

**Broker of Record Letter**

Pie Insurance

Date:

RE: Named Insured:

Policy number:

Policy Period:

Effective date of renewal:

To whom it may concern,

Please appoint \_\_\_\_\_ to represent me as my Broker of

(AGENCY NAME & AGENCY CODE)

Record, for our workers' compensation insurance policy captioned above. We request that Pie Insurance recognize this Broker of Record effective for the renewal period for the policy noted above. This letter constitutes your authority to furnish all information they may request as it pertains to our insurance, including copies of policies, endorsements, and loss runs.

Sincerely,

\_\_\_\_\_  
Signature of owner/officer\_\_\_\_\_  
Date\_\_\_\_\_  
Printed name and title of owner/officer