

Please answer all questions – both front and back. Sign and return to Amcat.
 Mail: P.O. Box 1068, Coppell, TX 75019 OR email: **HR@amcatusa.com**
 Please include a copy of your updated resume with work history & copies of your current adjuster's licenses.

Last Name: _____ First Name: _____ M.I.: _____

Name you go by: _____ Social Security Number: _____

How you want to be paid: as an Individual _____ or as a Business _____

Business name: _____ Tax I.D. #: _____

Home mailing address – Street: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Fax Number: _____ Pager Number: _____

Email address: _____

Emergency Contact: _____

Relationship: _____ Emergency Phone Number: _____

1. Year you started adjusting claims: _____

2. Types of claims that you have had direct claims experience with:
(Check all that apply AND write number of years experience for each that you check)

Type of Claims	Yes	# Years	Type of Claims	Yes	# Years
Property – Personal Lines			Business Interruption		
Property – Commercial Lines			Flood		
Auto -- Personal Lines			Inland Marine		
Auto – Commercial Lines			Marine Survey		
Liability – Personal Lines			Aircraft		
Liability – Commercial Lines			Casualty / Workers Comp		

3. Types of catastrophes that you have had direct claims experience with:
(Check all that apply AND write number of years experience for each that you check)

Type of Catastrophes	Yes	# Years	Type of Catastrophes	Yes	# Years
Flood			Earthquake		
Hail			Fire		
Hurricane			Liability Cat		
Tornado			Other First Party Cats		

4. Insurance Adjuster License(s):

State: _____ License #: _____ Type: _____

State: _____ License #: _____ Type: _____

State: _____ License #: _____ Type: _____

State: _____ License #: _____ Type: _____

5. NFIP Certified? Yes _____ No _____ If certified, NFIP #: _____

Approved to handle:

Residential _____ Condominium _____ Mobile Home _____ Small Commercial _____ Large Commercial _____

6. Designations you possess *(Check all that apply)*: AIC _____ CPCU _____ RPA _____ Other: _____

7. Other Certifications? Yes ___ No ___ If yes, please list:
Company/Type: _____ Date Certified: _____
Company/Type: _____ Date Certified: _____
Company/Type: _____ Date Certified: _____
Company/Type: _____ Date Certified: _____

8. Computer Software used:
Xactimate ___ Simsol ___ MS/B IntegriClaim ___ Power Claim ___ Symbility ___
Word ___ Excel ___ Other (specify): _____

9. Have you ever been a Catastrophe Supervisor? Yes ___ No ___ If yes, please give details:

10. Have you ever been a Quality Control Checker? Yes ___ No ___ If yes, please give details:

11. Have you ever been a Staff Adjuster? Yes ___ No ___ If yes, please answer:
Company: _____ Dates: _____
What was your authority?: _____

12. Have you ever worked as an "inside" independent adjuster for an insurance company? (such as a telephone adjuster or call center fast track?) Yes ___ No ___ If yes, please answer:
Company: _____ Dates: _____
What was your role?: _____

13. E & O Coverage: Do you have a policy in force? Yes ___ No ___

14. Are you Bilingual: Yes ___ No ___ Language(s): _____

15. Do you have a passport? Yes ___ No ___

16. Are you available for international assignments? Yes ___ No ___

17. Your Educational Background (*Check highest level completed*):
High School Graduate ___ Some College ___ College Graduate ___ Post Graduate ___

18. Do you have any limitations that would prevent you from carrying, setting up and using a ladder to inspect a one or two story roof? Yes ___ No ___

19. Have you been convicted of a crime in the last five (5) years (including traffic violations) or have you ever been convicted of a felony? Yes ___ No ___
If yes, please give details: _____

20. Have you ever had your adjuster's license suspended or revoked? Yes ___ No ___
If yes, please give details: _____

I certify that the information contained in this questionnaire is true and complete to the best of my knowledge and understand that falsified statements on this questionnaire shall be grounds for dismissal.

Date: _____ Signature: _____

Please include a copy of your updated resume with work history & copies of current adjuster's licenses & certifications.