U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY

AGENT REFERRAL PROGRAM ENROLLMENT

NFIP AGENT REFERRAL PROGRAM

O.M.B. No. 1660-0059
Expires June 30, 2008

Paperwork Burden Disclosure Notice

Public reporting burden for this form is estimated to average 2 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the form. You are not required to respond to this collection of information unless a valid O.M.B. control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, U.S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, S.W., Washington, D.C. 20472, paperwork Reduction Project (1660-0059). Note: Do not send your completed form to this address.

The National Flood Insurance Program (NFIP) Agent Referral Program generates leads from people who want to buy flood insurance. Consumers call the NFIP Call Center and request an agent, or log onto FloodSmart.gov and use the Agent Directory tool. To receive lead referrals, all you have to do is complete this enrollment form and submit it to the NFIP. See below for details. **NOTE:** If you are currently enrolled in the Agent Referral Program, please use this form to update your contact information.

AGENT INFORMATION ***(Please print. Information must be legible to be entered into the program)***

AGENT'S FIRST NAME	AGENT'S LAST NAME	AGENCY NAME	
ADDRESS	CITY	STATE	ZIP CODE
DIRECT PHONE NUMBER	GENERAL PHONE NUMBER	MOBILE PHONE NUMBER	
FAX NUMBER	E-MAIL ADDRESS	WEB ADDRESS	

1. Are you currently enrolled in the program? ☐ Yes ☐ No
2. How do you want to receive leads? ☐ Phone ☐ E-mail ☐ Fax
3. Are you licensed to sell insurance nationally? ☐ Yes ☐ No
4. List all zip codes in which you do business *(You may enter 2 or more digits with an asterisk to represent a group of zip codes e.g. 123*)*
5. NFIP flood insurance written through these insurance companies
6. Specialize in: ☐ Residential ☐ Commercial ☐ Rental ☐ Other
7. Business hours: ☐ Eastern ☐ Central ☐ Mountain ☐ Pacific ☐ Hawaii
8. Would you like to opt in to receive periodic program updates, news and information from the NFIP? ☐ Yes ☐ No

To sign up or renew your application for the NFIP Agent Referral Program, simply complete the application above and fax to (800) 611-6126.
If you have any questions, please call us at 1-888-786-7693 or e-mail us at ARP@jwt.com

SIGNATURE	DATE