

[Please Submit with Company Letter Head]

Date:\_\_\_\_\_

Insurance Company:\_\_\_\_\_

Insurance Co. Address:\_\_\_\_\_

\_\_\_\_\_

Policy Number(s):\_\_\_\_\_

RE: Agent/Broker of Record

To Whom It May Concern,

This is to notify you that our company has appointed C.K. Ash & Associates, whose business address is P.O. Box 6085 Florence, KY 41042, as our sole insurance representative with respect to the coverage provided to this organization <Insert Your Company Name> effective <Month/Day/Year>.

This designation will remain in effect until we notify you in writing to the contrary.

Please do not hesitate to contact me with any questions.

Sincerely,

\_\_\_\_\_  
Signature of Company Officer

\_\_\_\_\_  
Please Print (Officer Name)

\_\_\_\_\_  
Title of Company Officer