



**Please Complete, Sign and Fax to 1-866-275-1213 or
Email to Taylor@CareerInsuranceAgents.com**

This non-disclosure agreement (Agreement) is between Career Insurance Agents, (CIA) and William Hooks _____ (Prospect). Whereas CIA and Prospect wish to exchange certain information pertaining to the operations and contractual obligations of CIA and its independent contractors, these two parties hereby agree to the following conditions:

1. CIA will provide Prospect with an original copy "Draft" of its standard Agency/Agent contract (contract). In addition, CIA will provide Prospect with additional information, both orally and in writing, as to the operations and benefits of becoming an Independent Contractor with CIA.
2. Prospect agrees not to share this information with any third parties not explicitly approved by CIA and to use reasonable and practical care to protect and maintain possession of the contract and any other materials provided to Prospect by CIA. This applies not only to all original documents, but to all copies that may have been made by or supplied to Prospect.
3. Upon request of CIA, Prospect will return all documents, materials, and notes both originals and copies to CIA within 15 days of the request.
4. In the event of a breach or threatened breach of this Agreement, CIA shall be entitled to preliminary and final injunctions, in addition to any other rights and remedies available to it at law or in equity.
5. The validity and performance of this contract are governed by the laws of the State of Colorado.
6. This Agreement is binding upon the directors, officers, employees and agents of each party and will continue indefinitely, with the obligations of confidentiality surviving the termination of this Agreement.


Career Insurance Agents:

Prospect:

Print Name _____

Print Name William Hooks _____

Signature _____

Signature  _____
B655915948FF479...

Title _____

Title Mr _____

Date _____

Date 6/16/2020 _____

Career Insurance Agents Prospective Agent Questionnaire

***All Information is held in strictest confidence.**

Please complete the information below and either Fax to: 1-866-275-1213 or Email to Taylor@CareerInsuranceAgents.com

How did you hear about CIA:

1. **Contact Information:** **Date:** 6/16/2020
 Name: William Hooks
 Address: 17636 Highway 36
 City: Guy State: TX Zip Code: 77444
 Office PH: 281-242-1266 Cell PH: 409-363-9914 Fax: 281-242-1282
 Preferred Email: Hooks.will@icloud.com

2. **Planned Business Location:** (retail, office space, suite, home based) Retail or office

3. **Tell us about your background:** (Insurance, Financial, Tax Prep., what you did before...)
I've been in insurance at Allstate since 2012. Prior to that I worked in AutoCAD

4. **Describe Your Present Situation:** (Captive or Independent Agency...Motivation for exploring options?)
Currently with Allstate. They're making changes I don't like. I'd also like to have more control

5. **What are Your Most Important Needs:**
Access to carriers. I'm fairly well versed in insurance.

6. **Please describe your typical Customer Profile:** (Preferred PL, Non-Standard PL, or Commercial – what segments...?)
Standard Auto, home and, and umbrella are typical.

7. **What is Your Timeline in Making a Decision:** Depends on the program.

8. **Present Agency Information:**

Written Premium Volume: About \$4MM
PL% vs. CL% Split: 95 personal 5 commercial.
Lead Carrier(s): Allstate

9. **Plans going forward:**

Estimated Premium Year 1, 2, 3: Year 1: \$600k-\$1MM with \$1-\$1.5MM per year new business afterward.
Estimated Commission Income Year 1, 2, 3: No clue
Primary Sales Initiatives:
work hard and do the right thing to protect people from life happening and mistakes.

10. **Additional Information:** e.g., non-completes, previous criminal convictions, carrier terminations, bankruptcy, etc...

NDA with Allstate which won't be a problem. The owner of the agency knows about, and supports, me looking at starting my own office.