

THE INFINITUS GROUP

Welcome to Infinitus

Appointment Documents

NAME

PHONE

EMAIL

ADDRESS

PRODUCTS I WANT MARKET

Medicare
Group Benefits
Property & Casualty
Worksite
Individual
Final Expense
Pre-Need Funeral Insurance
Investments
Legal Service
HR Administration
Self-Funding
ACA

Please complete the following pages and send to Infinitus by using the email link at the end of the appointment paperwork. You may also fax this paperwork to the number listed below.

Please submit the following documents:

- A copy of your insurance license
- A copy of your E&O (if enrolled)
- A voided check for direct deposit
- A copy of your AHIP Certification (if selling medicare)
- A copy of your drivers license

Ready to grow your business?

Our Infinitus agents are part of our National Marketing Alliance, and more importantly, a part of our inclusive and supportive team. They excel in the market because they can offer something unique.

Support

We provide tangible support that you will actually use to grow yoru client base and achieve success as a trusted insurance agent. The support includes sales webinars, training, marketing guides, and regular updates so that you are amount the first to know about the constant changes taking place inthe insurance industry.



APPOINTMENT APPLICAITON

Agent Name / SSN			SSN	
Agency Name / Tax ID			TIN	
Birth Date / M/F			M/F	
Ins. License # / NPN#	State/#			
Additional State License				
Current License Held				
Mailing Address				
City / State / ZIP				
Business Address				
City / State / Zip				
Business Phone / Fax	BUS		FAX	
Cell Phone / Email	Cell	Email		
Preferred Contact	Email	Phone		Text
Banking (attached a voided check)	Routing#	Account#		Bank
Driver's License #		State Issue	ed	
Disciplinary Actions	Have you ever been excluded from participating in a government healthcare program such as Medicaid or Medicare? YES NO			
If Yes, Describe Details				
E&O Information	Yes, I have E&O Coverage No, I don't have E&O coverage			
E&O Certificate	My E&O Certificate is listed in my name YES NO (please send a copy)			
General Agent:	The Infinitus Group			
Agent:	I hereby authorize the Infinitus	Group to afi	fix or append a facsir	nile of my sianature. as set forth
Agreement:	I hereby authorize the Infinitus Group to affix or append a facsimile of my signature, as set forth below, to all required signature fields on all Insurance Carrier documents through the software or through any other means, including without limitation, by e-mail or orally. For which I have authorized the Infinitus Group to submit all such forms and agreements on my behalf, for the purposes of being Contracted to sell products of Carriers through the Infinitus Group. I hereby release, indemnify and hold harmless the Infinitus Group against any and all claims, demands, losses, damages, and causes of action, including: expenses, costs and reasonable attorneys' fees, which they may sustain or incur as a result of carrying out the authority granted hereunder. I affirm that the information I have submitted through the interview process to the Infinitus Group is correct to the best of my knowledge and acknowledge that I have read and reviewed the documents for which I am authorizing my signature to be affixed to. I acknowledge and agree to indemnify and hold harmless any third party from and against all claims, demands, losses, damages, and causes of action, including: expenses, costs, and reasonable attorneys' fees, which such third party may incur as a result of its reliance and acceptance on any form or agreement of a facsimile of my signature. By signing this form, I acknowledge that all information is true and correct to the best of my knowledge.			
	Signed:			

Legal Ques	stions For A	Appointments to The Infinitus Grou	
		Have you ever been charged or convicted of, or plead guilty to, or no contest to, any Felony,	
YES	NO	Misdemeanor, federal and/or state insurance, and/or securities or investments regulations and/or	
		statutes?	
YES	NO	Have you ever been convicted of, or plead guilty or no contest to, any Felony	
YES	NO	Have you ever been convicted of, or plead guilty or no contest to, any Misdemeanor?	
YES	NO	Have you ever been convicted of, or plead guilty or no contest to, any violation of state insurance	
	NO	department regulation or statue?	
YES	NO	Has any foreign government, court, regulatory agency, and/or exchange ever entered an order against	
		you related to investments and/or fraud?	
YES	NO	Have you ever been on probation?	
YES	NO	Have you ever been, or are you currently being, investigated, have any pending indictments, lawsuits,	
		and/or have ever been in a lawsuit with any insurance companies?	
YES	NO	Are you currently under investigation by any legal or regulatory authorities?	
YES	NO	Have you ever been, or are you currently involved in, any pending indictments, lawsuits, civil judgments,	
		and/or other legal proceedings (civil or criminal)? (You may omit family court.)	
YES	NO	Have you ever been named as a defendant or co-defendant in any lawsuit, or have you ever sued, or been sued, by any insurance companies?	
YES	NO	Have you ever been alleged to have engaged in any fraud?	
	NO	Has any insurance or financial services company, or broker-dealer, terminated your contract or	
YES	NO	appointment, or permitted you to resign for any reason other than lack of sales?	
		Were you terminated and/or resigned because you were accused of violating insurance and/or	
YES	NO	investment-related statues, regulations, rules, and/or industry standards of conduct?	
VEC	NO	Have you ever had an appointment with any insurance companies terminated for cause and/or been	
YES	NO	denied any appointment(s)?	
YES	NO	Does any insurer, insured, and/or other person claim any commission charge-back and/or other	
163	INO	indebtedness from you as a result of any insurance transactions and/or business?	
YES	NO	Has any Errors & Omissions (E&O) carrier ever denied, paid claims on, and/or canceled your coverage?	
125		Or, have you ever had a claim filed against your E&O carrier?	
YES	NO	Has a bonding and/or surety company ever denied, paid on, and/or revoked a bond for you? Or, have you	
		ever had a claim filed against your surety company?	
YES	NO	Have you ever had an insurance and/or securities license denied, suspended, canceled, and/or revoked?	
YES	NO	Have you personally, and/or any insurance and/or securities brokerage firms with whom you have been	
		associated, filed a bankruptcy petition and/or declared bankruptcy?	
YES	NO	Has any insurance or securities brokerage firm with whom you have been associated filed a bankruptcy petition and/or been declared bankrupt either during your association and/or within five years after	
163		termination of such association?	
YES	NO	Have you ever had any judgments, garnishments, and/or liens against you?	
	Are you connected in any way with a hank sayings and loan association, and/or other lending or		
YES	NO	institutions?	
YES	NO	Have you ever used any other names or aliases?	
		Do you have any unresolved matters pending with the Internal Revenue Services and/or other taxing	
YES	NO	authorities?	

If you answered "YES" to any of the questions above, please provide a explanation on the next page. Please include dates, actions, and resolve.

By signing this appointment application for The Infinitus Group, I attest that the information that I have provided is true to the best of my knowledge. I acknowledge that if any of the information changes, I will notify The Infinitus Group within five (5) days of such a change. Also, I understand that The Infinitus Group or Carrier may contact me when I need to answer any and all carrier-specific questions.

Signature:	Date:
Name Printed	
Infinitus Signature	Date
Title	
Name Printed	

Letter of Explanation to "YES" answer on previous page.				
Date of Action:	Reason			
Explanation:				
Letter of Explanation to "YES" answer on previous page.				
Date of Action:	Reason			
Explanation:				
Letter of Explanation to "YES" answer on previous page.				
Date of Action:	Reason			
Explanation:				
Letter of Explanation to "YES" answer on previous page.				
Date of Action:	Reason			
Explanation:				

Add additional pages if needed.