Captive Insurance Assessment Questionnaire

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Instructions: Please fill out as much of the following information as you desire, then email the form to: tom@captiveexperts.com to receive a free preliminary assessment. All information will be kept strictly confidential.

Your name, number and email:

How Did You Hear About Captive Experts?:

Dov	ou curronthy	participate ir	a cantiva	program 2 []Yes [1 No
00	you currently	participate ii	i a captive	program: [] res [] NU

If yes, please briefly describe its business purpose, number and type of participants, domicile, risks covered, annual premium levels, manager, year of formation, and what concerns you have about its design, operations and performance:

What do you want to discuss and evaluate? (check all that apply):

[____] existing captive program above
[___] participating in a free captive introductory webinar
[___] assessing viability of a new captive program
[___] asset protection, tax & business planning objectives

Provide more specific details and information about the items checked above:

If you are interested in evaluating the costs and benefits of a new captive insurance program or participating in an existing program, please describe your greatest business, professional and financial risks of concern that you worry most about:

Insert below other information you want to provide that may facilitate a more productive preliminary assessment call to help accelerate achieving your goals and objectives:

Thank you - you will be contacted as soon as possible. If you do not receive a prompt response feel free to email or call at your earliest convenience.

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