

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

Log into SuranceBay

Review all Tabs on Left Side (anything Red indicates something is missing)

Click on My Profile – your Personal information as an agent

The screenshot shows the 'My Profile' page in the SureLC system, specifically the 'Producer Info' tab. The left sidebar contains navigation options: My Profile (selected), Doing Business As, Firm, Bank Info, Licenses, FINRA, Questions, History, CE & Training, and E&O Insurance. The main content area displays a welcome message and instructions for getting started. Below this, there is a 'Full Name' section with input fields for Title, First Name, Middle Name, Last Name, and Suffix. The SureLC ID# 224287 is displayed in the top right corner.

My Profile > Producer Info

Welcome to SureLC

This is your profile for contracting through **GarityAdvantage**. If you need to access contracting with another agency, contact that agency for login instructions.

Follow the steps below to get started using SureLC.

1. Review the information on each page of your profile. Pages with **incomplete required information** will be marked with a red notification.
2. Pages with yellow notifications indicate incomplete information that is not required to create contracting requests.
3. Once your profile no longer has any red notifications, the **Contracting Requests** page will allow you to request carrier contracts.

- The **Help & Support** page contains your agency's contact information, plus access to the SureLC Help Center's guides and tutorials.

Full Name SureLC ID#
224287

Title First Name * Middle Name Last Name Suffix

Doing Business As –

If you are an Agent – select Individual

If you have your OWN agency – Select Business Entity – Enter Tax ID for agency

The screenshot shows the 'My Profile' page in the SureLC system, specifically the 'Doing Business As' tab. The left sidebar is the same as in the previous screenshot. The main content area displays the 'Doing Business with GarityAdvantage as Business Entity of GARITY ASSOC BROKERAGE INS AGENCY INC' section. It includes a dropdown menu for 'Select your DBA type: Individual, Business, License Only, etc. *' with 'Business Entity' selected. Below this are input fields for 'EIN *' and 'Your Position *'. At the bottom, there is an 'Additional Options' section with a checked checkbox for 'Has Solicitors' and a note: 'Select this option if you intend to have LOA solicitors underneath you.'

My Profile > Doing Business As

Doing Business with GarityAdvantage as Business Entity of
GARITY ASSOC BROKERAGE INS AGENCY INC

Select your DBA type: Individual, Business, License Only, etc. *
Business Entity

EIN *

Your Position *

Additional Options

Has Solicitors
Select this option if you intend to have LOA solicitors underneath you.

If you are LOA – Paid to an agency that you are not the principal of – select Licensed Only Agent

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

- You will need to enter the agency that you are working with

Firm

If You have your OWN agency – you will add your agency info in the FIRM tab

My Profile > Firm: BG

General Info Licenses Contracts

Linked Firm Information

Company Identifications

NPN: SuranceBay ID:

EIN:

Company Name i

Company Details

Company Alias i

Bank Info

If you are an Individual or a Business Entity you will enter your banking info – You will need to upload a voided check

LOA will not have to enter bank info as you are paid to another agency that is already set up.

My Profile > Bank Info BG

ROCKLAND TRUST COMPANY

CHECKING ACCOUNT # ROUTING #

[VIEW CHECK](#) [DELETE](#) [EDIT](#)

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

Licenses

SuranceBay will communicate with NIPR and add all licenses, they will be listed .

The screenshot shows the 'Licenses' page in the SureLC system. The page title is 'My Profile > Licenses'. There are 51 active licenses. The page features a navigation sidebar on the left with options like 'My Profile', 'Doing Business As', 'Firm', 'Bank Info', 'Licenses', 'FINRA', 'Questions', 'History', 'CE & Training', and 'E&O Insurance'. The main content area has buttons for 'RENEW', 'NEW LICENSE / ADD LOA', 'SETTINGS', and 'APPLICATION STATUS'. Below these are four license cards for Massachusetts, Alabama, Arkansas, and Arizona. Each card displays 'License #', 'LICENSE CLASS', 'LINES OF AUTHORITY', 'EFFECTIVE DATE', and 'EXPIRATION DATE'. The 'LINES OF AUTHORITY' for all listed licenses is 'Accident & Health or Sickness, Life'.

State	License #	License Class	Lines of Authority	Effective Date	Expiration Date
Massachusetts		Individual Producer	Accident & Health or Sickness, Life		
Alabama		Insurance Producer	Accident & Health or Sickness, Life		
Arkansas					
Arizona					

FINRA

Answer Yes or No if you are registered with FINRA (not required for Medicare products)

The screenshot shows the 'FINRA' section in the SureLC system. The page title is 'My Profile > FINRA'. The main content area contains a question: 'Are you a registered representative with FINRA?*' with radio button options for 'Yes' and 'No'. The 'No' option is selected.

Are you a registered representative with FINRA?* Yes No

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

Questions

Answer all background Questions – provide documentation if required

My Profile > Questions

Questions

Answers to the questions on this page are not provided to carriers unless it is explicitly requested as part of standard contracting.

- 1 Have you ever been charged or convicted of or plead guilty or no contest to any Felony, Misdemeanor, federal/state insurance and/or securities or investments regulations and statutes? Have you ever been on probation? Yes No
- 2 Have you ever been or are you currently being investigated, have any pending indictments, lawsuits, or have you ever been in lawsuit with insurance company? Yes No
- 3 Have you ever been alleged to have engaged in any fraud? Yes No

History

No Action required on this tab

CE & Training

Training can be uploaded including AHIP

My Profile > Training

CERTIFICATIONS COURSE HISTORY RESCAN

AHIP Medicare ✓ Fulfilled for following year and cover the current year

AHIP certification is accepted by all and required by most carriers if you want to legally sell Medicare Advantage (MA) or Prescription Drug Plans (PDPs) for the current certification year.

FUTURE 07/19/2021 # AHIP Medicare + Fraud, Waste and Abuse Training

Fed Marketplace ? No FFM training and Agreements info

For agents assisting consumers in the Health Insurance Marketplace on Healthcare.gov annual FFM training is required.

Designations NO DESIGNATIONS

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

E & O

Upload Certificate and Enter Policy Info

My Profile > Errors & Omissions

Individual E&O Policy
Active

Starting	Policy#	Case Limit
Expiration	Certificate#	Total Limit
Carrier		

✔ E&O certificate is attached

Add Existing E&O Policy

Upload the declaration page of your E&O policy. [ADD EXISTING POLICY](#)

Buy New E&O Policy

Limits of Liability \$1,000,000 per Claim / \$2,000,000 Aggregate [BUY E&O POLICY](#)

Signature

You can either use your Mouse and sign or upload a copy of your signature

My Profile > Signature

Signature Authorization
07/16/2015

[REMOVE](#) [EDIT](#)

Signature Authorization

Signature Image

Signature Authorization

PLEASE READ THIS AUTHORIZATION, SIGN IN THE BOX BELOW AND SUBMIT THIS FORM BY FOLLOWING THE INSTRUCTIONS PROVIDED ON THE COVER PAGE.

I, _____ hereby authorize SuranceBay, LLC and its general agency customers (the "Authorized Parties") to affix or append a copy of my signature, as set forth below, to any and all required signature fields on forms and agreements of any insurance carrier (a "Carrier") designated by me through the SureLC software or through any other means, including without limitation, by email or orally. The Authorized Parties shall be permitted to complete and submit all such forms and agreements on my behalf for the purpose of becoming authorized to sell Carrier insurance products. I hereby release, indemnify and hold harmless the Authorized Parties against any and all claims, demands, losses, damages, and causes of action, including expenses, costs and reasonable attorneys' fees which they may sustain or incur as a result of carrying out the authority granted hereunder.

By my signature below, I certify that the information I have submitted to the Authorized Parties is correct to the best of my knowledge and acknowledge that I have read and review ed the forms and agreements which the Authorized Parties have been authorized to affix my signature. I agree to indemnify and hold any third party harmless from and against any and all claims, demands, losses, damages, and causes of action, including expenses, costs and reasonable attorneys' fees which such third party may incur as a result of its reliance on any form or agreement bearing my signature pursuant to this authorization.

Please sign in the center of the box below.

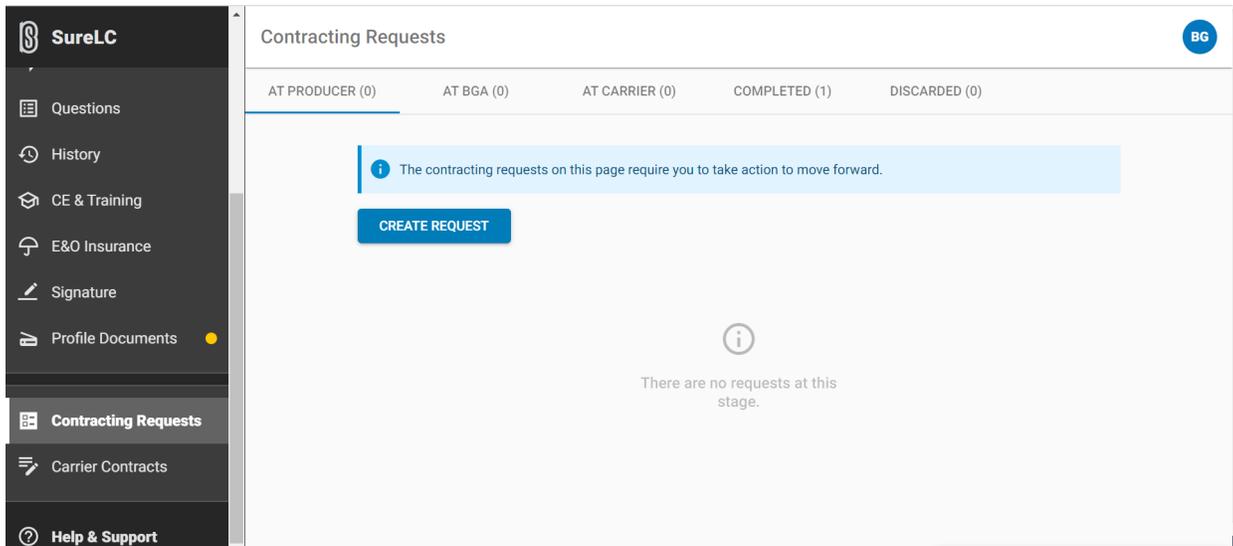
Profile Documents

Review of all attached documents, additional docs can be added

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

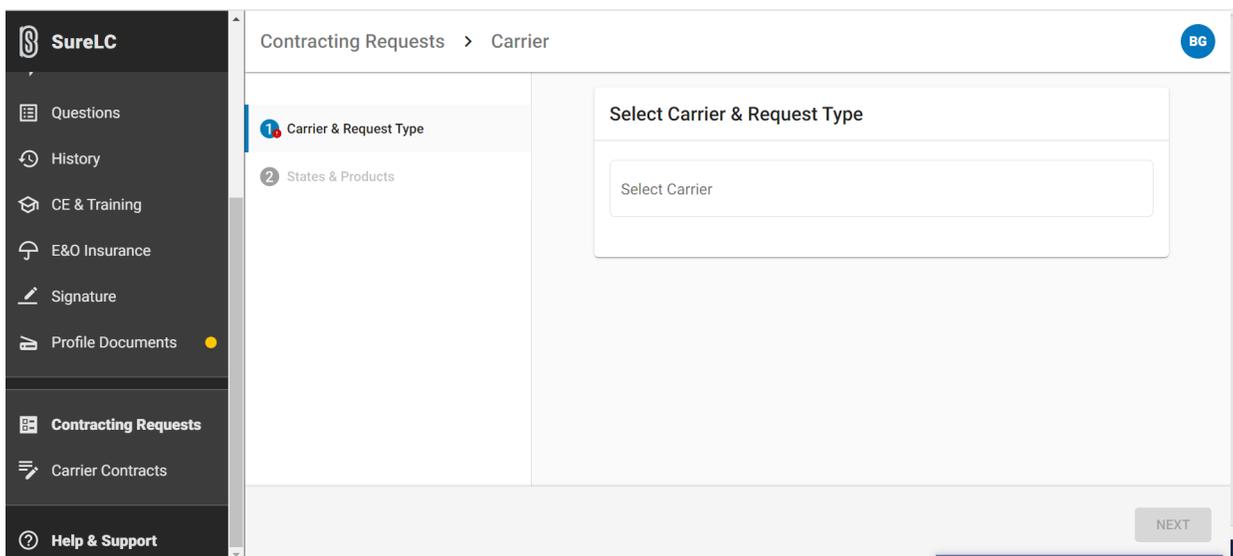
Once all tabs are complete

Select Contracting Requests



Click Create Request

Click Select Carrier



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Select Carrier from drop down

Select Request Type

Contracting Requests > Carrier

1 Carrier & Request Type

2 States & Products

Select Carrier & Request Type

Select Carrier

Tufts/HPHC Stride

Request type

Contract

Add State

Payment

Transfer

NEXT

Select Product and Licensed States (click next)

Contracting Requests > Tufts/HPHC Stride > States & Products

1 Carrier & Request Type

2 States & Products

3 Training

4 Errors & Omissions

5 Carrier Questions

6 Questionnaire

7 Review & Sign

Select States & Products

Select Product

✓ Medicare Advantage

Licensed States

Massachusetts
Accident & Health Or Sickness, Life

New Hampshire
Accident & Health Or Sickness, Life

PREVIOUS

NEXT

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

Review Training Page and click Next

Contracting Requests > Tufts/HPHC Stride > Training

Thank you for confirming the information on this page.

Training Concierge

Add New Accounts

Let our secure Training Concierge help prevent delays processing your contract request and new business submissions. Enter your credentials for any of the listed training providers and we'll monitor your accounts to retrieve any completed courses. We encrypt your info and only use it to apply training course info to your carrier contract submissions.

LIMRA SuccessCE Sandi Kruiise, Inc. QuestCE, Inc. AHIPorg

AHIP (Medicare) A.D. Banker RegED, Inc. WebCE, Inc. Kaplan Financial

LTC Connection InsuranceStudy.com CSSCS.org CLTC

PREVIOUS NEXT

Review E & O page and click Next

Contracting Requests > Tufts/HPHC Stride > Errors & Omissions

This E&O Policy Meets Your Agency's Requirements

Individual E&O Policy

Active

Starting	05/01/2021	Policy#	Case Limit	\$2,000,000
Expiration	05/01/2022	Certificate#	Total Limit	\$2,000,000

Certificate# N/A

Carrier Arch Insurance Company

E&O certificate is attached PDF

PREVIOUS NEXT

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

Answer Carrier Questions and click Next

Contracting Requests > Tufts/HPHC Stride > Miscellaneous

Thank you for confirming the information on this page.

Carrier Questions

Other names used:
Type here

Resident County
Suffolk

What is the County for your Mailing Address?

PREVIOUS NEXT

Answer Questionnaire and click Next

Contracting Requests > Tufts/HPHC Stride > Questionnaire

Please review the information on the Questionnaire screen. Select NEXT to confirm and continue.

Questionnaire

1 Have you ever been convicted of or plead guilty or no contest to any Felony? Yes No

2 Have you ever been convicted of or plead guilty or no contest to any Misdemeanor? Yes No

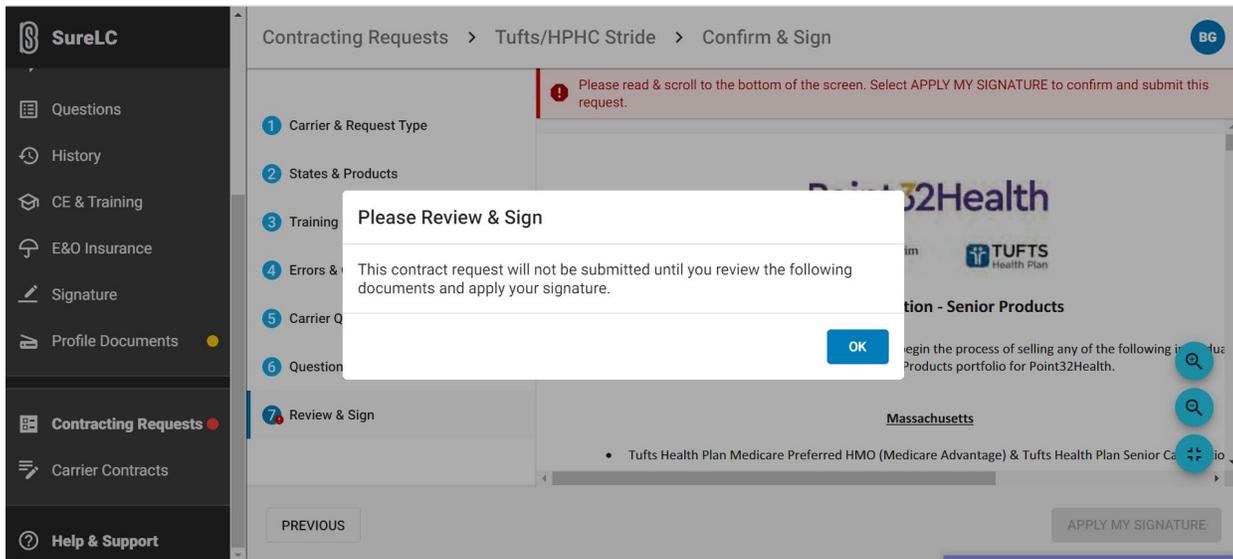
3 Are you currently under investigation by any legal or regulatory authority? Yes No

PREVIOUS NEXT

SURANCEBAY WALKTHROUGH - GARITYADVANTAGE

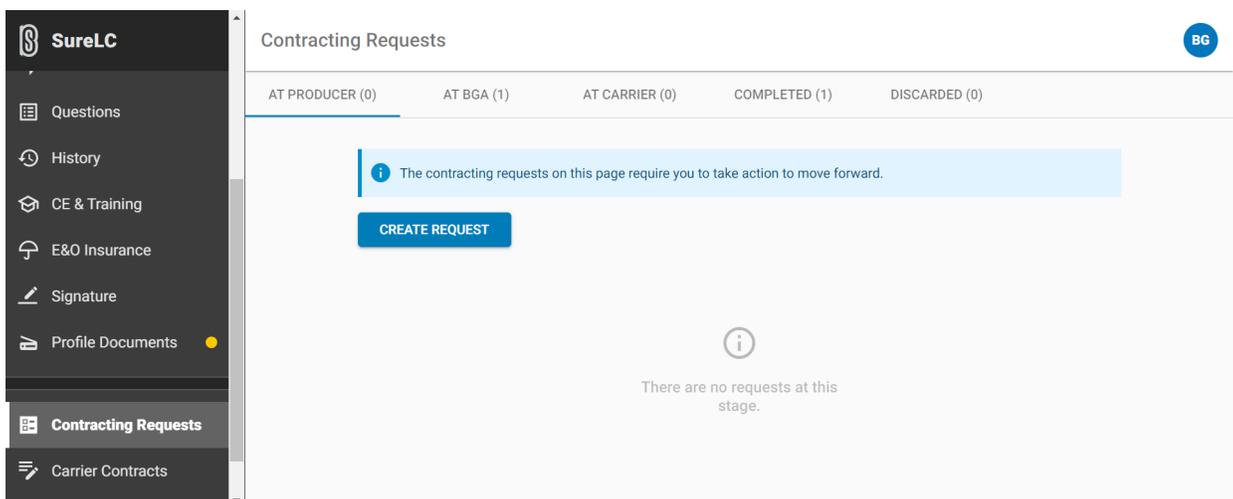
Review and Apply Signature

- You must Scroll through the entire contract and review before it will allow you to apply a signature



Once you have applied a signature your contract has been submitted

To request another contract, create a new contract request



Contact us if you need additional help: 800-234-9488 or [Request Assistance](#)