



FIRST INSURANCE®
— OF CANADA — FUNDING
A WINTRUST COMPANY

FirstInSite *Enhanced*

Quotes

Quotes

Topics covered in this guide:

1. Creating a Quote
2. Quote – Adding Policy Details
3. eSignature with DocuSign
4. Editing a Quote
5. Tips

Login

- › Click on the **First InSite Enhanced login button**
firstinsurancefunding.ca
- › Login with your user name (email address) and temporary password
- › Select **Quotes**

The screenshot displays the First InSite Enhanced website interface. At the top, there is a navigation bar with the text "Login here" and a "First InSite Enhanced" button highlighted with a yellow border. To the right of the button are social media icons for LinkedIn, Twitter, and Google+, along with language options: "First-U.S. English" and "Contact Us Français". Below the navigation bar is a main content area with a background image of a mountain range. The content area is divided into two sections: "QUICK SEARCH" and "QUICK LINKS". The "QUICK SEARCH" section contains two search boxes: "Account Search" and "Quote Search", each with a magnifying glass icon. The "QUICK LINKS" section contains four buttons: "Additional Premium Quote", "Additional Premium Quote Search", "Reports", and "Complete Quote". At the bottom of the page, there are three icons: "QUOTES" (highlighted with a yellow border), "ACCOUNTS", and "RENEWALS".

Creating a Quote

- › Select Pricing Program
- › Enter effective date and coverage type
- › Enter premium information and click **Calculate**

New Quote - Step 1

General Information

Quoting for: A00034 - Best Insurance Brokers Inc. - Ottawa

Brokerage: A00034 - Best Insurance Brokers Inc. - Ottawa

Pricing Program: 17% Down, 10 Installments

Line of Business: Commercial

Terms: 17/10, 30 Day Funding

New/Renewal: New

Governing Region: ON - Ontario

Standard / Continuous Pay: Standard

Policy Information

Effective Date: 27/10/2025

Coverage: GL

GENERAL LIABILITY

Premium: 20,000.00

Policy Term (Months): 12


Policy Fees: 0.00

Min. Earned Premium: 0.00%

Taxes: 1,600.00

Total Premium: 21,600.00

Cancel Calculate

 **TIP:** Click the search button to reveal a list of coverage types to choose from

Pick Coverage

Field: Code / Name Find: G Search

Code	Name	French Name
BURG	BURGLAR	
CGL	COMPREHENSIV...	
GL	GENERAL LIABIL...	Responsabilité civile générale
GLAS	GLASS	
Glass	Glass	Verre

› Select first payment due date and click **Recalculate**

› Review financial info and choose:

a) Payment Options to create a quick quote, (A Payment Options Form you can send to your client)

OR

b) Full Quote to complete policy information

New Quote - Step 2

Quote Variables

First Payment Due Date:	27/11/2025	Non-Refundable Broker Fee:	0.00
Billing Cycle:	Monthly	Financed Broker Fee:	0.00
Billing Method:	Pre-authorized	Down Payment:	17.000 % 3,672.00
Disbursement Delay:	30 Days	No. of Installments:	10
Rate Chart:	Best Insurance Rate	APR:	4.341 %
Broker Premium Fin. Referral Fee Plan:	ON	Broker Premium Fin. Referral Fee:	0.00
		Application Fee:	

Reset to Defaults Recalculate

General		Financials	
First Payment Due Date:	27/11/2025	Broker Premium Fin. Referral Fee:	0.00
Billing Cycle:	Monthly	APR:	4.341 %
Disbursement Delay:	30 Days	Flat Rate:	1.660 %
Rate Chart:	Best Insurance Rate Plan	Total Premium:	21,600.00
Broker Premium Fin. Referral Fee Plan:	ON	Down Payment:	17.000 % 3,672.00
Equal Pay Quote:	No	Amount Financed:	17,928.00
Earned Broker Fee:	0.00	Finance Charge:	358.60
Financed Broker Fee:	0.00	Total of Payments:	18,286.60
		No. of Installments:	10
		Installment Amount:	1,828.66

< Back Cancel Payment Options Full Quote

Quote Workflow – Payment Options

- › Enter insured name and address
- › Choose the language for the client's documents
- › Enter the client's email address
- › Click **Submit**

Customer Information

Enter the insured name and address information or search for an existing customer account.

Existing Customer:

Name & Address

Name:

Address:

City:

Country:

Province / Postal:

Customer ID:

Preferred Language:

Customer Email Address:

Paperless Payment Option

- › Select **Paperless Payment Option** (eSignature)

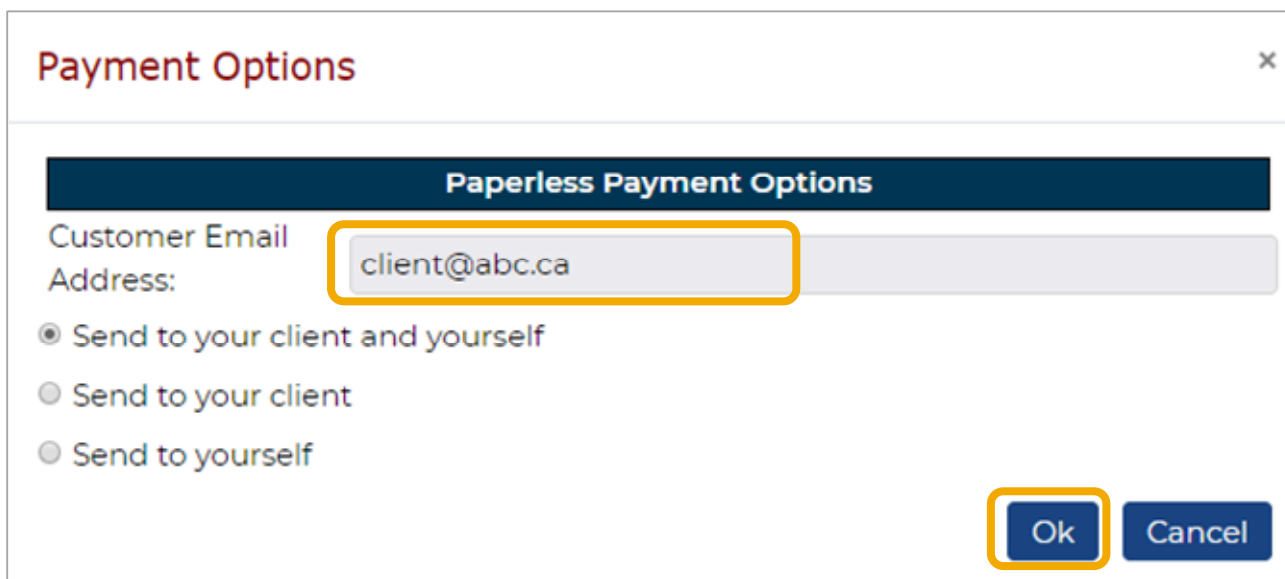
Payment Options ×

Payment Options

<p>Print Payment Options</p> <p>Generate a Policy Payment Option form (PDF file) which can be printed or saved.</p>	<p>Paperless Payment Option</p> <p>Generate an email with the Policy Payment Options form (PDF file) attached including the ability to digitally sign your documents.</p>
----------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Paperless Payment Option

- › Indicate email notification preference and type in customer email address. Click **OK** to proceed



The screenshot shows a dialog box titled "Payment Options" with a close button (x) in the top right corner. Below the title bar, there is a dark blue header with the text "Paperless Payment Options". Underneath, the "Customer Email Address:" label is followed by a text input field containing "client@abc.ca", which is highlighted with a yellow border. Below the input field, there are three radio button options: "Send to your client and yourself" (selected), "Send to your client", and "Send to yourself". At the bottom right, there are two buttons: "Ok" and "Cancel", with the "Ok" button highlighted by a yellow border.

- › You will be returned to the Terms screen
- › An email with a link to view the payment options online with the PFA attached will be sent to the email(s) you selected

Quote - 151654 - ABC Company

Customer Information Policies **Terms** Summary Documents

Quote Variables

Governing Province	Ontario	Non-Refundable Broker Fee:	0.00
First Payment Due Date:	27/11/2025	Financed Broker Fee:	0.00
Billing Cycle:	Monthly	Down Payment:	17,000 % 3,672.00
Billing Method:	Pre-authorized	No. of Installments:	10
Disbursement Delay:	30 Days	APR:	4.341 %
Rate Chart:	Best Insurance Rate	Broker Premium Fin. Referral Fee:	0.00
Broker Premium Fin. Referral Fee Plan:	ON	Application Fee:	

Reset to Defaults Recalculate

General		Financials	
Governing Province	Ontario	Broker Premium Fin. Referral Fee:	0.00
First Payment Due Date:	27/11/2025	APR:	4.341 %
			1.660 %
			21,600.00
			7,000 % 3,672.00
			17,928.00
			358.60
			18,286.60
			10
			1,828.66

Payment Options

Thu 16-Jan-20 11:23 AM
 uat@firstinsurancefunding.ca
 Your Insurance Payment Options from Best Insurance Brokers Inc. | Policy Payment ID Number 4762

To: Cumming, Sarah
 Retention Policy: Wintrust Default Retention Policy (7 years) Expires: 14-Jan-27

PremiumFinanceAgreement.pdf
 78 KB

Please find attached copy of your Policy Payment Options form. Please [click here](#) to digitally sign your documents. Should you have any questions please contact your broker, Gianpiero Cancelliere, at Gianpiero.Cancelliere@firstinsurancefunding.ca, from Best Insurance Brokers Inc.. Additional details below. Thank you.

Policy Payments ID: 4762
 Effective Date: 21/09/2016
 Total Premium: \$ 5,000.00
 Down Payment: \$ 850.00 is due within 48 hours of contract acceptance.
 Payments: 10 of \$ 451.97

Thank you,

FIRST Insurance Funding of Canada
 20 Toronto Street, Suite 700
 Toronto, ON M5C 2B8
 TF: 1 888 232 2238
 E: clientservices@firstinsurancefunding.ca
www.firstinsurancefunding.ca

Paperless Payment Options

- › Insured begins process by clicking on **link in email** and reviewing the Payment Options offered by your brokerage

Français

Best Insurance

Best Insurance Brokers Inc. 4490 Second Street Ottawa, ON, K6H 3B7


Insured/Borrower:
ABC Company

Total Premium:
\$21,600.00





Payment Options

Select a payment method below.

Monthly Payment Plans

 Monthly Bank Withdrawal	Smooth out your cash flow with easy monthly payments. Click the button to complete the premium finance agreement online or print and complete the attached file and return to your broker.	3.00% Flat Rate
------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------

Full Payment Options

 Credit Card	Pay for your full premium with your credit card. Click on the button to proceed to the secure payment page.	2.97% System Access Fee
 Interac®	Pay for your full premium via Interac®. Click the button and complete your email address. A secure Interac® payment link will be emailed to you.	\$5.00
 Cheque or Money Order	Pay for your full premium by cheque or money order. Click on the button and complete the remittance form. Make cheque or mail order payable to: Best Insurance Brokers Ltd. Please ensure payment arrives prior to your policy effective date. Mail cheque and remittance form to: Best Insurance Brokers Ltd. 4490 Second Street, Ottawa, ON K6H 3B7	No charge
 Online Bill Pay	Pay for your full premium via your financial institutions online banking platform. Sign in to your online banking and add "Best Insurance" as a payee and enter your 7-12 digit policy number.	No charge

Pay in Full - Cheque

- › Upon selecting **Cheque**, directions will appear for insured to send payment to broker

[Français](#)

PolicyPayments

Best Insurance Brokers Inc. - Ottawa 4490 Second Street, Ottawa, ON, K6H 3B7

Payment Options - Pay in Full

ABC Company

Send your cheque, along with the Cheque Remittance Form, to:

Best Insurance Brokers - Ottawa
4490 Second Street, Ottawa ON, K6H 3B7

Ensure that your payment arrives prior to the effective date of your insurance.
[Click here](#) to print your cheque remittance form and include it with your payment.

[< Back](#)

[Home](#) [Terms and Conditions](#) [Refund Policy](#) [Security](#) [Privacy Policy](#) [Contact Us](#) **PolicyPayments**

Pay in Full - Credit Card

- › Upon selecting **Credit Card**, insured will be directed to an encrypted and secure self-serve credit card page to complete their payment

Customer Details

Fill all the required fields to process the transaction

Language: English

Invoice Number	Customer Id	First Name	Last Name
152207		Sarah	Smith
Insured Name	Mailing Address	Email Address	
ABC Company	123 Main Street	marketing@firstinsurancefunding.ca	
City	Province	Postal Code	
Ottawa	ON	A1A 1A1	

Payment Details



Invoice Amount
21600
System access fee
648
Total
22248

Credit Card Details

Please complete the following details exactly as they appear on your credit card. Do not put spaces or hyphens in the credit card number.

Billing information Differs from Customer Information?

Credit Card number	CVV/CVC
0000 1111 2222 3333	123

Expiration	This Section should not be required.	
Month	Year	
01	01	

- I authorize the invoice amount to be charged to the card provided above. Amount will appear on statement as Kixpay Inc
- I authorize the System Access Fee amount to be charged to the card provided above. The amount will show on my statement as Insurance Payment System Access Fee. I agree to the refund policy and terms of service. <http://www.systemaccessfee.com>

Please note that System Access Fee Service Fee is collected directly by System Access Fee for the use of its software, service and the secure infrastructure to make this payment to the billing company. This is not a fee for the use of the credit or debit cards.

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OF CANADA — FUNDING
A WINTRUST COMPANY

Monthly Payments

- › Upon selecting **Monthly Payments**, insured will be directed to DocuSign to initiate eSignature

Please review and sign the Premium Finance Agreement

F FIRST Canada.
FIRST Insurance Funding of Canada.

FIRST INSURANCE[®]
OF CANADA — FUNDING
A WINTRUST COMPANY

Powered by **DocuSign**

Thank you for choosing FIRST Insurance Funding of Canada.

[View More](#)

Please read the Electronic Record and Signature Disclosure.

I agree to use electronic records and signatures.

CONTINUE **OTHER ACTIONS ▾**

4490 Second Street
Ottawa, ON K6H 3B7

Please complete the form below and return to you broker.

Transactions related to this payment plan will appear on your bank statement as FIRST Ins. Fund. Please be advised that any outstanding down payment, application fee, and/or past due installments at the time of contract acceptance will be debited within 2 business days.

Please provide your email and cell phone number. This information is only used to communicate with you

Insured Email:

Insured Phone Number:

Fiat Rate	4.34%
Number of Installments	10
First Payment Due Date	27-Nov-2025
Currency	CDN
Line of Business	Commercial
Installment Amount	\$1,828.66

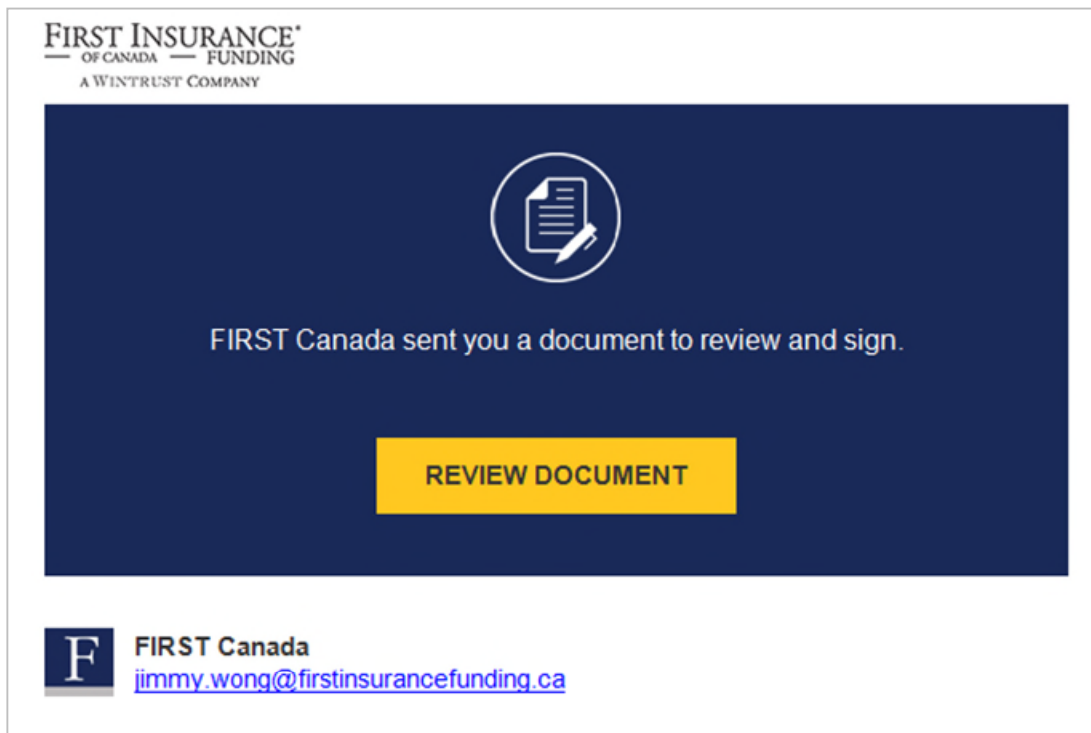
eSignature | Client Process

Conveniently Sign Agreements
Anywhere  Anytime

eSignature

Broker Signature

- › Once insured signs the Premium Finance Agreement, you will receive an email to access the document and complete the process
- › Click **Review Document** to proceed



Broker Signature

› Click **Continue**

Please Review & Act on These Documents

F FIRST Canada..
FIRST Insurance Funding of Canada..

Thank you for choosing FIRST Insurance Funding of Canada.

Your FIRST Insurance Funding Service Agreement is available for signature. We appreciate the opportunity to serve you.
[View More](#)

Powered by **DocuSign**

Please review the documents below.

<p>4490 Second Street Suite 100 Ottawa, ON K6H 3B7</p> <p>Please complete the form below and return to your broker. Transactions related to this payment plan will appear on your bank statement as Best Insurance. Please be advised that any outstanding down payment, application fee, and/or past due installments at the time of contract acceptance will be debited within 2 business days. Please provide your email and cell phone number. This information is only used to communicate with you regarding this payment plan.</p> <p>Insured Email: <input type="text" value="marketing@firstinsurancefunding.ca"/></p> <p>Insured Phone Number: <input type="text"/></p> <p>Attach a VOID cheque or complete the banking information below:</p> <p>Account Holder Name: <input type="text" value="ABC Company"/></p> <p>Branch Transit Number (5 digits): <input type="text" value="11111"/></p> <p>Financial Institution Bank Number (3 digits): <input type="text" value="111"/></p> <p>Bank Account Number (Up to 14 digits): <input type="text" value="111111111111"/></p> <p>Cheque Sample: <input type="text"/></p>	<table><tr><td>Flat Rate</td><td>1.66%</td></tr><tr><td>Number of Instalments</td><td>10</td></tr><tr><td>First Payment Due Date</td><td>27-Nov-2025</td></tr><tr><td>Currency</td><td>CAN</td></tr><tr><td>Line of Business</td><td>Commercial</td></tr><tr><td colspan="2">Instalment Amount</td></tr><tr><td colspan="2">\$1,828.66</td></tr></table>	Flat Rate	1.66%	Number of Instalments	10	First Payment Due Date	27-Nov-2025	Currency	CAN	Line of Business	Commercial	Instalment Amount		\$1,828.66	
Flat Rate	1.66%														
Number of Instalments	10														
First Payment Due Date	27-Nov-2025														
Currency	CAN														
Line of Business	Commercial														
Instalment Amount															
\$1,828.66															

Easy monthly payment

CONTINUE OTHER ACTIONS ▾

- › A Payment Options Form will display, including the information entered by insured. Click **Start**

Please review the documents below. **FINISH** OTHER ACTIONS ▾

DocuSign Envelope ID: A9C4FF6A-DF60-4E69-ADCF-2FBAC82CE727

FIRST INSURANCE
OF CANADA — FUNDING
A WINTRUST COMPANY

Invoice Date:
01-Dec-2025

Insured/Borrower:
ABC Company

Your Insurance Broker:
Best Insurance Brokers Inc. - Ottawa
4490 Second Street
Ottawa, ON K6H 3B7

Please complete the form below and return to you broker.

Transactions related to this payment plan will appear on your bank statement as FIRST Ins. Fund. Please be advised that any outstanding down payment, application fee, and/or past due installments at the time of contract acceptance will be debited within 2 business days.

Please provide your email and cell phone number. This information is only used to communicate with you

Insured Email:
backetier@firstinsuranceoffunding.ca

DEMONSTRATION DOCUMENT ONLY
PROVIDED BY DOCUSIGN ONLINE SIGNING SERVICE
300 1st Ave, Suite 700 - Ottawa - Washington 00108 - 1200 - 219-0200
www.docuSign.com

Payment Details

Policy Payments ID
152231

Broker Reference	
Total Premium	\$21,600.00
Down Payment	\$3,672.00
Application Fee	\$0.00
Finance Charge	\$358.60
Flat Rate	4.34%
Number of Installments	10
First Payment Due Date	27-Nov-2025
Currency	CDN
Line of Business	Commercial
Installment Amount	\$1,828.66

Powered by DocuSign Change Language - English (US) | Copyright © 2020 DocuSign Inc. | 128

- › Answer the down payment questions and click **Next**

Cheque Sample:

NEXT

Are you retaining the down payment? Yes No

Are you keeping any additional amount? Yes No

If no, enter \$0. Otherwise, enter the amount retained:


Easy monthly payment plans provided by

FIRST INSURANCE
OF CANADA — FUNDING
A WINTRUST COMPANY


Additional comments:

cancellation to any party (other than notice required to be given by FIRST); are not for a term or less than one year or subject to any other terms; and have not been paid for other than as described herein; 12) Broker will promptly remit all funds received from FIRST and the Insured for the Policies due to the insurers issuing such Policies; and 13) Broker is not an agent of FIRST and is not authorized to bind FIRST and has not made any representation to the contrary.

SIGN

By  Sarah Smith Broker Date 1/17/2020
(Signature of Broker) (Name and Title)

Acceptance by Insured
The Insured has received a copy of the Agreement and read it in its entirety. Upon execution of this Agreement, Insured(s), jointly and severally if more than one, acknowledges and agrees to all terms and provisions herein. If the Insured is not an individual, the undersigned is authorized to sign this Agreement on behalf of all Insureds. The Insured is not required to enter into this financing arrangement as a condition for obtaining insurance.

By  Sarah Smith ABC Date 1/17/2020
(Signature of Insured) (Name and Title)

› Click **Sign**

Select the sign field to create and add your signature

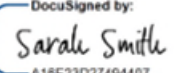
Adopt Your Signature

Confirm your name, initials, and signature.
* Required

Full Name* Sarah Smith Initials* SS

SELECT STYLE DRAW

PREVIEW

DocuSigned by:
 DS
A18E23D27494407... SS

By selecting Adopt and Sign, I agree that the signature and initials will be the electronic representation of my signature and initials for all purposes when I (or my agent) use them on documents, including legally binding contracts - just the same as a pen-and-paper signature or initial.

ADOPT AND SIGN CANCEL

Powered by DocuSign

› Review signature. Click **Adopt and Sign**

› Your signature appears in document. Click **Finish**

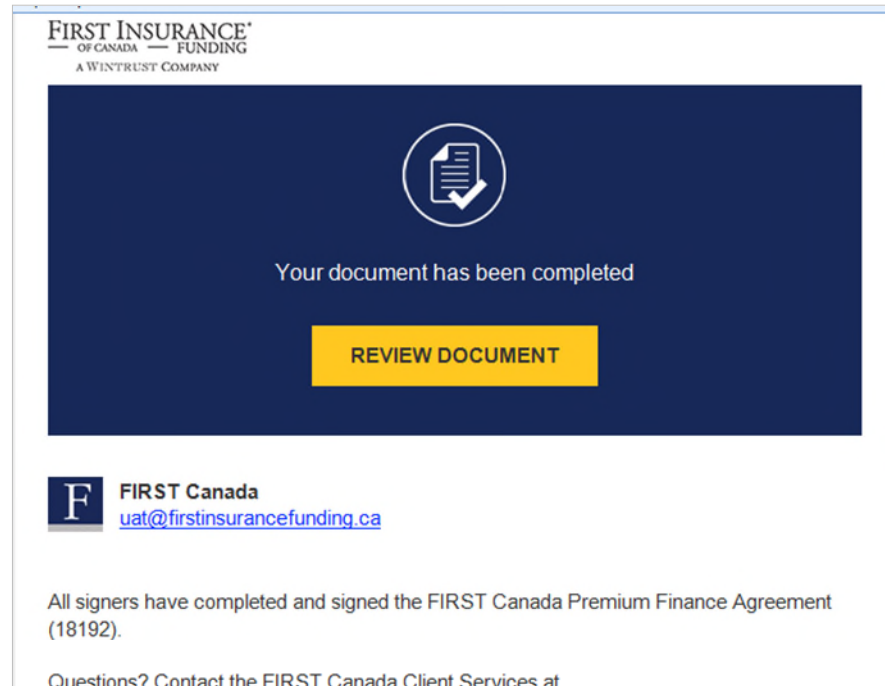
152231.pdf 3 of 3

FINISH

Powered by DocuSign

Paperless Process Complete

- › Upon completion FIRST Canada will be automatically notified of the completed submission. Notice of Acceptance will be sent to Broker and Client once the contract is processed.



**No more printing, scanning, or emailing necessary
with new paperless workflow**

Print Payment Options

- › Select **Print Payment Options**

Payment Options ×

Payment Options

Print Payment Options	Paperless Payment Option
Generate a Policy Payment Option form (PDF file) which can be printed or saved.	Generate an email with the Policy Payment Options form (PDF file) attached including the ability to digitally sign your documents.



Best Insurance Inc.






Best Insurance Brokers Inc. - Ottawa
4490 Second Street,
Ottawa, ON, K6H 3B7

Insured/Borrower:
ABC Company

Pay Now

Click the Pay Now button or view online at
policypayments.com/Best using your
Policy Payments ID:
157230

Payment Options Form

Monthly Payment Plans		Cost
	Monthly Bank Withdrawal Complete the premium finance agreement online by clicking the Pay Now button or complete the attached file and return to us.	3.00% Flat Rate
Full Payment Options		Cost
	Credit Card Pay for your full premium with your credit card. Click the Pay Now button.	2.97% System Access Fee
	Interac® Pay for your full premium via Interac®. Click the Pay Now button and complete your email address. An Interac® payment link will be emailed to you.	\$5.00
	Cheque or Money Order Pay for your premium in full by cheque. Make your cheque or money order payable to Best Insurance Inc. and mail your cheque or money order to our address above.	No charge
	Online Bill Pay Pay for your full premium via your financial institution's online banking platform. Sign in to your online banking and add Best Insurance as a payee. Enter your 7-12 digit policy number as your account number.	No charge

Best Insurance Brokers Inc. - Ottawa
4490 Second Street, Ottawa, ON, K6H 3B7

www.bestinsurancebrokers.com

› Your Policy **Payment Options Form** is created and ready to present to your client

- › To add policy details to your quote choose **Full Quote**

New Quote - Step 2

Quote Variables

First Payment Due Date:	<input type="text" value="27/11/2025"/>	Non-Refundable Broker Fee:	<input type="text" value="0.00"/>
Billing Cycle:	<input type="text" value="Monthly"/>	Financed Broker Fee:	<input type="text" value="0.00"/>
Billing Method:	<input type="text" value="Pre-authorized"/>	Down Payment:	<input type="text" value="17.000 %"/> <input type="text" value="3,672.00"/>
Disbursement Delay:	<input type="text" value="30 Days"/>	No. of Installments:	<input type="text" value="10"/>
Rate Chart:	<input type="text" value="Best Insurance Rate"/>	APR:	<input type="text" value="4.341 %"/>
Broker Premium Fin. Referral Fee Plan:	<input type="text" value="ON"/>	Broker Premium Fin. Referral Fee:	<input type="text" value="0.00"/>
		Application Fee:	<input type="text" value=""/>

General	Financials		
First Payment Due Date:	27/11/2025	Broker Premium Fin. Referral Fee:	0.00
Billing Cycle:	Monthly	APR:	4.341 %
Disbursement Delay:	30 Days	Flat Rate:	1.660 %
Rate Chart:	Best Insurance Rate Plan	Total Premium:	21,600.00
Broker Premium Fin. Referral Fee Plan:	ON	Down Payment:	17.000 % <u>3,672.00</u>
Equal Pay Quote:	No	Amount Financed:	17,928.00
Earned Broker Fee:	0.00	Finance Charge:	<u>358.60</u>
Financed Broker Fee:	0.00	Total of Payments:	18,286.60
		No. of Installments:	<u>10</u>
		Installment Amount:	1,828.66

Quote Workflow – Full Quote

- › Enter insured name and address
- › Choose the language for the client's documents
- › Enter the client's email address
- › Click **Submit**

Customer Information

Enter the insured name and address information or search for an existing customer account.

Existing Customer:

Name & Address

Name:

Address:

City:

Country:

Province / Postal:

Customer ID:


Preferred Language:

Customer Email Address:

- › Pop up notifies that fields entered on terms page will be recalculated.

Click **Ok**

- › Review General Loan Information and click **Next**

 **TIP:** You can opt to send notifications to clients by email by clicking the check box and entering an email address

uat.pbs.first-quotes.com says

Please be aware any fields that were entered on the terms page will be recalculated when converting to a full quote.

OK

Quote Entry -

Customer Information Policies Terms

Quoting for: A00034 - Best Insurance Brokers Inc. - Ottawa Ottawa, Ontario

Name & Address		Contact	
Name:	ABC Company	Main Phone:	
		Contact:	
		E-Mail:	client@abc.ca
Address:	123 Main Street	Main Fax:	
		Create:	[New Contact Info]
City:	Ottawa		
Country:	Canada		
Province / Postal:	ON - Ontario A1A 1A1		

Additional Addresses

Email Notices to Customers:

Customer ID:

General Loan Information

Brokerage: A00034 - Best Insurance Brokers Inc. - Alt Account #:

Pricing Program: 17% Down, 10 Installments Line of Business: Commercial

Terms: 17/10, 30 Day Funding Preferred Language: English

Standard/Continuous Pay: Standard New/Renewal: New

Origination Code: Entity

Broker Contact: sarah.smit Sarah Smith

Broker Phone: (111) 111-1111

Broker Email: marketing@firstinsurancefunding.ca

< Back **Cancel** **Next >**

› Enter policy number, coverage type and effective date

› Enter carrier info

› Review premium amount, fees and taxes and click **Save**

Quote Entry -

Customer Information **Policies** Terms

Policy #	Eff Date	Carrier	Coverage	Premium	Policy Fees	Taxes	Total
1	27/10/2025		GL	20,000.00	0.00	1,600.00	21,600.00 ×

New Policy 21,600.00

Policy Details

Policy Number: AV2341 Coverage: GL GENERAL LIABILITY

Effective Date: 27/10/2025 Policy Term (Months): 12

Carrier: C00002 Aviva Canada

MGA: |

Premium: 20,000.00 Return Method: Short-Rate

Policy Fees: 0.00 Min. Earned Premium: 0.000% 0.00

Taxes: 1,600.00

Total Amount: 21,600.00

View Authorities

< Back Cancel **Save**

Cancel Next >

› Click **Next** to continue

Quote Entry -

Customer Information **Policies** Terms

Policy #	Eff Date	Carrier	Coverage	Premium	Policy Fees	Taxes	Total
1 AV2341	27/10/2025	Aviva Canada	GL	20,000.00	0.00	1,600.00	21,600.00 x

New Policy 21,600.00

Policy Details

Policy Number: Coverage:

Effective Date: Policy Term (Months):

Carrier:


MGA:

Premium: Return Method:

Policy Fees: Min. Earned Premium:

Taxes:

Total Amount:

 **TIP:** You can add multiple policies to one contract

› Review financial info and click **Save**

Quote Entry -

Customer Information Policies **Terms**

Quote Variables

Governing Province:	Ontario	Non-Refundable Broker Fee:	0.00
First Payment Due Date:	27/11/2025	Financed Broker Fee:	0.00
Billing Cycle:	Monthly	Down Payment:	17.000 % 3,672.00
Billing Method:	Pre-authorized	No. of Installments:	10
Disbursement Delay:	30 Days	APR:	4.341 %
Rate Chart:	Best Insurance Rate	Broker Premium Fin. Referral Fee:	0.00
Broker Premium Fin. Referral Fee Plan:	0N	Application Fee:	

General		Financials	
Governing Province:	Ontario	Broker Premium Fin. Referral Fee:	0.00
First Payment Due Date:	27/11/2025	APR:	4.341 %
Billing Cycle:	Monthly	Flat Rate:	1.660 %
Disbursement Delay:	30 Days	Total Premium:	21,600.00
Rate Chart:	Best Insurance Rate Plan	Down Payment:	17.000 % 3,672.00
Broker Premium Fin. Referral Fee Plan:	0N	Amount Financed:	17,928.00
Equal Pay Quote:	No	Finance Charge:	358.60
Earned Broker Fee:	0.00	Total of Payments:	18,286.60
Financed Broker Fee:	0.00	No. of Installments:	10
		Installation Amount:	1,828.66

- › Review info and click **Payment Options**

Customer Information Policies **Terms** Summary Documents


Quote Variables

Governing Province	Ontario	Non-Refundable Broker Fee:	0.00
First Payment Due Date:	27/11/2025	Financed Broker Fee:	0.00
Billing Cycle:	Monthly	Down Payment:	17.000 % 3,672.00
Billing Method:	Pre-authorized	No. of Installments:	10
Disbursement Delay:	30 Days	APR:	4.341 %
Rate Chart:	Best Insurance Rate	Broker Premium Fin. Referral Fee:	0.00
Broker Premium Fin. Referral Fee Plan:	ON	Application Fee:	

Reset to Defaults Recalculate

General		Financials	
Governing Province	Ontario	Broker Premium Fin. Referral Fee:	0.00
First Payment Due Date:	27/11/2025	APR:	4.341 %
Billing Cycle:	Monthly	Flat Rate:	1.660 %
Disbursement Delay:	30 Days	Total Premium:	21,600.00
Rate Chart:	Best Insurance Rate	Down Payment:	17.000 % 3,672.00
Broker Premium Fin. Referral Fee Plan:	ON	Amount Financed:	17,928.00
Equal Pay Quote:	No	Finance Charge:	358.60
Earned Broker Fee:	0.00	Total of Payments:	18,286.60
Financed Broker Fee:	0.00	No. of Installments:	10
		Installment Amount:	1,828.66

Submit Edit Close **Payment Options**

 **TIP:** Customer details and banking info are required prior to submission

Editing a Quote

- › You must duplicate a quote in order to create a version that can be edited
- › Select Quote Search from the main screen
- › Enter quote number or name and click **Search**
- › Click on the double paper icon (copy quote)

Quote - Search

Quote #: Name:












Address: City:

Region: Postal Code:

Customer ID:

Specific Quotes:

Quoting For:

	Quote No +	Name	Quoted Date	Total Premium	Down Payment	# Pay	C
	Payment Options	151662	ABC Company	15/01/2020	21,600.00	3,672.00	10
	Payment Options	151654	ABC Company	15/01/2020	21,600.00	3,672.00	10
	Payment Options	P151639	ABC Company	15/01/2020	21,600.00	3,672.00	10
	Payment Options	149815	Michele - Test	13/01/2020	100,000.00	8,560.00	11
	Payment Options	149286	Many Policy Lines	03/01/2020	128,160.00	12,816.00	10
	Payment Options	149245	ABC Company	15/01/2020	21,600.00	2,160.00	10
	Payment Options	149013	ABC Company	03/01/2020	21,650.00	1,836.00	11
	Payment Options	147215	BMS Renewal Te...	12/12/2019	5,000.00	428.00	11
	Payment Options	P146316	Walrus World	05/12/2019	1,000.00	85.60	11
	Payment Options	P146068	Walrus World	04/12/2019	3,250.00	594.00	10
	Payment Options	0136655	Walrus World	31/01/2019	3,100.00	765.76	11

264 Items (3 Pages)

Select a quote to view or edit. Click New to create a new quote.

Duplicate a Quote

- › Upon clicking copy, a pop up notification appears. Click **OK**
- › Edit information as necessary and follow previous steps to complete the quote

uat.pbs.first-quotes.com says

Are you sure you want to copy this quote?

OK Cancel

Quote -

Customer Information Policies Terms

Quoting for: A00034 - Best Insurance Brokers Inc. - Ottawa Ottawa, Ontario

Name & Address	Contact
Name: ABC Company	Main Phone:
	Contact:
	E-Mail: sarah.cumming@firstinsurancefunding.ca
Address: 123 Main Street	Main Fax:
	Create: [New Contact Info]
City: Ottawa	
Country: Canada	
Province / Postal: ON - Ontario A1A 1A1	
Additional Addresses	
Email Notices to Customers: <input checked="" type="checkbox"/>	
Customer ID:	

Tips



1. Your login is always your email address
2. Login credentials and a temporary password will be emailed to you within 5 business days from training
3. After initial login you will be required to create a password. This password must be 8 characters and include numbers, special characters, lower and upper case letters
4. Training guides, videos, and FAQs available on our website – Visit First InSite Enhanced tab

Contact Us

Contact a member of your dedicated service and support team with any questions or you can reach us at:

clientservices@firstinsurancefunding.ca

1 888 232 2238