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 surplus line producer (and/or producing agent) to place the insurance coverage concerned with an admitted insurer before approaching the surplus lines insurer.

Policy No	Name of Insured	
List the admitted insurers contacted:		
Name of Insurer 1	Name of Underwriter	Phone#
-		
f any additional insurers were contact	ted, attach an additional sheet.	
nsurer which would help support the r	the insured and your effort to place the insurance need to place the policy in with a surplus lines insuidence of a good faith effort to place the coverage cessary.	rer. Explain why
signature – producing agent	signature – surplus	s line producer