



TRANSFER OF BUSINESS FORM

Please complete the following information to request a Transfer of Business with SLIP+ for States. A Transfer of Business will allow SLIP+ staff to move policies from one account to another.

If the request is for a single or specific subset of policies, please provide each policy number. If all policies are to be moved from one agent to another, please enter *Global* where the policy number(s) are requested. The last option would be if the request is to move all business for a specific state(s), please provide the participating state(s) on that line item. For example, only the Tennessee business of an agent's is being moved to a new agent.

Relinquishing Agent:

Agent Name:	
National Producer Number:	
Agency Name:	
Name of Agent Assuming Business:	
Reason for Transfer:	
Effective Date of Transfer:	
Policy Number(s):	
Global State:	

Relinquishing Agent Signature

Date



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Assuming Agent:

Agent Name:	
National Producer Number:	
Agency Name:	
Name of Agent Relinquishing the Business:	
Reason for Transfer:	
Effective Date of Transfer:	
Policy Number(s):	
Global State:	

Assuming Agent Signature

Date

In addition to the information listed above, if you are requesting a single policy transfer initiated by a Broker of Record (BOR), please include a copy of the BOR letter for our records.

Please email a copy of the signed transfer request form to info@slipplus.com.