

# Your authority for us to quote and act

## Quoting authority

This confirms that I / We have given permission to JenBro Insurance to examine our insurance and to prepare a report and quotation. Please supply the necessary information from your records to allow this to happen. I / We understand that this is an authority to quote only, and not an appointment to act.

|        |                   |
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| Name   | Company or entity |
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| Signed | Date              |
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| Phone  |                   |
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Complete one or both

## Authority to act

This confirms that I / we have appointed JenBro Insurance to act as our Financial Advisor (broker). This authority replaces and revokes any previous authorities given, or implied, to any agent, Financial Advisor (broker) previously handling our business.

|        |                   |
|--------|-------------------|
| Name   | Company or entity |
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| Signed | Date              |
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