



Producer IVANS Download Request

Please provide the following information so we can enable your agency for downloads to your agency management system via IVANS

Would your agency like to receive downloads? * YES * NO

Producer Name: * _____

Agency Producer Code: * _____

Producer Address: * _____

Contact Name: * _____

Phone: * _____

e-Mail Address: * _____

Producer's IVANS Y-Account: * _____

Producer's IVANS User ID: * _____

Agency Management System: _____

Version: _____

Participant Code (if applicable): _____

Opt out of Initial Downloads

*If opting out of initial downloads, you will not receive data on policies currently in force until a transaction or renewal is processed.

After completed please email to agentaccess@aegisfirst.com