



FINANCEMENT D'ASSURANCE®  
**FIRST** — DU CANADA —  
UNE COMPAGNIE WINTRUST

**FirstInSite** *Enhanced*<sup>MC</sup>

Soumettre une soumission

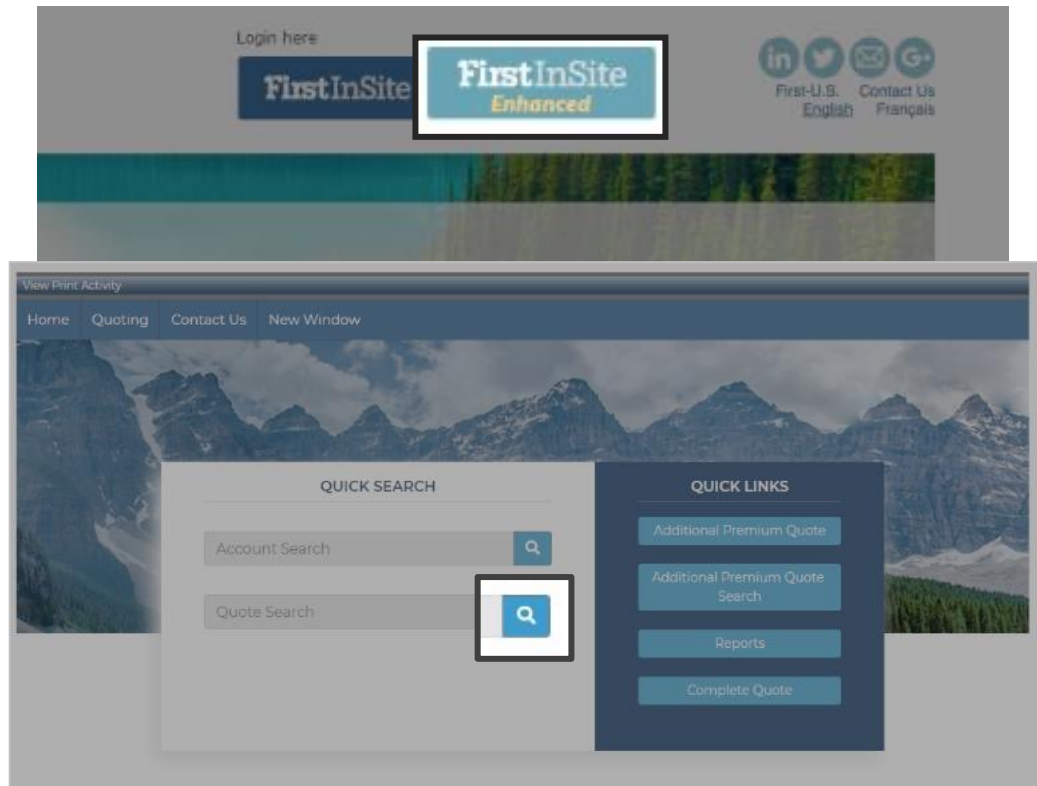
# Ordre de la présentation

## **Sujets couverts dans ce guide:**


1. Soumettre une  
soumission
2. Trucs

# Identification

- › Cliquez sur le bouton **First InSite Enhanced<sup>MC</sup>**  
firstinsurancefunding.ca
- › Identifiez vous à l'aide de votre nom d'utilisateur (adresse courriel) et le mot de passe
- › Sélectionnez **Quote Search**



- › Sélectionnez la soumission que vous souhaitez soumettre

 **TRUC:** Les soumissions qui débutent avec un P doivent aussi avoir leurs détails intégrés

### 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
	151662	ABC Company	15/01/2020	21,600.00	3,672.00	10
	151654	ABC Company	15/01/2020	21,600.00	3,672.00	10
	P151639	ABC Company	15/01/2020	21,600.00	3,672.00	10
	149815	Michele - Test	13/01/2020	100,000.00	8,560.00	11
	149286	Many Policy Lines	03/01/2020	128,160.00	12,816.00	10
	149245	ABC Company	15/01/2020	21,600.00	2,160.00	10
	149013	ABC Company	03/01/2020	21,650.00	1,836.00	11
	147215	BMS Renewal Te...	12/12/2019	5,000.00	428.00	11
	P146316	Walrus World	05/12/2019	1,000.00	85.60	11
	P146068	Walrus World	04/12/2019	3,250.00	594.00	10
	P136655	Wacky Walrus W...	31/10/2019	3,100.00	265.36	11


264 Items (3 Pages)

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

› Complétez les détails de la police en sélectionnant **Edit**

› Si les détails de la police sont déjà complets, passez à l'onglet Terms

› Confirmez les informations de l'assuré

 **TRUC:** Vous pouvez choisir d'envoyer des notifications par courriel aux client en cliquant sur la case à cocher

Quote - 151639 - ABC Company

Customer Information Policies Terms Summary Documents

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

Name & Address		Contact	
Name:	ABC Company	Main Phone:	
		Contact:	
		E-Mail:	
Address:	123 Main Street	Main Fax:	
		Create:	
City:	Ottawa		
Country:	Canada		
Province / Postal:	ON - Ontario	AIA IAI	

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.smith@bestinsurance.ca - Sarah Smit..		
Broker Phone:	(111) 111-1111		
Broker Email:	marketing@firstinsurancefunding.ca		

**Edit** Close

› Entrez le numéro de police et le type de couverture

› Entrez l'information sur l'assureur et/ou grossiste

› Entrez le montant de la prime, les frais et les taxes et cliquez sur **Save**

Quote - 151654 - ABC Company

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

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 Cancel Save

< Back Cancel Next >

 **TRUC:** Vous pouvez ajouter plusieurs polices à un seul contrat

- › Si tout est correct, cliquez sur **Save**

### Quote - 151654 - ABC Company

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:	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

[< Back](#) [Submit](#) **Save** [Cancel](#) [Next >](#)

› Cliquez sur **Submit**

**Quote - 151662 - 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:	0N	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	Fiat 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
		Installment Amount:	1,828.66

Submit Edit Close Payment Options



PBS Dialog - Google Chrome  
uat.pbs.first-quotes.com/MainViewDialog.aspx

### On Line Account Submission Process

Customer Name:	ABC Company	Total Account:	21,600.00
Interest Charge Total Due:	358.60	Amount of Deposit:	3,672.00
Term:	10	Amount of Installments:	1,828.66

Ensure you have a signed contract and customer banking information before submitting.

**Is your Brokerage keeping the down payment?**  Yes  No

Note: If you are not collecting the down payment the Brokerage is still responsible for time on risk.

Additional amount retained by the brokerage:\*

\* If applicable, enter the dollar amount that the broker has retained in addition to the down payment amount.

#### Complete Cheque Information:

Account Holder Name:	<input type="text"/>
Institution Number:	<input type="text"/>
Financial Institution Name:	<input type="text"/>
Bank Transit:	<input type="text"/>
Account Number:	<input type="text"/>

Upload image of signed Payment Options Form

#### Account Submission Note:

(Facultatif) Si vous avez des instructions spéciales, entrez les dans la note de soumission du prêt

A note is only necessary if you would like to communicate something specific about this contract to the FIRST Insurance Funding service team.

AGENT OR BROKER REPRESENTATIONS   OTHER REPRESENTATION

Pas besoin de signer, d'envoyer par courriel ou par fax; cliquez simplement pour accepter

By selecting 'Complete On Line Submission' you warrant and agree to the Agent or Broker Representations as outlined in the contract. You further agree that the brokerage has been furnished with these representations and you have the authority to submit this contract and agree to the representations.

You further warrant that the Brokerage has collected the down payment, if applicable, and any other sums due as required by the agreement and is holding same or they are remitted with this agreement.

Confirmez le paiement initial et tout montant supplémentaire retenu

Entrez les informations bancaires de l'assuré

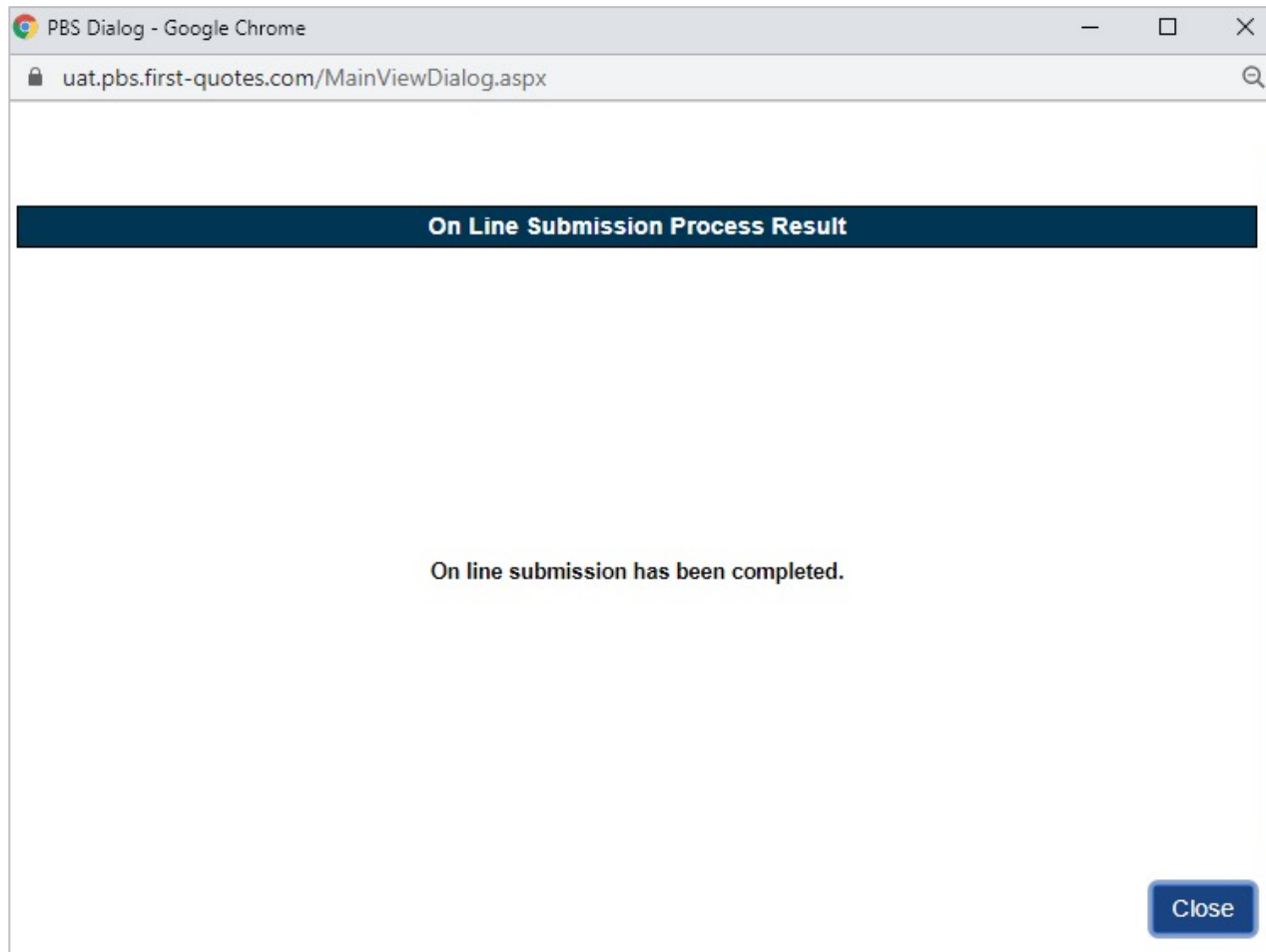
### Cheque Sample

#101# 4123456789 0123456789

5 Digit Transit No. | 3 Digit Institution No. | Up To 14 Digit Account No.

Cliquez **Complete On Line Submission**

- › Recevez la confirmation que votre contrat a été soumis pour traitement



# Trucs

1. Votre identifiant est maintenant votre adresse courriel
2. Les informations pour l'identification vous seront envoyées par courriel dans les 5 jours ouvrables suivant la formation
3. Après la connexion initiale, vous devrez créer un mot de passe. Ce mot de passe doit comporter 8 caractères et comprendre des chiffres, des caractères spéciaux, des lettres minuscules et majuscules
4. Les guides de formation, vidéos, FAQs et webinaires sont disponibles sur notre site internet– Visitez l'onglet First InSite Enhanced<sup>MC</sup>

# Contactez nous

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Communiquez avec un membre dévoué de notre équipe service et soutien pour toutes questions, ou vous pouvez nous rejoindre au:

[serviceauxclients@firstinsurancefunding.ca](mailto:serviceauxclients@firstinsurancefunding.ca)

1 888 232 2238