

NORTH SEA INSURANCE COMPANY®

370 WEST PARK AVENUE
PO BOX 9007
LONG BEACH, NY 11561-9007

PHONE: 516-825-2800
FAX: 516-825-1947
E-MAIL: RFB@NORTH-SEA-INS.COM
WEBSITE: WWW.NORTH-SEA-INS.COM

Producer Profile Confidential Information

Agency Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____
(if different)

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail: _____ Federal Tax I. D.: _____

Corporation Individual Partnership Other (specify): _____
Agency is primarily: Retail Wholesale Combination

Names of Key Contacts and Responsibilities:

Name Position/Title/Responsibilities

Top Five Companies Represented or General Agency Relationships:

| Company Name or General Agent | Year Appointed | Comm'l Lines Annual Written Premium | Average 3 Year Loss Ratio |
|-------------------------------|----------------|-------------------------------------|---------------------------|
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| | | | |
| | | | |

Accounting Contact: _____

Attach Errors & Omissions Declarations Page (minimum limits required \$1,000,000)

Attach Broker (BR) License for NY, NJ & PA (each state you plan to write business in)