



AGENCY CUSTOMER ID: _____

MARYLAND PERSONAL INSURANCE SUPPLEMENT

AGENCY	NAMED INSURED(S)	
POLICY NUMBER	CARRIER	NAIC CODE

THIS NOTICE IS A PART OF YOUR APPLICATION FOR:

- | | | |
|---|--|---|
| <input type="checkbox"/> HOMEOWNERS INSURANCE | <input type="checkbox"/> PERSONAL UMBRELLA INSURANCE | <input type="checkbox"/> MOBILE HOME INSURANCE |
| <input type="checkbox"/> PERSONAL INLAND MARINE INSURANCE | <input type="checkbox"/> DWELLING INSURANCE | <input type="checkbox"/> PERSONAL LINES PACKAGE INSURANCE |
| <input type="checkbox"/> WATERCRAFT INSURANCE | <input type="checkbox"/> PERSONAL AUTO INSURANCE | |

NOTICE OF INTENT TO USE CREDIT HISTORY

Maryland law requires that we advise you that we will use your credit history as a factor in determining the premium that we will charge you for your insurance. If your premium is affected, you can request a premium quote from us that separately identifies the portion of your premium that can be attributed to your credit history.

If your premium is adversely affected, we will review your credit history every two (2) years, or any other time upon your request. We will then adjust your premium to reflect any improvement.

We cannot use any information in your credit history that occurred more than five (5) years prior to the issuance of your policy.

 Signature of Applicant