

## Commercial Account BOR Check List

### BOP/GL BOR Check List

- Acord Application (GL - Acord 125,126; BOP - Acord 125, 126 & 140)
- Signed BOR Letter on insured's letterhead
- No Mid-Term BOR
- Loss Run (Depends on the risk)

### Commercial Auto BOR Check List

- Acord Application (Acord 125, 127, 137)
- Signed BOR Letter on insured's letterhead
- No Mid-Term BOR
- Loss Run

### Apartment/Lessors Risk BOR Check List

- Acord Application (Acord 125, 126, 140)
- Signed BOR Letter on insured's letterhead
- No Mid-Term BOR
- Loss Run
- Rent Roll List

### Workers Comp BOR Check List

- Acord Application (Acord 130)
- Signed BOR Letter on insured's letterhead
- No Mid-Term BOR
- Loss Run
- Supplemental (Upon Request)

\* All BOR accounts need to submit to be reviewed 20-30 days prior to the renewal date.

**Insured's Official Letter Head**

**With their Name, Address & Phone #**

**Date: Today's Date**

**To: Travelers/Hartford/Liberty Mutual/BHHC/EMPLOYERS/AMTrust/Nationwide**

**Re: Name and address of the account**

**To Whom It May Concern:**

We ask that you recognize (**Name of your agency**) and Agents Resources, Inc., DBA: WIAA Insurance Services located at 11190 Sun Center Drive Suite 100, Rancho Cordova, California 95670 as the Agent/Broker of Record on the following policy/policies:

<b>Policy Number:</b>	<b>Renewal Date:</b>

The change is to be effective upon the renewal date of the policy/policies listed above.

This appointment rescinds all previous appointments and the authority contained herein shall remain in force until canceled by us in writing.

Sincerely,

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Printed or Typed Name of Insured

Date

*(use signed date)*

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Signature of Insured or Signer

Indication of title, owner, or officer