## **EVIDENCE OF GOOD FAITH EFFORT TO PLACE**

Surplus Line Association of Utah 6711 South 1300 East Salt Lake City, Utah 84121 (801) 944-0114

This form is to be used to document the efforts made by the surplus line producer (and/or producing agent) to place the insurance coverage concerned with an admitted insurer before approaching the surplus lines insurer.

Policy #	Name of Insured	
List the admitted insurers contacte	d:	
Name of Insurer	Name of Underwriter	Phone or Email
1		
Reason for declining:		
Reason for declining:		
3		
Reason for declining		
Provide any further explanation about insurer which would help support the r	the insured and your effort to place the insuranced to place the policy in with a surplus lines dence of a good faith effort to place the coveressary.	ance with an admitted sinsurer. Explain why
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Signature – producing agent	Signatur	e – surplus line producer