

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									
Jeremy Davis	(Prospect).	Whereas	CIA	and	Prospect	wish	to	exchange	certain
information pertaining to the operations and	contractual	obligations	of C	IA ar	nd its inde	pende	nt o	contractors	, these
two parties hereby agree to the following cond	ditions:								

- 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	Jeremy Davis Print Name
Signature	DocuSigned by: Jevery Davis B1E766C34DB1469
Title	Owner Title
Date	7/13/2020 Date

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.	Name:		Date: 7/13/2020					
	Address: 2950 Sourek Rd							
	City: Akron	_State: Ohio	Zip Code: <u>44333</u>					
	Office PH: 3306681331 Cell Pl	H: 3306122401	Fax: 3306681331					
	Preferred Email: jeremy@atlasoneinsuranc	ce.com						
2.	Planned Business Location: (retail, office space	ce, suite, home based)	Office space					
3.	Tell us about your background: (Insurance, F. Former State Farm agent and currer							
4.	Describe Your Present Situation: (Captive or Independent and looking for a bett							
5.	What are Your Most Important Needs: Training, technology and overall o	growth mindset						
6.	Please describe your typical Customer Profile what segments?) Preferred PL and con		tandard PL, or Commercial –					
7.	What is Your Timeline in Making a Decision:	3 months						
	8. Present Agency							
	Information:							
	Written Premium Volume: 150000							
	PL% vs. CL% Split: 11.5% for both							
	Lead Carrier(s): Travelers, Safeco, Pr	ogressive and Gra	nge					
9.	Plans going forward							
Э.	Plans going forward: Estimated Premium Year 1, 2, 3: \$600k, 1.2M, 1.8M							
	Estimated Commission Income Year 1, 2, 3: \$72k, \$140k, \$210k							
	Primary Sales Initiatives:	ZK, TIOK, TZIOK						
	Referral partnerships							
10	0. Additional Information: e.g., non-completes, previous criminal convictions, carrier							
	terminations, bankruptcy, etc Current aggregator has a non-compe	te that thev've a	greed to waive.					
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