

# **FirstInSite Enhanced**<sup>™</sup>

Submit a Quote

## **Topics covered in this guide:**

## Agenda

### 1. Submit a Quote

2. Tips

## Login

Click on the First
 InSite Enhanced<sup>™</sup>
 login button

firstinsurancefunding.ca

 Login with your user name (email address) and password



Select Quote
 Search

### Select quote you are looking to submit

**TIP:** Quotes that begin with a P still need policy details entered.

)uote #:			Name:				
ddress:			City:				
egion:			Postal Code:				
ustomer ID:							
pecific Quotes:	All Quotes	•					
uoting For: 🔍	All Quotes Quotes converted Quotes not conve	d into accounts erted into accounts					
	Quotes not	converted into	Ouoted Date		Total Premium	Down Payment	Sear
and the payment Option	<u>s</u> 151662	ABC Company	15/01/2020		21,600.00	3,672.00	10
Payment Option	<u>s</u> 151654	ABC Company	15/01/2020		21,600.00	3,672.00	10
Payment Option	<u>s</u> P151639	ABC Company	15/01/2020		21,600.00	3,672.00	10
Payment Option	<u>s</u> 149815	Michele - Test	13/01/2020		100,000.00	8,560.00	11
Payment Option	<u>s</u> 149286	Many Policy Lines	03/01/2020		128,160.00	12,816.00	10
🖥 💼 📄 Payment Option	<u>s</u> 149245	ABC Company	15/01/2020		21,600.00	2,160.00	10
🖥 💼 📄 Payment Option	<u>s</u> 149013	ABC Company	03/01/2020		21,650.00	1,836.00	11
🖥 💼 📄 Payment Option	<u>s</u> 147215	BMS Renewal Te	12/12/2019	0	5,000.00	428.00	11
Payment Option	<u>s</u> P146316	Walrus World	05/12/2019	•	1,000.00	85.60	11
Payment Option	<u>s</u> P146068	Walrus World	04/12/2019	۲	3,250.00	594.00	10
Payment Option	<u>s</u> P136655	Wacky Walrus W	31/10/2019	0	3,100.00	265.36	11

- Complete Policy details by selecting
   Edit
- If Policy details are already complete, advance to Terms tab
- Confirm insured's details

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



- Enter policy number and coverage type
- Enter carrier and/or MGA information
- Enter correct
  premium
  amount, fees
  and taxes and
  click Save

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

Quote - 151654	- ABC Com	pany					
Customer Informa	ation Policie	s Terms					
Policy #	Eff Date	Carrier	Cove	rage Premiu	m Policy Fees	Taxes	Total
1 AV2341	27/10/2025	Aviva Canada	GL	20,000.0	0.00	1,600.00	21,600.00
New Policy							21,600
			Policy	Details			
Policy Number:	AV2341			Coverage:	GL	GENERAL LIA	BILITY
Effective Date:	27/10/2025			Policy Term (Month	ns): 12		
Carrier:	C00002	Aviva Canada					
MGA	۹ [						
Premium:	[		20,000.00	Return Method:	Short-R	ate	
Policy Fees			0.00	Min. Earned Premi	um: 0.00	0 %	0.0
Taxes			1,600.00				
Total Amount:			21,600.00				
View Authorities	]					-	Cancel Sa
< Back							Cancel Next

# If everything is correct click Save

Quote - 151654 - ABC Company

	Quote V	/ariables		
Governing Province	Ontario	Non-Refundable Broker Fee:	0.0	
First Payment Due Date:	27/11/2025	Financed Broker Fee:	0.0	
Billing Cycle:	Monthly	Down Payment:	17.000 % 3,672.0	
Billing Method:	Pre-authorized	No. of Installments:		
Disbursement Delay: 30 Days		APR:	4.341 9	
Rate Chart:	Best Insurance Rate	Broker Premium Fin. Referral Fee:	ee 00	
Broker Premium Fin. Deferral Fee Plan	ON			
		Application Fee:		
		Application Fee:	to Defaults	
General		Application Fee: Reset	to Defaults	
General Governing Province	Ontario	Application Fee: Reset Financials Broker Premium Fin. Referral Fee:	to Defaults Recalculat	
General Governing Province First Payment Due Date:	Ontario 27/11/2025	Application Fee: Reset Financials Broker Premium Fin. Referral Fee: APR:	to Defaults Recalculat 0.0 4.341	
General Governing Province First Payment Due Date: Billing Cycle:	Ontario 27/11/2025 Monthly	Application Fee: Reset Financials Broker Premium Fin. Referral Fee: APR: Flat Rate:	to Defaults Recalculat 0.0 4.341 1.660	
General Governing Province First Payment Due Date: Billing Cycle: Disbursement Delay:	Ontario 27/11/2025 Monthly 30 Days	Application Fee: Reset Financials Broker Premium Fin. Referral Fee: APR: Flat Rate: Total Premium:	to Defaults Recalculat 0.0 4.341 1.660 21,600.0	
General Governing Province First Payment Due Date: Billing Cycle: Disbursement Delay: Pate Chart-	Ontario 27/11/2025 Monthly 30 Days Best Insurance Rate	Application Fee: Reset Financials Broker Premium Fin. Referral Fee: APR: Flat Rate: Total Premium: Down Payment:	to Defaults Recalculat 0.0 4.341 1.660 21,600.0 17.000 % <u>3,672.0</u>	
General Governing Province First Payment Due Date: Billing Cycle: Disbursement Delay: Rate Chart:	Ontario 27/11/2025 Monthly 30 Days Best Insurance Rate Plan	Application Fee: Reset Financials Broker Premium Fin. Referral Fee: APR: Flat Rate: Total Premium: Down Payment: Amount Financed:	to Defaults Recalculat 0.0 4.341 1.660 21,600.0 17.000 % <u>3,672.0</u> 17,928.0	
General Governing Province First Payment Due Date: Billing Cycle: Disbursement Delay: Rate Chart: Broker Premium Fin. Referral Fee Plan:	Ontario 27/11/2025 Monthly 30 Days Best Insurance Rate Plan ON	Application Fee: Reset Financials Broker Premium Fin. Referral Fee: APR: Flat Rate: Total Premium: Down Payment: Amount Financed: Finance Charge:	to Defaults Recalculat 0.0 4.341 1.660 21,600.0 17.000 % <u>3,672.0</u> 17,928.0 358.6	
General Governing Province First Payment Due Date: Billing Cycle: Disbursement Delay: Rate Chart: Broker Premium Fin. Referral Fee Plan: Equal Pay Quote:	Ontario 27/11/2025 Monthly 30 Days Best Insurance Rate Plan 0N No	Application Fee: Reset Financials Broker Premium Fin. Referral Fee: APR: Flat Rate: Total Premium: Down Payment: Amount Financed: Finance Charge: Total of Payments:	to Defaults Recalculat 0.0 4.341 1.660 21,600.0 17.000 % <u>3,672.0</u> 17,928.0 <u>358.6</u> 18 286.6	
General Governing Province First Payment Due Date: Billing Cycle: Disbursement Delay: Rate Chart: Broker Premium Fin. Referral Fee Plan: Equal Pay Quote: Earned Broker Fee:	Ontario 27/11/2025 Monthly 30 Days Best Insurance Rate Plan 0N No 0.00	Application Fee: Reset Financials Broker Premium Fin. Referral Fee: APR: Flat Rate: Total Premium: Down Payment: Amount Financed: Finance Charge: Total of Payments: No. of lastalleconts.	to Defaults Recalculat 0.0 4.341 1.660 21,600.0 17.000 % <u>3,672.0</u> 17,928.0 <u>358.0</u> 18,286.0	

### > Click Submit

Quote - 151662 - ABC Company				
Customer Information Policies Ter	ms <u>S</u> ummary <u>D</u> ocur	ments		
	Quote V	/ariables		
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 ADD-			4.341 %
Rate Chart:	Best Insurance Rate	Broker Premium Fin, Referral Fee:		0.00
Broker Premium Fin. Referral Fee Plan:	ON	Application Fee:		
		Deset	to Defaults	ecalculate
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
Data Chartr	Best Insurance Rate	Down Payment:	17.000 %	3,672.00
Rate Chart.	Plan	Amount Financed:		17,928.00
Broker Premium Fin. Referral Fee Plan:	ON	Finance Charge:		358.60
Equal Pay Quote:	No	Total of Payments:		18.286.60
Earned Broker Fee:	0.00	No of Installegents		10,200.00
Financed Broker Fee:	0.00	No. or installments:		1000.00
		Installment An		1,828.66
		Submit lit	Close Paymer	nt Options

PBS Dialog - Google Chrome						×
auat.pbs.first-quotes.com/MainViewE	Dialog.aspx					Q
On Line Account Submission F	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 a	nd customer banking inform	mation before submitting.				
Is your Brokerage keeping the down payment? O Yes * No		O Yes 💌 No	Confirm down payme	ent and any additional		
Note: If you are not collecting the down payment the Brokerage is still responsible for tim		Il responsible for time on risk.	retained amounts			
Additional amount retained by the br	rokerage:*					
* If applicable, enter the dollar amount t	that the broker has retained in	addition to the down payment a	mount.			
Complete Cheque Information:						
Account Holder Name:			Entor incurad/a	Cheque Sample		
Institution Number:			banking info	cheque Sumple		
Financial Institution Name:			-	<u>ver</u>		
Bank Transit:				P 104P C 11345=510C 0113=455		
Account Number:				S Digit S Digit Up to 14 Digit Trensit No. Jasottution No. Account No.		
obiona munite of sitting a shuterer ob						
Choose file	pload signed Pren	nium Finance Agree	ement and VOID cheque			
Account Submission Note:			ement and vorb eneque			
(Optional) If you	have any special	instructions, enter	a Loan Submission Note			le.
A note is only necessary if you would like	e to communicate something	specific about this contract to the	e FIRST Insurance Funding service team.			
AGENT OR BROKER REPRESEN	No need	to sign, email, fax	; simply click to agree			
By selecting 'Complete On Line Submis representations and you have the author	ssion' you warrant and agree to prity to submit this contract an	to the Agent or Broker Represen d agree to the representations.	tations as outlined in the contract. You further	agree that the brokerage has been furnishe	d with th	ese
You further warrant that the Brokerage	has collected the down payme	ent, if applicable, and any other	sums due as required by the agreement and is	holding same or they are remitted with this	agreem	ent.
Complete On Line Submissi	ion ancel Submission					

#### Click Complete On Line Submission

 Receive confirmation that your contract has been submitted for processing



## Tips

- 1. Your login is now your email address
- 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
- Training guides, videos, and FAQs available on our website – Visit First InSite Enhanced<sup>™</sup> 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