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WESTERN NATIONAL INSURANCE
The relationship company

Application for Download Services

Policy Download for Personal and Commercial Lines
Commission Download for Direct Bill (Personal and Commercial)

If you're viewing this application in your internet browser, please note that in order to submit this application to Western National, you must first download it to your computer. You can then complete the fields and save the file to your computer. **Completed forms should be sent to download@wnins.com**.

AGENCY MANAGEMENT SYSTEMS

Please provide the information below. ***(* Indicates required fields)***

System* | **Product*** | **Version***

DOWNLOAD INFORMATION

1. **Are you currently using IVANS?*** | Yes ☐ No ☐ (*If yes, go to number 2. If no, go to number 3*)
2. **Complete the following information about your IVANS account:**

   IVANS Account (Y Account): _____ (i.e. Y_____)

   Please note: A separate application needs to be submitted for each Y Account.

   IVANS Mailbox Number/ID: _____
3. **Request download commissions for Direct Bill?** | Yes ☐ No ☐
4. **Request download policy information for your Personal Lines book of business?** | Yes ☐ No ☐
5. **Request download policy information for your Commercial Lines book of business?** | Yes ☐ No ☐

   If yes, please indicate which lines of business:

   ☐ Workers' Compensation ☐ Commercial Auto/Garage ☐ BOP

   ☐ Commercial Umbrella ☐ CPP (Including Crime, General Liability, Property, and Inland Marine)

   ☐ General Liability ☐ Property ☐ Inland Marine

AGENCY AUTHORIZATION FOR DOWNLOAD SERVICES

An authorized representative from your agency must sign this download services application. Unsigned download services applications will be returned for signature, and implementation will not be scheduled until the signed form is received.

Signature:* *(E-Signature is Acceptable)* | **Date:*** | **Western National Agency Code:***

Name:* | **Agency Name:***

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