

## **Agency User Maintenance**

This form is used to update agency staff -

- Name change
- Email change
- Agency access
  - Give access to additional agency codes
  - Remove access to some agency codes
  - Change access to administrator reports

Agency Name:

Agency Code:

Request Submitted by:

Submitter Email Address:

Submitter Telephone No.:

Please submit completed form to [VMAgencyHelpdesk@VermontMutual.com](mailto:VMAgencyHelpdesk@VermontMutual.com)

## **User Information**

Name:

Effective Date of Change:

Appointed Producer?

## **Change Details**

### **Name Change**

***\*\*if user is an appointed producer please submit updated license(s)***

Prior Name:

New Name:

### **Email Address Change**

New Email Address:

### **Agency Code ECOMM Access Change**

Add Agency code(s) (indicate agency codes)

Add Administrator access to commission statements, production reports and to update direct bill commission banking information in Agent Portal?

Remove Agency code(s) (indicate agency codes)

Remove Administrator access to commission statements, production reports and to update direct bill commission banking information in Agent Portal?