

Get In Touch

800-626-5888 or 502-583-5527 | email@shawamerican.com

Carrier	Phone Number	Advisor Log-In	Client Log-In
American General Life	844-452-3832	Click Here To Access	Click Here To Access
American National Life	800-899-6896	Click Here To Access	Click Here To Access
AXA/Equitable Life	888-228-6690	Click Here To Access	Click Here To Access
Banner	888-585-9198	Click Here To Access	Click Here To Access
Brighthouse/Metlife	877-638-0411	Click Here To Access	Click Here To Access
Cincinnati Life	800-783-4479	Click Here To Access	Click Here To Access
CNA/Valley Forge	800-437-8854	Click Here To Access	Click Here To Access
Genworth Life	888-325-5433	Click Here To Access	Click Here To Access
ING/ReliaStar/VOYA	877-882-5050	Click Here To Access	Click Here To Access
John Hancock Life	800-505-9427	Click Here To Access	Click Here To Access
Lincoln Financial	800-487-1485	Click Here To Access	Click Here To Access
Mass Mutual	800-272-2216	Click Here To Access	Click Here To Access
Minnesota Life/Securian	651-665-5910	Click Here To Access	Click Here To Access
Mutual Of Omaha	800-775-6000	Click Here To Access	Click Here To Access
Nationwide	800-547-7548	Click Here To Access	Click Here To Access
North American	877-872-0757	Click Here To Access	Click Here To Access
One America Life/Long Term Care	800-275-5101	Click Here To Access	Click Here To Access
Pacific Life	844-276-0193	Click Here To Access	Click Here To Access
Principal Life	800-654-4278	Click Here To Access	Click Here To Access
Protective Life	800-366-9378	Click Here To Access	Click Here To Access
Prudential Life	800-782-5356	Click Here To Access	Click Here To Access
SBLI	888-224-7254	Click Here To Access	Click Here To Access
Symetra	800-796-3872	Click Here To Access	Click Here To Access
Transamerica Life	800-852-4678	Click Here To Access	Click Here To Access
US Financial Life	800-959-3894	Click Here To Access	Click Here To Access
Zurich Life	800-382-2150	Click Here To Access	Click Here To Access

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AGENT OF RECORD LETTER

Date: _____

Policy Owner Information

Name: _____

Address: _____

City, State, Zip: _____

Policy Number(s) : _____

Advisor Information

Name: _____

Address: _____

City, State, Zip: _____

Residence License Number: _____

Re: Agent of Record Change

Attention (*Carrier Name*) _____ Policy Services Department,

Please be advised, I am requesting this agent of record change be effective on (*Date*) _____.

I have appointed (*Agent's Name*) _____ as my exclusive agent and broker for the

above noted insurance policy. You are authorized to provide this agent, this agent's representatives, and Shaw American Financial Corporation's staff with any information they request regarding my insurance contracts.

However, this agent, the agent's representatives, and Shaw American Financial Corporation are not responsible for any errors or omissions that may have occurred in insuring my account prior to the effective date of this agent of record assignment. This letter supersedes any previously issued agent of record letters.

Thank you in advance for your prompt attention to this matter.

Sincerely,

Policy Owner's Signature: _____

(If a third party such as a trust or corporation is the owner, add the signor's title and name of the third party. For trusts, also include the trust's date.)