

As a benefit of membership, MAIA's Number One Insurance Agency provides access to specialty markets for your Massachusetts insureds, with competitive commissions, no volume commitments and experienced Program Managers ready to help you every step of the way.

To complete sign-up, return all the following:

- ✓ Signed contract
- ✓ Copy of your agency's Massachusetts producer's license (matching agreement)
- ✓ Copy of your agency's Error & Omissions coverage
- ✓ W -9
- ✓ Completed Direct Deposit Form to help expedite the payment of commissions

Completed agreement with all required above documents should be returned to Judy Carlson via secured email at jcarlson@massagent.com, Number One's secure portal - [click here](#) to upload documents or by fax to 508-634-2930.

We look forward to helping place business for your clients in the following markets:

- Builder's Risk & Ground Up Construction ***NEW***
- Business Owner Policy ***NEW***
- Cyber Insurance ***NEW***
- Employment Practices Liability Insurance (EPLI)
- Hospitality - Liquor Liability, GL, CP & Excess
- Flood Concierge - NFIP, Private & Excess
- Flood Insurance Markets Direct* - NFIP & Private
*Separate Agreement Required
- Lawyers' Professional Liability
- Stand-Alone, Private MA PFML (Paid Family Medical Leave)
- Real Estate Professional Liability ***NEW***
- RLI's Home Business Policy
- RLI's Personal Umbrella
- Toys/Specialty Vehicles (Motorcycles, Classic Cars, Snowmobile, Off-Road Vehicles & Watercraft)
- Vacant Property & Land ***NEW***
- Workers' Compensation

What we can do for you!

Coverage for your Clients

All Lines Products

- [Builders Renovation & Ground Up Construction](#)
- [Flood Concierge](#): NFIP, Private & Excess
- [Vacant Property & Land](#)

Personal Lines Products

- [Personal Umbrella](#)
- [Toys/Specialty Vehicles](#): Motorcycle, Boats, RVs, etc.

Commercial Lines Products

- [Business Owner & Hospitality Markets](#): BOP, Mono-line Liquor, Package Policies, Excess & Temporary Events
- [Cyber](#)
- [Employment Practices Liability Insurance \(EPLI\)](#)
- [Home Business Insurance](#)
- [MA PFML](#)
- Professional Liability: [Lawyers](#) & [Real Estate Industry](#)
- [Workers' Compensation](#)
- [The Big Umbrella](#) – CL + PL Coverage for business owners, combined!

Coverage for your Agency

- [Agents' E&O](#)
- [Cyber](#)
- [EPLI](#)
- [Commercial Umbrella](#)
- [EVR Permit Surety Bond](#)
- [Retirement Services](#) (401ks and IRAs)
- [Benefits](#): Health/Dental/Vision, STD, LTD, and Life



MAIA Members belong to our National Association IIABA giving you Exclusive Access to [Big "I" Alliance Blue](#), formally Big "I" Markets. The online platform connects Members with multiple Personal and Commercial Lines Markets!

Commercial products: Habitational / Small Commercial / Small Contractors and more!

Personal products: Affluent Home / Non-standard Homeowners, Renters, Condo, Rental Dwellings, and more!

Register online at [Bigimarkets.com](#) and start growing your business today.

To learn more, go to www.massagent.com and place your cursor over NUMBER ONE AGENCY to get immediate access to our dropdown list for each program's details, applications, and more!



Contact us:

massagent.com | 91 Cedar Street, Milford, MA 01757 | (508) 634-2900



Product Commission Schedule



All Lines			
Coverage	Carrier	New Business	Renewal Business
Builder's Renovation & Ground Up Construction	All	13%	13%
Flood Concierge - NFIP, Private & Excess	All	60% of Number One's Commission	60% of Number One's Commission
Vacant Property & Land	All	13%	13%

Personal Lines			
Coverage	Carrier	New Business	Renewal Business
Personal Umbrella	RLI	10%	10%
Toy/Specialty Vehicles			
Motorcycle	Safeco	12%	7%
Motorhomes, Travel Trailers & Classic Cars	Safeco	75% of Number One's Commission	75% of Number One's Commission
Watercraft	Safeco	12%	12%

Commercial Lines			
Coverage	Carrier	New Business	Renewal Business
Business Owner's Policy	The Hartford & HMIC	60% of Number One's Commission	60% of Number One's Commission
Cyber	All	60% of Number One's Commission	60% of Number One's Commission
Employment Practices Liability	All	60% of Number One's Commission	60% of Number One's Commission
Home Business Insurance	RLI	12%	12%
Hospitality			
Liquor Preferred, GL & Property	HMIC	15%	10%
Liquor Modified	HMIC	10%	8%
Liquor Standard	HMIC	10%	7%
Liquor Forced Tier (JUA)	HMIC/JUA	7%	6%
Temporary Event Policy	HMIC	7%	7%
Excess	HMIC	11%	7.5%
Lawyer's Professional Liability	Swiss Re	9%	9%
	Alternative Markets	Listed w/ quote	Listed w/ quote
Lawyer's Professional Liability ERP	Swiss Re	4%	4%
	Alternative Markets	Listed w/ quote	Listed w/ quote
MA PFML Private Stand-Alone Plan	ShelterPoint		
Premium of \$0 to \$4,999		15%	15%
Premium of \$5,000 to \$9,999		10%	10%
Premium of \$10,000 to \$49,999		5%	5%
Premium of \$50,000 or more		2%	2%
Real Estate Professional Liability & ERP	All	Listed w/ quote	Listed w/ quote
Workers' Compensation			
	The Hartford *DIA, Exp Constant & Terrorism	75% of Number One's Commission	75% of Number One's Commission
	Norfolk & Dedham *DIA Assessment	8%	7%
*Denotes non-commissionable premium	Alternative Mkts *DIA Assessment, ARAP	Listed w/ quote	Listed w/ quote



Number One Insurance Agency, Inc. Broker's Agreement

This agreement between the Number One Insurance Agency, Inc., a Massachusetts corporation with offices at 91 Cedar Street, Milford, MA 01757, representatives, successors and assigns (and their heirs, if individuals) ("Number One") and ("Broker")

_____ of
(agency name)

(street) (city) (state) (zip)

Witnesseth that: Number One hereby grants authority to the Broker to submit for insurance coverage, risks located in the Licensing State under insurance programs available through Number One and the insurance companies set forth in the attached schedules hereof ("Companies"). This authority is subject to laws of the Licensing State in which such Broker is authorized to write insurance business and to the terms and conditions hereinafter set forth.

It is Hereby Agreed between Number One and the Broker as follows:

1. Broker's Responsibilities

- 1.1 The Broker agrees to maintain membership with the Massachusetts Association of Insurance Agents (MAIA).
 - 1.1.1 If the broker chooses not to maintain membership, The Number One Insurance Agency will continue to service any existing policies of the broker but will not allow any new business to be processed.
- 1.2 The Broker agrees to maintain a MA Producer's insurance license in the Licensing State for property and casualty insurance and to adhere to the laws and responsibilities that apply. A copy of said license shall be submitted with this Agreement. Subsequent renewals of said license will be submitted to Number One in a timely manner.
- 1.3 Shall allow Number One to verify E & O coverage required in section 9.1.3 with the carriers we provide to our members (Westport, Utica, etc.) or will provide Number One with a copy of your policy's declaration or Certificate of Insurance upon renewal yearly.

2. Premium Remittance

- 2.1 It is agreed and understood that for any programs requiring premiums to be collected by the Broker are held in trust and that such premiums are the property of Number One and the Companies, that the Broker has no interest in the premiums collected by him and shall make no deductions there from before paying same to Number One, except for commissions authorized in writing.
- 2.2 Specific Premium remittance instructions are set forth in the attached schedules.
- 2.3 Should the Broker fail to pay Number One or the Companies any premiums when due, including those incurred by audits or interim reports, then the Broker agrees to bear any collection or other expenses, including reasonable attorney fees and costs, expended by Number One or the Companies to enforce collection from the Broker to the extent allowed by law. Interest will be charged on unpaid premiums at a rate of fifteen percent (15%) per annum or the highest rate permitted by law. Any earned premium owed by the Broker to Number One or the Companies will be offset with earned commissions owed to the Broker by Number One or the Companies.
- 2.4 If the Broker has failed to account for and pay to Number One or the Companies immediately upon demand, all premiums for which he may be liable, all records and use and control of expirations shall be vested in Number One and the Broker agrees to execute any documents necessary to formally place the title thereto in Number One. Number One likewise shall have the immediate right thereafter, at its discretion to sell, transfer, assign or otherwise handle and control the business and expirations covered by this contract to satisfy in whole or in part the obligations of the Broker to Number One or the Companies.

3. Commissions

- 3.1 Commission shall be as indicated in the Schedules attached to this Agreement. Commissions may be changed by Number One upon written notice to the Broker.
- 3.2 A return commission calculated at the same rate as the original commission thereon shall be deducted from each return premium including cancellations ordered by Number One.
4. **Binding Authority:** In no event may the Broker bind Number One or any of the Companies on any risk or endorsement thereto.
5. **Expenses:** Number One shall not be responsible for any expenses of the Broker.
6. **Notification of Claims**
The Broker agrees to cooperate fully with Number One and the Companies to facilitate the investigation and adjustment of any claim when requested and in the manner requested by Number One/the Companies and under any such rules and regulations as may be agreed upon from time to time. The Broker shall not appoint an adjuster or attorney to represent Number One or the relevant Insurance Company(ies) set forth in the attached Schedules hereto on any claim without the permission of Number One and the relevant Insurance Company(ies) set forth in the attached Schedules.
7. **Termination**
7.1 This agreement may be terminated upon written notice, in the event there has been violation of either Number One or the Broker's fiduciary responsibility, and /or insolvency, threat of insolvency, fraud, abandonment, willful, gross or negligent misconduct, as it relates to this agreement, including the termination or suspension of either Number One's or the Broker's license.
7.2 This agreement will be continuous and may be terminated by either party at any time by 10 days written notice. In the event of termination, the Broker's records, use and control of expirations shall remain the property of the Broker and shall be left in his possession except as provided under Section 2 hereof.
8. **Ownership of Expirations:** The use and control of expirations, and the records thereof, shall remain in the undisputed possession and ownership of the Broker, except as provided under Section 2 hereof or due to Broker Abandonment and after Number One's attempt and inability to reassign the policy(ies) to another Broker.
9. **Indemnification**
9.1 **The Broker:**
9.1.1 Is not an employee of Number One, but is an independent contractor.
9.1.2 Shall indemnify Number One for any fines or penalties assessed against Number One by governmental authorities arising solely as a result of the actions, inactions or transactions of the Broker or parties affiliated with or under the direction of the Broker. The Broker shall provide immediate repayment to Number One for any liability incurred by reason of the forgoing.
9.1.3 Shall maintain, at its own expense, Errors & Omissions insurance with minimum limits of \$1,000,000 each claim, \$1,000,000 aggregate. In the event the Broker purchases a combined single limit (CSL) policy, the minimum limit shall be \$1,000,000.
9.2 Number One shall indemnify the Broker for any fines or penalties assessed against the Broker or by governmental authorities arising solely as a result of the actions, inactions or transactions of Number One or parties affiliated with or under the direction of Number One. Number One shall provide immediate repayment to the Broker for any liability incurred by reason of the forgoing.
10. **Arbitration Clause:** The following procedure will be followed in the event of a disagreement or dispute involving the interpretation of this agreement or the performance or non-performance of Number One and the Broker:
- 10.1. The Parties will make a good faith effort to establish a meeting for the purpose of settling unresolved disputes.
10.2. If Number One and the Broker are unable to resolve their conflict within 30 days, the controversy will be resolved by arbitration in accordance with the commercial rules adopted by the American Arbitration Association.
10.3. All unresolved disputes with regard to the conditions of this agreement will be decided by a panel of three (3) disinterested arbitrators. The party who desires arbitration will appoint one (1) disinterested arbitrator and will furnish written notice of the appointment to the other party. Within 10 days thereafter, the other party will appoint one (1) arbitrator. The two (2) appointed arbitrators will, within 15 days thereafter, together select a third arbitrator who will be designated as the presiding officer of the panel. If the appointed arbitrators fail or refuse to choose a third arbitrator within 30 days after having been appointed, the third arbitrator will be chosen by the American Arbitration Association.

- 10.4. The decision of a majority of the panel will be binding on Number One and the Broker without right of appeal, and may be enforced by a court having jurisdiction over this Agreement. The determination of the panel must be in writing and bear the signatures of a majority of the arbitrators.
- 10.5. Expenses of arbitration will be shared on an equal basis by Number One and the Broker. Arbitrators shall have the right to select one party for a greater amount of the expenses should it be found that the party did not initially make a good faith effort to resolve the dispute on an informal basis.
11. Compliance of regulation 201CMR17.00: Standards for the Protection of Personal Information of Residents of the Commonwealth.
- 11.1. Each of the parties, including all employees of the "Broker" agree that all personal customer information in any format (paper, electronic, stored on media, etc.) that a party becomes aware of as a result of this Agreement is confidential and proprietary in nature, and that each party is required by law to protect and keep confidential nonpublic personal information obtained from customers, and that said information shall not be divulged by a party to any third parties or used in any manner other than in connection with this agreement.
- 11.2. "Broker" shall not use the personal information other than for the purposes of its business, and shall disclose it only to those employees of the "Broker" with a specific need to know.
- 11.3. Accordingly, each party shall:
- 11.3.1. Establish and maintain appropriate security measures to protect the security and confidentiality of such personal information as outlined by the state regulation and federal regulations.
- 11.3.2. Protect against any anticipated threats or hazards to the security or integrity of customer information.
- 11.3.3. Regularly monitor security plan to protect against unauthorized access to (both physically and electronically maintained information) or use of such information that could result in substantial harm to customers, and review the scope of security measures annually.
- 11.3.4. Otherwise ensure compliance with regulation 201.CMR17.00 as it may be amended, and any regulations promulgated there under.
- 11.4. This agreement will remain in effect until contracted services are no longer needed and the termination of existing contracts has been nonrenewed/cancelled. At the expiration of or termination of this Agreement, the "Agency" and the "Broker" shall mutually agree upon how customer information being retained should be treated, whether the information is to be returned to the "Number One", or remain with the "Broker" or its subsidiaries in a secure environment.
- 11.5. In an effort to ensure compliance with the above provisions, the "Number One" and the "Broker" shall agree to the following, if applicable:
- 11.5.1. The "Broker" and "Number One" agree to provide upon written request any supplemental, regulatory, internal, and/or external audit reports and/or evaluations performed on behalf of the "Broker" that discuss the "Broker" or operations and compliance with information security procedures and practices.
- 11.5.2. "Broker" and "Number One" shall notify the other promptly if any breaches of security occur that may affect customer information and document responsive actions taken and post-incident review of events.

This Agreement supersedes and voids all previous agreements, written or oral, existing between Number One and the Broker for the insurance program subject to this agreement.

Completed by Broker:

Signed: _____
 (Agent Signature) (Agent Printed Name) (Agent Title)

Date: _____ Tax ID#: _____
 (day/month/year)

Email: _____ Phone: _____ Fax: _____

E&O Carrier: _____ Limit: _____ Expiration: _____
 (copy of E&O required)

Completed by Number One Insurance Agency:

Signed:  _____ Nicholas A. Fyntrilakis President & CEO

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		
	2	Business name/disregarded entity name, if different from above.		
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>	
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>		
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)	
	6	City, state, and ZIP code		
	7	List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
				-					
or									
Employer identification number									

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



**AUTHORIZATION FOR
AUTOMATIC (DIRECT) DEPOSIT**



I authorize the **NUMBER ONE INSURANCE AGENCY, INC.** to initiate credit entries and, if necessary, to initiate any debit entries to correct an erroneous credit entry to my account at the DEPOSITORY (identified below), for the purpose of automatically depositing funds to my account. I acknowledge that the origination of these transactions must comply with the provisions of U.S. law.

AGENCY'S NAME: _____

AGENCY'S ADDRESS: _____

AGENCY'S PHONE: _____

AGENCY'S CONTACT NAME: _____

AGENCY'S CONTACT EMAIL: _____

[For Commission Statement & Deposit Confirmation emails]

New Authorization Change to Previous Termination

DEPOSITORY (Bank) NAME: _____

CITY: _____ STATE: _____ ZIP: _____

DEPOSITORY PHONE: _____

ROUTING NUMBER: _____ (Please attach voided check)

ACCOUNT NUMBER: _____ Checking Savings Other: _____

I understand that this authorization replaces any previous authorization and will remain in full force and effect until the NUMBER ONE INSURANCE AGENCY has received written notification from me of its termination in such time and in such manner as to afford the NUMBER ONE INSURANCE AGENCY a reasonable opportunity to act on it.

NAME (print or type): _____

TITLE: _____

(Signature)

(date)