Agency Insurance Company

POLICY INFORMATION DOWNLOAD
AUTHORIZATION AGREEMENT

STEP 1
Provide your agency information:

Agency Name _____

Agency AIC Code(s) _____

Technical Contact _____

Phone _____

Management System _____

Version _____

IVANS "Y" Account # _____

IVANS User ID _____

Destination Address (IBM#) _____

STEP 2
Add Agency Insurance Company to your Management System. You'll need the following codes:

Agency Insurance Company NAIC Number	Agency Insurance Company Origination Code (IBM)
35173	410AICMD

STEP 3
Add the following Company Coverage Codes to your Management System:

Applicable	Code	Description
All States	TRNS	Transport Trailer
Florida Only	AICHL	Liability Hurricane Assessment
Florida Only	AICHP	Physical Hurricane Assessment
AMS Only	OEM	Original Equipment Manufacturers
AMS Only	MEP	Minimum Earned Premium
AMS Only	UMUNP	UM/UIM Property Damage
AMS Only	BIEFM	Bodily Injury Extended Family Member
AMS Only	PDEFM	Property Damage Extended Family Member
AMS Only	SRE	Sound Reproducing Equipment
AMS Only	TORT	PA Tort
AMS Only	SR22F	SR-22 Fee

STEP 4
Sign and date. Fax completed form to: 410-691-9196, Attention: Debbie Adams Customer Service Manager

Authorized Signature _____

Date _____

Print Name _____

Title _____

Internal Use Only

☐ ARS/ECS   ☐ KEY   ☐ ACORN

Date _____