Please note the application may be revised on a bi-annual basis. To ensure you are filing the current version of the application, please reference the National Insurance Producer Registry web site at www.nipr.com.

Uniform Application for Business Entity License Renewal/Continuation (Please Print or Type)

Check appropriate boxes for							
 Resident License 	License #:	Li	License Type:				
□ Non-Resident License I	License #:	se #: License Type:					
Demographic Information							
Business Entity Name				② FEIN	-		
3) Home State & Home State License Number	er		If assigned,	National Producer Nun	nber (NPN)		
S Is the business entity affiliated with a final	ncial institution/bank?	Ye	s	No			
6 Business Address			7 City		8 State	9) Zip Code or Foreign Country	
	Fax Number		(2) Busin	ess Web Site Address	13 Busine	ess E-Mail Address	
(14) Mailing Address	(13	P.O. Box	(6) City		17 State	®Zip Code or Foreign Country	
	Designate	d/Responsi	ble License	d Producer		•	
(1) Identify at least one Designated/Responsible Licensed Producer responsible for the business entity's compliance with the insurance laws, rules and regulations of this state. (See Matrix of State Requirements at www.nipr.com for jurisdictions that require the designated/responsible licensed producer to be an officer, director or partner of the business entity.)							
Name	SSN		-	NPN			
Name	SSN	-	-	NPN			
Name	SSN		-	NPN			
Name	SSN	-	-	NPN			

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Background Questions		
NOTE: For Questions 1a, 1b, and 1c "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 contender or no contest.		
If you answer yes to any of these questions, you must attach to this application: a) a written statement identifying all parties involved (including their percentage of ownership, if any) and explaining the circumstances of each incident, b) a copy of the charging document of each incident, c) a copy of the official document s of each incident, which demonstrates the resolution of the charges or any final judgment	←	Formatted : Indent: First line: 0.13", Tab stops: 0.44", Lef
la. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company— <u>EVER</u> been convicted of, or is currently charged with, committing a misdemeanor or had a judgment withheld or deferred for a misdemeanor which has not been previously reported to this insurance department?	Yes No	+ Not at 0.31" Formatted: Font: Bold
You may exclude the following misdemeanor convictions or pending misdemeanor charges: traffic citations, driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license.		
You may also exclude juvenile adjudications (offenses where you were adjudicated delinquent in juvenile court.)		
1b. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, EVER ever-been convicted of, or is currently charged with committing a felony or had a judgment withheld or deferred for a felony which has not been previously reported to this insurance department?	Yes No	
You may exclude juvenile adjudications (offenses where you were adjudicated delinquent in a juvenile court.)		
If you have a felony conviction involving dishonesty or breach of trust, have you applied for written consent to engage in the business of insurance in your home state as required by 18 USC 1033? — Note: For detailed information related to the requirements of 18 USC 1033 as it pertains to insurance licensing please refer to the NAIC publication "Guidelines for State Insurance Regulators to the	N/AYesNo	Formatted: Font: Times New Roman, Not Highlight
Violent Crime Control and Law Enforcement Act of 1994" found at https://www.naic.org/documents/prod_serv_legal_sir_op.pdf		Formatted: Font: Times New Roman, Not Highlight
If so, was consent granted? (Attach copy of 1033 consent approved by home state.)	N/A Yes No	Formatted: Font: Times New Roman, Not Highlight Formatted: Font: Times New Roman
1c. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, EVER ever been convicted of or is currently charged with a military offense which has not been previously reported to this insurance department?	Yes No	Tolliated: Folit. Tilles New Kollian
NOTE: For Questions 1a, 1b, and 1e "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 noto contendere or no contest, or having been given probation, a suspended sentence or a fine.		
If you answer yes to any of these questions, you must attach to this application: — a) a written statement identifying all parties involved (including their percentage of ownership, if any) and explaining the circumstances of each incident, — b) — a copy of the charging document,		
e) 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 of the business entity, or manager or member of a limited liability company, EVER been named or involved as a party in an administrative proceeding, including a FINRA sanction or arbitration proceeding, regarding any professional or occupational license, or registration, which has not been previously reported to this insurance department?		
"Involved" means having a license or registration censured, suspended, revoked, canceled, terminated, restricted; or, being assessed a fine, placed on probation, sanctioned or surrendering a license or entering into a settlement 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 denialYou may exclude terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal or late filing fee.		
If you answer yes, you must attach to this application: a) a written statement identifying the type of license; identifying all parties involved (including their percentage of ownership, if any) 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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NAIC	
National Association of Insurance Commissioners	

Uniform Application for Business Entity License Renewal/Continuation

Applicant Name: _

3. In response to a "Yyes" answer to one or more of the Background Questions for this renewal application, are you submitting, or have you previously submitted document(s) to the NAIC/NIPR Attachments Warehouse?

N/A__Yes __ No__

NOTE: The state(s) identified on this application will receive an alert that your supporting documents are available if:

- You have previously loaded a document(s);
- You have recently submitted an application that is pending;
- You are submitting the same type of application (resident/nonresident, initial/renewal); and
- You are answering "Yes" to the same background question(s).

If you have not previously loaded your supporting documents, you may do so after you have successfully completed your application. $\underline{You\ will\ be\ provided\ a\ link\ to\ the\ Attachment\ Warehouse\ instructions\ upon\ completion.}}$

Will you be associating (linking) previously filed documents from the NAIC/NIPR Attachments Warehouse to this application?—

Note: If you have previously submitted documents to the Attachments Warehouse that are intended to be filed with this renewal application, you must go to the Attachments Warehouse and associate (link) the supporting document(s) to this application based upon the particular background question number you have answered yes to on this application. You will receive information in a follow up page at the end of the application process, providing a link to the Attachment Warehouse instructions.

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NAIC
National Association of Insurance Commissioners
Applicant Name:

Uniform Application for Business Entity License Renewal/Continuation

Applicant's Certification and Attestation On behalf of the business entity or limited liability company, the undersigned owner, partner, officer or director of the business entity, or member or manager of a limited liability company, 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 or limited liability company to civil or criminal penalties.
- 2. Unless provided otherwise by law or regulation of the jurisdiction, the business entity or limited liability company 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 or limited liability company grants permission to the Commissioner or Director of Insurance in each jurisdiction for which this application is made to
- verify any 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, or member or manager of a limited liability company, 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 jurisdictions to which this application is made to give any information they may have concerning the business entity or any individual named in this application.

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 7. I authorize the jurisdictions to which this application is made to give any information they may have concerning the business entity or any individual named in this application.

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 8. I authorize the jurisdiction to which this application and in the further and the jurisdiction and into the jurisdiction whatever nature by reason of furnishing such information.
- 6. I acknowledge that I understand and that the business entity will comply with the insurance laws and regulations of the jurisdictions to which I am applying for licensure/registration.
- 7. For Non-Resident License Applications, I certify that Lamthe business entity is licensed and in good standing in my home state/resident state for the lines of authority requested from the non-resident state. The state will rely on an electronic verification of an Applicant's resident license through the NAIC's State Producer Licensing Database in lieu of requiring an original Letter of Certification from the resident state.

 8. I hereby certify that upon request, I will furnish the jurisdiction(s) to which I am applying, on behalf of the business entity, certified copies of any documents attached to
- this application or requested by the jurisdiction(s).
- uns application on requested by the Junisacional, 9.

 9. I certify that the Designated Responsible Licensed Producer(s) named on this application understands that he/she is responsible for the business entity's compliance with the insurance laws, rules and regulation of the State.

City

10. I acknowledge that jurisdiction specific attachments may be required with this application. State S www.NIPR.com. Incomplete applications may be returned as unprocessed and considered deficier

te Specific Requirements and Fees information are available at tient.	+	 Н	Formatted: Indent: Hanging: 0.19"
IOIL.			
Must be signed by an officer, director, or partner of the business entity, or member or manager of a limited liability company:			
Month/Day/Year			
Signature			
Typed or Printed Name			
Title			
Address			

Zip