

Broker of Record Letter

Insurance Company Name :

Address :

**Subject:** Broker's Letter of Authorization **Policy Numbers:**

Term: thru

To Whom It May Concern:

This letter will serve to notify you that as of we have appointed Suburban Insurance Agencies, Inc., located at 16 W 241 Frontage Rd., Burr Ridge, IL 60527, as our exclusive insurance broker with respect to the above coverage. Suburban Insurance Agencies, Inc. is hereby authorized to negotiate directly with any interested insurer regarding changes in existing insurance policies and in changing, increasing or canceling insurance carried under temporary binder or cover note. We understand, however, that they will not share responsibility for any deficiencies in the insurance program to which this letter applies until they have had a reasonable opportunity to make a review and to provide us with their recommendations.

This letter also constitutes your authority to furnish Suburban Insurance Agencies, Inc. representatives with all the information they may request as it pertains to our insurance contracts, rates, rating schedules, survey, reserves, retention and all other data they wish to obtain.

Sincerely,

Dated / /