

PROPOSAL REQUEST

One of the advantages of working with Dickerson Insurance Services — we can manage the entire quoting process for you. It's easy to get started.



Dickerson Insurance Services
AN **ALERA GROUP** COMPANY

For more Information call: (800) 457-6116
www.TheBrokersGA.com | License #0M29112



1 BROKER

Name: _____
Agency: _____
Address: _____
City: _____
State: _____ ZIP Code: _____
License #: _____ Covered CA Certified: Y N

Phone: _____ Fax: _____
Email: _____
Insurance Lines: _____
Account Exec: _____

2 GROUP

Company/Group Name: _____
Address: _____
City: _____
State: _____ ZIP Code: _____
Coverage Outside CA?: _____ Virgin Group: Y N
SIC: _____ or Nature of Business: _____

Renewal Date: _____ Effective Date: _____
Current Medical Carrier: _____
Current Premium: \$ _____
Current Dental Carrier: _____
Current Dental Premium: \$ _____
Life Amount: \$ _____

3 COVERAGE

Medical: HMO PPO EPO
 Dental
 Vision
 Life

STD Payroll
 LTD Electronic Enrollment
 ACC ERISA
 AD&D HSA
 CI HRA
 Chiro Self-Funded
 Acupuncture GAP
 Hospitalization MEC/MVP
 Workers' Comp

Employer Contribution: EE _____% DEP _____%

4 SPECIAL INSTRUCTIONS

Mail Email Fax Pick-up

5 SUBMIT COMPLETED FORM & CENSUS

Via email: quotes@dickerson-group.com

Via fax: (323) 805-2905

