

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 producing agent to place the insurance coverage concerned with an admitted insurer before approaching the surplus lines insurer.

Policy # _____ Name of Insured _____

List the admitted insurers contacted:

Name of Admitted Insurer	Name of Underwriter	Phone or Email
1.		

Reason for declining: _____

Name of Admitted Insurer	Name of Underwriter	Phone or Email
2.		

Reason for declining: _____

Name of Admitted Insurer	Name of Underwriter	Phone or Email
3.		

Reason for declining _____

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.

Signature – Producing Agent