

## **HOW TO DO BUSINESS WITH OAKTREE BROKERAGE and SBLI**

### **Submission:**

- -All new business applications should be faxed to 800-867-7205, emailed to ~[brokerageservices@otfc.com](mailto:brokerageservices@otfc.com) or mailed to the address below.
- Please be sure to send new business application to us using the New Business Transmittal attached. (Be sure to include your email address, this will be how you are notified that the application has been received and given a policy number.)
- If you do not receive an acknowledgment email within 1 business day, please call or email for receipt confirmation.

### **Checking Case Status:**

- Agents should register on the carrier website at [www.sbliagent.com](http://www.sbliagent.com) for case statuses, however, you will receive regular case status emails from your assigned case manager.
- Please be sure to have the policy number and client name available during all correspondence.

### **Requirements and Monies:**

- Requirements should be faxed to 800-867-7205 with a cover sheet indicating the client name and policy number.
- Please be sure to include the policy number on any premiums mailed.
- Mailing address is:

OAKTREE Brokerage  
11166 Fairfax Boulevard, Suite 300  
Fairfax, VA 22030  
Attn: Brokerage Services

- Please do not send checks without a policy number. This could delay issue.

### **Illustrations and Marketing Support:**

- Agents needing illustration or marketing support should contact their Life Sales Rep or a member of the Sales Support Team at 800-842-9124 ext. 113 or email them at [salesupport@otfc.com](mailto:salesupport@otfc.com)



**Brokerage Services**

Fax Number: 800-867-7205

**OAKTREE Brokerage**

11166 Fairfax Blvd. Suite 300

Fairfax, VA 22030

Attn: Brokerage Services-800-842-9124 ext. 444

Please fill in fields below.

---

---

**TRANSMITTAL**

DATE:

---

AGENT:

AGENT CODE:

---

AGENT FAX NUMBER:

AGENTPHONE NUMBER:

---

PROPOSED INSURED:

CARRIER:

---

SSN OR POLICY # (IF AVAILABLE):

ORDER EXAM  YES  NO

---

TOTAL # OF PAGES (WITH COVER SHEET):

---

---

NEW APPLICATION

REQUIREMENT

LICENSING

INFORMAL APPLICATION

---

---

Comments:

This message is intended only for the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure. If the reader of this message is not the intended recipient, you are hereby notified that any distribution or duplication of this communication is strictly prohibited. Any inadvertent receipt by you of such confidential information is not intended to constitute a waiver of any privilege. If you have received this communication in error, please notify us immediately by telephone and return the original to us by mail. Thank you.

---

---