



WORK SAFE, TEXAS®
Partial Book Transfer Form

The following agency:

Selling agency name

Agency Code

To the acquiring agency below:

Buying agency name

\*Agency code

What is the date of transfer? \_\_\_\_\_

Will the producer contact change for these policies? If so, please provide details below.

The producer contact for the policies and renewal quotes is:

Name

Email

Phone Number

Authorized signature of agency buying partial book

Today's date

Authorized signature of agency selling partial book

Today's date

If the seller's signature is not available, please indicate the reason below and provide a copy of the purchase agreement or death certificate. If you are unable to provide a signature, purchase agreement or death certificate, we will need a separate Agent of Record for each account.

Retirement

Deceased

Other (please explain below):

Please email completed form and attached policies to agents@texasmutual.com.