EVIDENCE OF GOOD FAITH EFFORT TO PLACE

Surplus Line Association of Utah
6711 South 1300 East
Salt Lake City, Utah 84121
(801) 944-0114

This form is to be used to document the efforts made by the surplus line producer (and/or producing agent) to place the insurance coverage concerned with an admitted insurer before approaching the surplus lines insurer.

Policy No. _____ Name of Insured_____

List the admitted insurers contacted:

Name of Insurer Name of Underwriter Phone#

1. _____

Reason for declining: _____

_____

2. _____

Reason for declining: _____

_____

3. _____

Reason for declining: _____

_____

4. _____

Reason for declining: _____

_____

If any additional insurers were contacted, attach an additional sheet.

Provide any further explanation about the insured and your effort to place the insurance with an admitted insurer which would help support the need to place the policy in with a surplus lines insurer. Explain why you consider this to be reasonable evidence of a good faith effort to place the coverage with an admitted insurer. Attach additional sheets if necessary.

_____

_____

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_____ _____

signature – producing agent signature – surplus line producer