

Carrier Data Download Request Form

Directions: Please complete this form for each of the carriers from which you wish to receive data downloads. Please send the completed form to the carrier using the contact information provided at <http://www.ez-data.com/partners/pending.shtml> as well as a copy of the same form to Ebix CRM at dxosupport@ebix.com.

Carrier Name : _____
Attention : _____

Please indicate what type of information you would like from the carrier listed above. Please select all that apply, and understand that all carriers do not support all data formats listed below:

- Pending Case
- License & Appointment
- Commission
- Application Upload (Prudential and American General)
- Policy Lapses (Prudential)
- Inforce

I authorize you to deliver download information associated with the applications I have submitted to your company for underwriting under any of the contract identifiers listed below that have been assigned to my agency. Please deliver this information to Ebix, Inc. for subsequent delivery to my SmartOffice agency management solution.

Please list all appropriate GA Contract Identifiers:

1.	2.
3.	4.
5.	6.
7.	8.
9.	10.

Approved by : _____
(Agency Principal's Authorization)
(Date) _____
Agency _____
City/State _____ Zip _____
Contact _____ Phone _____
E-mail _____

DataXchange Mailbox Number (REQUIRED): _____