

BIS Platform Data Instruction

PLEASE USE BLOCK CAPITALS WHEN FILLING OUT THIS FORM

I hereby request and authorise the companies indicated below, to release client and policy data relating to the business written under the agency numbers/ codes listed below to Broker Information Services Limited, for the sole purpose of having such data included in the BIS Platform system using the username stated below.

I confirm I have a contract in place with Broker Information Services Limited in respect of this processing and that the data will be processed in line with the Terms and Conditions of use of the BIS Platform and the Data Protection Acts.

Brokerage Name: _____
Address: _____
IFSRA No: _____ Contact No: _____
Name: _____ Title: _____
Signature of Authorised Person (Director/Partner): _____
Date: _____

Agency Code Details (*Important: It is mandatory to accurately complete this section fully*)

Authorisation / Instruction to:

Provider	Agency Codes
Aviva (WriteNow Agencies Only)	
Aviva BrokerSecure (Broker First Agencies Only)	
BCP	
Royal London	
Irish Life e.g. NN77/ N777	
New Ireland e.g. 5 digits, letter	
Standard Life e.g. 9/D999	
Zurich Life e.g. 5 digits	

This two page form should be faxed, scanned / emailed or posted to Broker Information Services Limited, York House (Rear 176), Rathmines Park, Rathgar Road, Dublin 6.
Fax: 01 6335024. Email: omnibrokerteam@bestadvice.ie

BIS Platform Authorised User Details

(Please note system Pin & Passwords are sent via text message. Mobile numbers are only used to facilitate a confidential circulation of login details)

Name: _____

Email Address: _____

Mobile Number: _____

Name: _____

Email Address: _____

Mobile Number: _____

Name: _____

Email Address: _____

Mobile Number: _____

Name: _____

Email Address: _____

Mobile Number: _____

Name: _____

Email Address: _____

Mobile Number: _____

Name: _____

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