Introducer Application Form

Name/Trading Style

Registered Office

Correspondence Address

Postcode

Telephone Number

Fax Number

Email Address

Web Address

No. of years Business Established

Company Registration Number

Type of Company (i.e. sole trader/partnership/limited company)

Please state type of business activity

Has any Director, Principal or employee:

a) ever been adjudged Bankrupt or subject to any legal action? Yes ☐ No ☐

b) ever been convicted of any criminal offence other than motoring convictions? Yes ☐ No ☐

If YES to any of the above, please state the name of the person and details.

Are you registered with any professional, regulatory or industry governing bodies? Yes ☐ No ☐

If YES, please state (including registration number).

If your application for an Introducer Agreement is accepted, how would you like your commissions paid?

Tick as appropriate

Currency in which you would like your commissions paid:

All in original currency of the policy ☐ All in Sterling ☐ All in Euros ☐ All in US$ ☐

Commission not paid in original currency will be converted at the prevailing rate at time of commission payment

Please complete details below for payment into your bank account.

Bank name

Bank address

Account name

Sort code

Account No.

IBAN No.

Swift ID

I confirm that the above information is correct to the best of my knowledge.

Signature

Date (dd/mm/yyyy)

Name (please print)

Position in Company

HEAD OFFICE
Chanctonfold Barn Chanctonfold Horsham Road
Steyning West Sussex BN44 3AA United Kingdom
T +44 (0) 1903 817970 F +44 (0) 1903 879719
www.alchealth.com www.alctravel.eu
www.prima-iberica.eu

EUROPEAN OFFICE
Centro Plaza Oficina 10
Planta 1 Nueva Andalucia
29660 Marbella Málaga Spain
T +34 952 93 16 09
F +34 952 90 67 30 CIF N0069627H

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