

AGENCY MEMBER APPLICATION

2024 DUES YEAR: NOVEMBER 1, 2023 - OCTOBER 31, 2024
Membership Renewal Due November 1, 2023

Agency Name: _____

Mailing Address: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Main Contact: _____ Agency Phone: _____

Email: _____ Website: _____

*Number of Employees: _____

Total Dues + **PAC Contribution = Amount Due

\$ _____ + _____ = _____

I certify the total number of employees is accurate. I have read the Trusted Choice
[License Agreement](#) and the [Pledge of Performance](#).

Signature: _____

How did you hear about PIIAC?: _____

DUES CALCULATION

Dues include membership to Independent Insurance Agents & Brokers of America (IIABA). Dues to PIIAC are not deductible as a charitable contribution but may be deductible as an ordinary and necessary business expense. A portion of the dues, however, is not deductible as an ordinary and necessary business expense to the extent that PIIAC engages in lobbying. The non-deductible portion of the 2024 dues will be available after February 15, 2024.

NUMBER OF EMPLOYEES	1-2	3-5	6-8	9-11	12-15	16-19	20-29	30-39	40-49	50-59	60-69	70+
ANNUAL DUES 11/1/2023 - 10/31/2024	\$565	\$825	\$1080	\$1415	\$1750	\$2110	\$2445	\$2675	\$2935	\$3215	\$3550	\$3885 +\$15/employee over 70*

*Dues capped at \$7,500.00

PAYMENT METHODS

CHECK: Send payable to PIIAC, 8354 Northfield Blvd. Suite 2710, Denver, CO 80238

CREDIT CARD: Send completed application to info@piiac.com and request link for online pay.

***Employee Definition:** For IIABA dues purposes, the term "employees" include all employees, officers, owners, partners, producers, and other licensed or unlicensed individuals, who further the work of an agency or brokerage firm, wherever located, whether involved with insurance, employee benefits or other financial services of the agency. Those who work 30+ hours per week should be counted as '1'. Those that work under 30 hours should be counted as '1/2'.

****Voluntary Contribution to Committee for Financial Risk Services,** a Colorado filed Political Action Committee. Colorado campaign finance rules permit campaign contributions from natural persons, business entities and corporations not to exceed \$625 per Colorado House of Representative 2-year election cycle.



Professional Independent
Insurance Agents of Colorado

PLEASE PROVIDE PIIAC WITH:

- E&O Declaration Page - \$1 mil - \$2 mil limits
- Cyber declaration page - \$500k limits
- CO Agency License
- CO Individual Producer License(s)
- W-9
- [Direct Deposit Request Form](#) (if signing up for market access)

PLEASE SEND ME INFORMATION ON PRODUCTS/SERVICES I'VE CHECKED BELOW:

- | | | |
|--|--|---|
| <input type="checkbox"/> E&O coverage/cyber coverage | <input type="checkbox"/> Agency management resources | <input type="checkbox"/> Consulting resources |
| <input type="checkbox"/> Market access | <input type="checkbox"/> Pinnacle Assurance | <input type="checkbox"/> Technology resources |
| <input type="checkbox"/> Flood insurance markets | <input type="checkbox"/> Marketing resources | <input type="checkbox"/> Education |

MEMBER BENEFITS

PIIAC

- Legislation & Advocacy: Team of registered Lobbyists working for you. Engaged Political Action Committee (PAC) and advocacy for CO independent agents.
- Education: Licensing courses, designation programs, in-house and online education classes with member preferred registration fees.
- E&O: Exclusive contracts with Westport Insurance Company and Utica National Insurance. Competitive premiums, broad policy forms and multiple markets for all exposures.
- Market Access:
 - Pinnacle Assurance
 - SECURA Specialty Lines
 - The Hartford
 - AmTrust
 - RLI
 - Safeco
 - Liberty Mutual
 - CNA Insurance
 - & more
- Independent Insurance Agents and Brokers of America (IIABA) Resources
- Agency Management Resources:
 - Hiring resources
 - Big "I" Employee Benefits/Retirement plans
 - Sample Agency Procedures Manual
 - Checklists, Charts, & White Papers
 - & more!

[VIEW MORE MEMBER BENEFITS](#)



AGENCY ROSTER

NAME	LICENSE #	DATE OF BIRTH	EMAIL



Professional Independent
Insurance Agents of Colorado

AGENCY BRANCH INFORMATION

Branch 1: _____

Mailing Address: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Main Contact: _____ Phone: _____

Email: _____

Branch 2: _____

Mailing Address: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Main Contact: _____ Phone: _____

Email: _____

Branch 3: _____

Mailing Address: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Main Contact: _____ Phone: _____

Email: _____

Branch 4: _____

Mailing Address: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Main Contact: _____ Phone: _____

Email: _____

Branch 5: _____

Mailing Address: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Main Contact: _____ Phone: _____

Email: _____