



**PLEASE PRINT OR TYPE**

1. BUSINESS ENTITY NAME		2. INCORPORATION/FORMATION DATE MO: ____ DAY: ____ YEAR: ____		3. FEIN #	
4. DBA/TRADE NAME (IF APPLICABLE)				5. STATE OF DOMICILE	
6. BUSINESS ADDRESS			7. CITY		8. STATE
9. ZIP		10. PHONE NUMBER		11. FAX NUMBER	
12. BUSINESS WEB SITE ADDRESS			13. BUSINESS E-MAIL ADDRESS		
14. MAILING ADDRESS			15. P.O. BOX		16. CITY
17. STATE		18. ZIP			

**DESIGNATED/RESPONSIBLE LICENSED PRODUCER**

19. IDENTIFY AT LEAST ONE DESIGNATED/RESPONSIBLE LICENSED PRODUCER (SEE MATRIX OF STATE REQUIREMENTS FOR A LIST OF JURISDICTIONS THAT REQUIRE THE DESIGNATED/RESPONSIBLE LICENSED PRODUCER TO BE AN OFFICER, DIRECTOR, OR PARTNER OF THE BUSINESS ENTITY.)

NAME	SOCIAL SECURITY #
NAME	SOCIAL SECURITY #
NAME	SOCIAL SECURITY #
NAME	SOCIAL SECURITY #

**OWNERS, PARTNERS, OFFICERS, AND DIRECTORS**

20. IDENTIFY ALL OWNERS, PARTNERS, OFFICERS, AND DIRECTORS OF THE BUSINESS ENTITY.

NAME	TITLE	SOCIAL SECURITY #
NAME	TITLE	SOCIAL SECURITY #
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NAME	TITLE	SOCIAL SECURITY #

(STATE USE)

THIS APPLICATION APPLIES TO LICENSES ISSUED FOR THE ADMITTED MARKET ONLY

**JURISDICTION AND TYPE OF LICENSE REQUESTED**

21. NEXT TO EACH JURISDICTION, CHECK THE LEGAL BUSINESS TYPE, LICENSE/REGISTRATION TYPE(S), AND LINE(S) OF AUTHORITY FOR WHICH YOU ARE APPLYING. CHECK THE LAST COLUMN IF YOU HAVE BEEN PREVIOUSLY LICENSED IN THE JURISDICTION TO WHICH YOU ARE APPLYING.

LEGAL BUSINESS TYPE: C - CORPORATION P - PARTNERSHIP S - SOLE PROPRIETORSHIP LLC - LIMITED LIABILITY COMPANY LLP - LIMITED LIABILITY PARTNERSHIP  
 LICENSE/REG TYPES: A - AGENT B - BROKER P - PRODUCER Y - AGENCY  
 LINES OF AUTHORITY: L - LIFE H - ACCIDENT & HEALTH OR SICKNESS P - PROPERTY C - CASUALTY V - VARIABLE LIFE/VARIABLE ANNUITY

LEGAL BUSINESS TYPE					LICENSE/REG TYPE					JURIS-DICT-ION	LINES OF AUTHORITY					PREV LICENSED? (Jurisdictions you are applying to only)		LEGAL BUSINESS TYPE					LICENSE/REG TYPE					JURIS-DICT-ION	LINES OF AUTHORITY					PREV LICENSED? (Jurisdictions you are applying to only)	
C	P	S	LLC	LLP	A	B	P	Y	L		H	P	C	V	YES	NO	C	P	S	LLC	LLP	A	B	P	Y	L	H		P	C	V	YES	NO		
					N/A	N/A		N/A	AK									N/A	N/A	N/A	N/A	NC	N/A	N/A	N/A	N/A									
									AL									N/A			N/A	N/A	ND												
N/A	N/A			N/A	N/A			N/A	AR	N/A	N/A	N/A	N/A	N/A						N/A	N/A	N/A	NE	N/A	N/A	N/A	N/A	N/A							
		N/A					N/A	N/A	AZ													NH													
		N/A		N/A			N/A	N/A	CA										N/A	N/A		N/A				N/A									
					N/A	N/A		N/A	CO						N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	NM	N/A	N/A	N/A	N/A	N/A							
							N/A	N/A	CT								N/A	N/A			N/A	N/A	NV												
							N/A		DC					N/A								NY													
							N/A		DE											N/A	N/A	N/A	OH												
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	FL	N/A	N/A	N/A	N/A	N/A		N/A			*	N/A		OK													
									GA													OR													
									HI							N/A					N/A	N/A	PA												
					N/A	N/A		N/A	IA	N/A	N/A	N/A	N/A	N/A								RI													
		N/A		N/A			N/A		ID								N/A	N/A	N/A	N/A	N/A	SC													
					N/A	N/A	N/A		IL	N/A	N/A	N/A	N/A	N/A							N/A	N/A	SD												
							N/A	N/A	IN							N/A	N/A	N/A	N/A	N/A	N/A	N/A	TN	N/A	N/A	N/A	N/A	N/A							
					N/A	N/A	N/A		KS	N/A	N/A	N/A	N/A	N/A			N/A				N/A	N/A	TX												
		N/A				N/A	N/A	N/A	KY					N/A								UT													
							N/A	N/A	LA							N/A				N/A	N/A	N/A	VA												
									MA												N/A		VT												
		N/A		N/A			N/A	N/A	MD												N/A		WA					N/A							
					N/A	N/A	N/A	*	ME	N/A	N/A	N/A	N/A	N/A						N/A	N/A	N/A	WI	N/A	N/A	N/A	N/A	N/A							
					N/A	N/A	N/A		MI							N/A	N/A	N/A	N/A	N/A	N/A	N/A	WV	N/A	N/A	N/A	N/A	N/A							
					N/A	N/A	N/A		MN													WY													
					N/A	N/A	N/A		MO	*	*	*	*	*									GU												
						N/A	N/A		MS													PR													
					N/A	N/A		N/A	MT													VI													

\*SEE MATRIX OF STATE REQUIREMENTS

**BACKGROUND INFORMATION**

22. Please read the following very carefully and answer every question:

1. Has the business entity or any owner, partner, officer, or director ever been convicted of, or is the business entity or any owner, partner, officer, or director currently charged with committing a crime, whether or not adjudication was withheld?  Yes  No

"Crime" includes a misdemeanor, felony, or a military offense. You may exclude misdemeanor traffic citations and juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence, or a fine.

If you answer yes, you must attach to this application:

- a) a written statement explaining the circumstances of each incident,
- b) a copy of the charging document, and
- c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

2. Has the business entity or any owner, partner, officer, or director ever been involved in an administrative proceeding regarding any professional or occupational license?  Yes  No

"Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, placed on probation or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding which is related to a professional or occupational license. "Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. You may exclude terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

If you answer yes, you must attach to this application:

- a) a written statement identifying the type of license and explaining the circumstances of each incident,
- b) a copy of the Notice of Hearing or other document that states the charges and allegations, and
- c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

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**BACKGROUND INFORMATION (Continued)**

3. Has any demand been made or judgment rendered against the business entity or any owner, partner, officer, or director for overdue monies by an insurer, insured, or producer, or have you ever been subject to a bankruptcy proceeding?  Yes  No  
 If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment.

4. Has the business entity or any owner, partner, officer, or director ever been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement?  Yes  No  
 If you answer yes, identify the jurisdiction(s): \_\_\_\_\_

5. Is the business entity or any owner, partner, officer, or director a party to, or ever been found liable in, any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty?  Yes  No  
 If you answer yes, you must attach to this application:  
 a) a written statement summarizing the details of each incident,  
 b) a copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, and  
 c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

6. Has the business entity or any owner, partner, officer, or director ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct?  Yes  No  
 If you answer yes, you must attach to this application:  
 a) a written statement summarizing the details of each incident, and explaining why you feel this incident should not prevent you from receiving an insurance license, and  
 b) copies of all relevant documents.

**APPLICANT'S CERTIFICATION AND ATTESTATION**

23. The undersigned owner, partner, officer, or director of the business entity hereby certifies, under penalty of perjury, that:

1. All of the information submitted in this application and attachments is true and complete and I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license or registration revocation and may subject me and the business entity to civil or criminal penalties.
2. Where required by law, the business entity hereby designates the Commissioner, Director, or Superintendent of Insurance, or an appropriate representative in each jurisdiction for which this application is made to be its agent for service of process regarding all insurance matters in the respective jurisdiction and agree that service upon the Commissioner or Director of that jurisdiction is of the same legal force and validity as personal service upon the business entity.
3. The business entity grants permission to the Commissioner or Director of Insurance in each jurisdiction for which this application is made to verify information supplied with any federal, state, or local government agency, current or former employer, or insurance company.
4. Every owner, partner, officer, or director of the business entity either a) does not have a current child-support obligation, or b) has a child-support obligation and is currently in compliance with that obligation.
5. I authorize the jurisdiction to give any information they may have concerning me to any federal, state, or municipal agency, or any other organization, and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
6. I acknowledge that I am familiar with the insurance laws of the jurisdiction to which I am applying for licensure/registration.
7. If required, I have received a Certificate of Good Standing from the jurisdiction's Secretary of State in which I am applying.

Must be signed by an officer, director, principal, or partner of the business entity.

_____	_____	_____
Mo	Day	Year
_____		_____
Signature of Applicant		Title
_____		_____
Typed or Printed Name		Address
_____		_____
Social Security Number		City/State/Zip

**ATTACHMENTS**

24. The following attachments must accompany the application, otherwise the application may be returned unprocessed or considered deficient.

1. Original Letter of Certification from your resident license/registration jurisdiction dated within 90 days of application (copies of your resident license/registration are not acceptable)
2. Any jurisdiction specific attachments listed in the Matrix of State Requirements

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