



Everest Call Center Business Practice Due Diligence Questionnaire

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Each Call Center is reviewed individually. Everest needs to understand the overall business structure and model. Please provide copies of your procedure manual(s) and your response to the questions below of how the Call Center functions in their daily solicitation duties.

NO ROBO DIALERS OR UNSOLICITED OUTBOUND LEAD CALLS PERMITTED.

Form answered by: _____

Name of Organization/Call Center: _____

Address: _____

Contact Information (email and/or phone number): _____

1. History:

Origination date: _____ Years in business as a functioning Call Center: _____

- a. History of products that have been, and are currently being, solicited:
- b. Do you have experience with the Everest product(s) to be marketed: Yes No Number of Years: _____

2. Lead Generation Methods:

- a. Mail Internet TV Radio Other: _____
- b. Names of all internal parties involved: _____

- c. Outside Lead Generation Firms, if any: _____

- d. Submit copies of ALL lead generation materials (mail, TV, radio, Internet, etc.) that will be used
EVEREST REQUIRES APPROVAL OF ALL MATERIALS BEFORE SALE OF EVEREST PRODUCTS.

3. Outline of Sales Process:

- a. Transparency of Call Center Identity - Calling as "whom"? _____

- b. What is calling protocol? _____
- c. Are any calls placed through an auto-dialer system? _____
- d. Are outbound calls made? Yes No If yes, to whom and why? _____
- e. Planned number of calls/per day: _____
- f. Anticipated number of sales per day: _____
- g. Number of times consumers contacted: _____
- h. How does consumer "opt-out"? Email Phone Mail
- i. How do you comply with the requirement for prior written consent? _____

- j. Phone # provided to consumer to call back? Yes No Answered by live person? Yes No

- k. Phone Number(s) used: _____
- l. Describe process for complying with requirement to notify consumers that calls are being recorded: _____
- m. Attach copies of all scripts intended for use for Everest's review and prior approval

4. Phone System capability: (Outbound - caller refers to Call Center)

- a. Is caller asking for specific party based on lead?: Yes No
- b. If party not reached, when does caller follow up?: _____ (# of minutes/hours)

5. Phone System Capability: (Inbound - caller refers to consumer)

- a. Can caller reach anyone?: Yes No
- b. Can caller leave message?: Yes No
- c. When are calls returned to consumer?: _____ (# of minutes/hours)
- d. Message Capacity?: _____

6. Complaint Handling Procedures:

- a. Submit a copy of your complaint handling policy
- b. Submit copies of any forms used to file a complaint: Paper, on-line, etc.

7. Describe and attach a copy of your training procedures for:

- a. Telephone Protocol: _____
- b. Selling Process: _____
- c. Product: _____
- d. Refresher training: _____

8. Describe Performance Monitoring (attach documentation if necessary):

- a. Of following phone protocols: _____
- b. Of Selling Process by each agent: _____
- c. Of accurate app submission: _____

9. Is there any history of Call Center DOI/FTC infractions regarding insurance product sale-to-consumer solicitations? Yes No

- a. If so, please provide details-especially time, date, state, and nature of violation, as well as final disposition. Any relative information that you may want to provide is welcomed and encouraged. (Attach separate sheet(s) as needed).
- b. To become TCPA (Telephone Consumer Protection Act) Compliant please attach the following:
- Attach a copy of your Telemarketing and DNC (Do Not Call) Registration
 - Attach a letter certifying that Automated Dialers (Robocall) are not utilized by any lead sources
 - Attach a copy of TCPA auditing procedures
 - Attach TCPA training procedures

10. Submit a copy of your PCI (Payment Card Industry) Compliance Certification, if any.

Date, signature, name and title of individual submitting this form:

Forms must be completed & signed by principal of the Call Center and returned to Everest.

No robo dialers or unsolicited outbound lead calls permitted.

Signature: _____

Date: _____

Name: _____

Title: _____

Is the person who signed immediately above the same person who completed this form? If not, please provide the names(s) of the person(s) who completed this form and accompanying info.

Other Name(s): _____

Title: _____

Additional notes: