



**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 Storm Bailey (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 Storm Bailey _____

Signature _____

Signature  _____
1EAD8D51F4D0448...

Title _____

Title owner _____

Date _____

Date 7/10/2020 _____

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:**
7/10/2020
Name: Storm Bailey
Address: 17200 Melrose St
City: Overland Park State: Kansas Zip Code: 66221
Office PH: 816-258-1564 Cell PH: 8162581564 Fax: NA
Preferred Email: stormbailey90@gmail.com

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

3. **Tell us about your background:** *(Insurance, Financial, Tax Prep., what you did before...)*
Insurance- State Farm Agency Owner- 2017-2020

4. **Describe Your Present Situation:** *(Captive or Independent Agency...Motivation for exploring options?)*
Prior Captive- Exploring Independent

5. **What are Your Most Important Needs:**
Have flexibility with carriers and competitive rates

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

7. **What is Your Timeline in Making a Decision:** 3 months

8. **Present Agency Information:**
Written Premium Volume: \$1,100,000 per year in P&C
PL% vs. CL% Split: 10% new and renewal business
Lead Carrier(s): State Farm

9. **Plans going forward:**
Estimated Premium Year 1, 2, 3: \$1,000,000-\$1,500,000 per year
Estimated Commission Income Year 1, 2, 3: \$100,000, \$200,000, \$300,000
Primary Sales Initiatives:
Referral partners, networking, internet leads

10. **Additional Information:** e.g., non-completes, previous criminal convictions, carrier terminations, bankruptcy, etc...
Non compete with State Farm-
Misdemeanor