealth
Underwriters Ltd.

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Richmond, VA 23220
www.commund.com
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Fax: 804.213.0429 / 804.359.6994

AGENT/ BROKER AGREEMENT

This agreement is made by COMMONWEALTH UNDERWRITERS, LTD. (COMMONWEALTH) and (AGENT).

In consideration of the mutual promises contained in this agreement, the parties agree as follows:

1. COMMONWEALTH is a licensed Surplus Lines Broker and has agreements with certain insurers to underwrite and bind policies on their behalf or to submit applications for their consideration.
2. AGENT is a licensed Property/Casualty Agent in Virginia or other state in which business is transacted.
3. AGENT may submit business to COMMONWEALTH for consideration. AGENT has no authority to bind any business.
4. AGENT is neither an agent nor a representative of COMMONWEALTH or any of the insurers affiliated with COMMONWEALTH.
5. AGENT has no authority to bind any insurance with, has no authority to alter or waive any policy provision, or extend any policy period, and has no authority to commit COMMONWEALTH or the insurers to any claim.
6. The parties shall indemnify and hold harmless the other and the insurers from and against any and all costs, claims or demands resulting from their errors or omissions.
7. AGENT agrees that there are no flat cancellations.
8. AGENT will pay when due all premiums, fees and any other monies due, less agreed upon commissions, whether or not AGENT has been paid by its insured. AGENT will return to COMMONWEALTH unearned commissions from policies cancelled.
9. AGENT agrees to keep Errors and Omissions Insurance in force while this Agreement is in force.
10. This Agreement is not assignable.
11. This Agreement may be cancelled at any time by either party upon written notice.
12. This Agreement shall be governed by the laws of the Commonwealth of Virginia.

AGREED:
COMMONWEALTH UNDERWRITERS, LTD

BY: _____
Authorized Representative

DATE: _____

AGENCY: (Print) _____

AGENT: (Print) _____

EMAIL: _____

Agent/Agency License No.: _____

Signature: _____
Authorized Representative

DATE: _____

Agency Information

Agency Name:

Mail Address:

Physical Address:

Phone:

Website:

FAX:

Key Contact for Accounting:

Name:

Email:

Key Contacts for Marketing and Underwriting Bulletins:

Name:

Email:

Name:

Email

Name:

Email:

Name:

Email:

Name:

Email:

Name:

Email: