

# Stewardship Report and Renewal Questionnaire for



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# Stewardship Report and Renewal Questionnaire For



Client:	
Introduction:	

## I. Performance Metrics

### Claims History:

Number of Claims Filed:	
Successful Claims Resolved:	
Pending Claims:	

### Financials:

Total Premium Paid:	
Total Savings via Risk Management Initiatives:	
Total Claims Payout:	

## II. Service Metrics

### Response Time:

Average Response Time for Endorsement:	
Average Time for Certificate of Insurance:	

### Customer Satisfaction Metrics:

Customer Satisfaction Score:	
Net Promoter Score:	

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## III. How Do You Rate Our Service?

We value your feedback and want to know how well we are meeting your expectations. Please rate the following on a scale of 1-10:

	1	2	3	4	5	6	7	8	9	10
Responsiveness:										
Knowledge and Expertise:										
Overall Service Quality:										

## IV. Coverage Review

### 1. Professional Liability:

Current Coverage:	
Recommendations:	

### 2. General Liability:

Current Coverage:	
Recommendations:	

### 3. Cyber Liability:

Current Coverage:	
Recommendations:	

### 4. Employment Practices Liability:

Current Coverage:	
Recommendations:	

### 5. Business Interruption:

Current Coverage:	
Recommendations:	

### 6. Directors and Officers Insurance:

Current Coverage:	
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Recommendations:	
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## 7. Workers' Compensation:

Current Coverage:	
Recommendations:	

## 8. Other Specialized Risks:

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## V. Risk Management Initiatives

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## VI. Referrals

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## VII. Renewal Questionnaire

1. Have there been any significant operational changes in the firm, such as the number of employees or types of cases?

2. Have there been any legal or regulatory changes affecting your industry that you're concerned about?

3. Are you considering expanding your firm, either in services or location?

4. Are there any areas where you feel our service could be improved?

5. Any new types of coverage you are considering for the upcoming term?

6. Were there any incidents that made you reconsider your current risk strategies?

7. Feedback on our claims process?

8. Expected budget range for insurance in the upcoming term?

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## VIII. Contact Information & Communication Preferences

Confirm or Update Contact Information:

Email:	
Phone:	
Address:	

Preferred Method of Communication:    Email    Phone    Other:

## IX. Next Steps

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## Closing Remarks

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Prepared by:	
Contact:	
Date:	