



- 4. Business Address (required).** This **must be** the physical business address at which business records of insurance transactions are maintained. P.O. Boxes are **not** acceptable.

Number and Street (Must be the physical location - PO Box not allowed)	Apartment, Suite, Etc.
City	State
	Zip Code

**5. Date of Birth (include month, day and year):** \_\_\_\_\_

**6. Daytime Phone (include area code):** \_\_\_\_\_

**APPLICATIONS WILL NOT BE PROCESSED UNTIL PROPER DOCUMENTATION OR DETAILS ARE RECEIVED AND A REVIEW IS COMPLETED.**

**7. Excluding traffic violations and first offense DWI:**

a. Do you currently have any <b>pending misdemeanor or felony charges</b> (by indictment, information or any other instrument) filed against you in Texas, in any other state or by the federal government?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
b. Have you ever been convicted of any <b>misdemeanor or felony offense</b> in Texas, in any other state or by the federal government?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
c. Have you ever had <b>adjudication deferred on any misdemeanor or felony charge or offense</b> in Texas, in any other state or by the federal government?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
d. Have you ever <b>served any period of probation</b> for any misdemeanor or felony offense in Texas, in any other state or by the federal government?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

If you answered **"yes"** to any of questions 7a-d, you must submit original **certified** copies of the charging document, indictment, information, or any other charging document, judgment of conviction, and/or deferred adjudication order, probation order, order terminating probation, community supervision and/or parole certificate for each and every crime or offense. If the court states they no longer have the records, please have the court provide us with a letter on their letterhead stating that fact. If you were arrested only and not prosecuted, please provide a records search from the appropriate jurisdiction indicating a final disposition. You must submit a statement describing the circumstances leading to the offense(s). You must include your age at the time(s) of the offense(s). You may provide letters of recommendations from any persons in contact with you who are aware of your criminal past.

- 8.** Have you or has any corporation, partnership, association or firm in which you were a director, officer, shareholder, manager, member, or partner ever been the subject of an administrative or legal action filed by Texas or any other insurance department, or financial regulatory agency, or of an action filed on behalf of Texas or any other state or by the federal government based on alleged violations of state or federal insurance, securities or financial regulatory laws that you have not previously reported to the Texas Department of Insurance?

<input type="checkbox"/> No	<input type="checkbox"/> Yes	If you answer <b>"yes,"</b> a license will not be issued until full details of the administrative or legal action are provided.
-----------------------------	------------------------------	---

- 9.** Are you indebted to any policyholder, insurance or reinsurance company, insurance agency, general agent, managing general agency, premium finance company, or court-appointed liquidator for premiums collected or commissions retained, or have any claims or judgments been filed against you for retaining premiums or commissions?

<input type="checkbox"/> No	<input type="checkbox"/> Yes	If you answer <b>"yes,"</b> a license will not be issued until full details of the of the indebtedness are provided.
-----------------------------	------------------------------	--

- 10.** Have you ever had an agency contract or company appointment canceled for cause (e.g., misrepresentation, misappropriation, etc.)?

<input type="checkbox"/> No	<input type="checkbox"/> Yes	If you answer <b>"yes,"</b> a license will not be issued until full details are provided. Cancellation for cause does not include cancellation due to expiration (nonrenewal).
-----------------------------	------------------------------	--

- 11.** During the last six months, have you applied for or received a temporary license of the type for which you are now applying?

<input type="checkbox"/> No	<input type="checkbox"/> Yes	If you answer <b>"yes,"</b> a temporary license will not be issued. A temporary license may not be renewed or issued more than once in a consecutive six-month period to the same applicant).
-----------------------------	------------------------------	---

## Part II. All Lines Adjusters, Property and Casualty Adjusters, and Workers Compensation Adjusters ONLY

### Public Insurance Adjusters must use Part III.

Adjusters may add additional qualifications without completing a new application by submitting to TDI a copy of the existing adjuster license along with a copy of the approved course certificate, or by passing the Prometric examination. The Certificate of Completion must show that within the past 12 months the adjuster has completed a certified adjuster prelicensing education program and passed an examination. Adjuster applicants must complete this part with the name of the firm or insurer with whom they will be employed or, if self-employed, with the applicant's name.

12. Provide the name of the firm or insurer for whom you will be employed as an adjuster. If self-employed, enter your name.

\_\_\_\_\_  
Name of Firm or Insurer (or Applicant Name, if Self-Employed)

## Part III. Public Insurance Adjusters ONLY

### Public Insurance Adjuster license applicants must complete this part and parts I and VIII of this application.

13. Provide the name of the firm or person for whom you will be employed as a public insurance adjuster. Provide the current TDI Public Insurance Adjuster license number of your employer. If self-employed, enter your name.

\_\_\_\_\_  
Name of Employer (or Applicant Name, if Self-Employed)

\_\_\_\_\_  
Employer's Texas Public Insurance Adjuster License Number

14. **Financial Responsibility.** Each public insurance adjuster license applicant must demonstrate proof of financial responsibility with a surety bond executed with the applicant as sole principal in the amount of not less than \$10,000 payable to the Texas Department of Insurance on a bond form available from TDI or at the agent section of [www.tdi.state.tx.us](http://www.tdi.state.tx.us). See *Texas Insurance Code* §4102.105 and 28 *Texas Administrative Code* §§19.705-19.707. The original bond must be attached to this application. Individual applicants who have registered with TDI as a Public Insurance Adjuster Trainee may meet the financial responsibility requirement by maintaining the bond that was used for the Trainee registration.

I have attached my original Public Insurance Adjuster Bond

I have maintained my Public Insurance Adjuster Trainee Bond

15. **Fingerprints.** Each public insurance adjuster license applicant **must** file with this application a receipt from L1 Enrollment Services or Prometric evidencing that the applicant's fingerprints have been electronically submitted to the Texas Department of Public Safety (DPS). Nonresident applicants must submit fingerprint receipt. The fingerprint receipt is required unless previously submitted to TDI with another license application and the applicant holds an active TDI license.

Fingerprints provided for this application shall be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation in accordance with applicable statutes.

I have an active TDI license and I have already submitted fingerprints to TDI with another license application; or

I have attached a copy of fingerprint receipt.

16. **Criminal History Record.** Each nonresident public insurance adjuster license applicant must file with this application an original criminal history record of the applicant obtained from the state law enforcement agency of the applicant's state of residence. I have attached my criminal history records.

No, I am a resident of Texas

Yes, the record is attached.

**17. Agent for Service of Process.** All nonresident applicants for a public insurance adjuster license must provide the name and address of their agent for service of process in the State of Texas as required in *Texas Insurance Code, §4102.107*.

\_\_\_\_\_  
Name of Texas Agent for Service of Process

\_\_\_\_\_  
Texas Address of Agent for Service of Process

\_\_\_\_\_  
City

\_\_\_\_\_  
State **TX**

\_\_\_\_\_  
Zip Code

**Part IV. Surplus Lines Agents ONLY**

**18. Provide your current Texas General Lines—Property and Casualty Agent or Texas Managing General Agent TDI license number.** (You must hold a current General Lines—Property and Casualty license or a Managing General Agent license to qualify for a Surplus Lines license.)

**TDI License Number:** \_\_\_\_\_

**Part V. Insurance Service Representatives ONLY**

**19. Certificate for Insurance Service Representatives.** Must be completed by the appointing licensed General Lines—Property and Casualty Agent or Personal Lines Property and Casualty Agent or an officer or partner of a licensed General Lines—Property and Casualty Agency or Personal Lines Property and Casualty Agency.

**CERTIFICATE FOR INSURANCE SERVICE REPRESENTATIVES**

This is to certify that the above-mentioned applicant is appointed to act as an Insurance Service Representative (ISR) for this General Lines—Property and Casualty Agent/Agency or Personal Lines Property and Casualty Agent/Agency in the State of Texas, subject to the applicant’s qualifying for a license. If and when this appointment is terminated or canceled, the Department must be notified immediately of such termination. The ISR Transfer/Cancel Employment Form LHL208 may be found at the agent page of [www.tdi.state.tx.us](http://www.tdi.state.tx.us).

**Appointing General Lines—Property and Casualty or Personal Lines Property and Casualty AGENT:**

\_\_\_\_\_  
SIGNATURE of Sponsoring Agent

\_\_\_\_\_  
PRINT or TYPE Sponsoring Agent's Legal Name  
(As it appears on the current license)

\_\_\_\_\_  
Agent's TDI License Number

**Appointing General Lines—Property and Casualty or Personal Lines Property and Casualty AGENCY:**

\_\_\_\_\_  
SIGNATURE of Agency Officer or Partner

\_\_\_\_\_  
PRINT or TYPE Signing Officer's or Partner's Name

\_\_\_\_\_  
PRINT or TYPE Sponsoring Agency's Name  
(As it appears on the current license)

\_\_\_\_\_  
Agency's TDI License Number

DATE SIGNED \_\_\_\_\_

**Part VI. Notice of Appointment (General Lines Agents [GL], Life Agents [LAGT], Limited Lines Agents [LL], Managing General Agents [MGA] and Personal Lines Property and Casualty Agents [PLPC] ONLY)**

**20. Notice of Appointment.** To make a company or subagent appointment with the license application, the Notice of Appointment form on Page 36 must be signed in ink by an authorized appointing official of the appointing INSURANCE COMPANY, AN EXECUTIVE OFFICER OR PARTNER OF THE SPONSORING AGENCY, OR THE SPONSORING INDIVIDUAL AGENT. The form will be rejected if it does not contain the title and original signature of the signing representative. The applicant's signature will not be accepted. The Notice of Appointment must include the date the form is signed. A Notice of Appointment does **not** apply to Insurance Adjuster, Public Insurance Adjuster, Risk Manager, Surplus Lines, Insurance Service Representative, or Life and Health Insurance Counselor licenses.

**Temporary License.** Only applicants for a General Lines Agent, Life Agent, Limited Lines Agent, Managing General Agent, or Personal Lines Property and Casualty Agent License may apply for a temporary license with this application. If a temporary license is requested by the appointing company, agency or agent and if the company, agency or agent and applicant are eligible, TDI will issue such a license for a period of 90 days, without examination. A temporary license may not be renewed or issued more than once in a consecutive six-month period to the same applicant. **A temporary license application must include a completed Notice of Appointment. Applicants for a Limited Lines or Managing General Agent license may only be appointed by an Insurance company.**

**Insurance Company Appointments.** If a completed Notice of Appointment is not received with a General Lines Agent, Life Agent, Limited Lines Agent, Managing General Agent, or Personal Lines Property and Casualty Agent License application, the license may be issued. However, not later than the 30th day after the effective date of the agent's appointment by the insurance company, a TDI Notice of Appointment with the \$10.00 fee must be submitted to TDI.

**Subagent Appointments.** A licensed and appointed agent must submit a completed TDI Notice of Appointment with the \$10.00 fee to notify TDI of the appointment of a subagent. **ONLY GENERAL LINES AGENTS, PERSONAL LINES PROPERTY AND CASUALTY AGENTS AND LIFE AGENTS MAY APPOINT SUBAGENTS OR BE APPOINTED AS SUBAGENTS.**

- A General Lines - Life, Accident and Health Agent may appoint a General Lines - Life Accident and Health Agent or a Life Agent.
- A Life Agent may appoint a General Lines - Life Accident and Health Agent or a Life Agent.
- A General Lines - Property and Casualty Agent may appoint a General Lines - Property and Casualty Agent or a Personal Lines Property and Casualty Agent.
- A Personal Lines Property and Casualty Agent may appoint a General Lines - Property and Casualty Agent or a Personal Lines Property and Casualty Agent.

**NOTICE OF APPOINTMENT FOLLOWS ON THE NEXT PAGE.**

**PLEASE FOLLOW INSTRUCTIONS ON PREVIOUS PAGE.**

**NOTICE OF APPOINTMENT FOR GL, LAGT, LL, MGA AND PLPC APPLICANTS**

APPLICANT'S FULL LEGAL NAME (AS SHOWN IN PART I OF THIS APPLICATION) \_\_\_\_\_

**Only ONE sponsor per application. Enter company, agency or agent information.**

**Name of Insurance Company appointing a GL, LAGT, LL, MGA or PLPC applicant:**

APPOINTING COMPANY NAME (GROUP NAMES NOT ACCEPTABLE) \_\_\_\_\_

NAIC NUMBER OF APPOINTING COMPANY \_\_\_\_\_

**OR—Name of Individual Agency sponsoring a GL, LAGT or PLPC as a Subagent:**

SPONSORING AGENCY NAME  
(AS IT APPEARS ON THE CURRENT AGENCY LICENSE) \_\_\_\_\_

AGENCY TAX ID NUMBER \_\_\_\_\_

**OR—Name of Agent sponsoring a GL, LAGT or PLPC as a Subagent:**

SPONSORING AGENT NAME  
(AS IT APPEARS ON THE CURRENT AGENT LICENSE) \_\_\_\_\_

SSN OF SPONSORING INDIVIDUAL AGENT \_\_\_\_\_

**Temporary License:** (for GL, LIFE, LL, MGA, or PLPC license types only):

Does this company, agency or agent want the above named applicant to receive a temporary license to act as a full-time agent in accordance with the provisions of the Texas Insurance Code?  No  Yes

If "Yes," please provide the telephone number of the Office where the agent will be assigned: (\_\_\_\_\_) \_\_\_\_\_

**Managing General Agent:** This section must be completed by an officer of the appointing company or carrier having personal knowledge that the applicant has had experience or instruction that would qualify the applicant as a managing general agent.

- Will the above managing general agent applicant have claim settlement authority for the company or carrier?  Yes  No
- Does the claim settlement authority exceed \$25,000 on any one claim?  Yes  No
- Does the claim settlement authority include third-party liability other than property damage?  Yes  No
- Are funds exceeding \$100,000 customarily held by the managing general agent for the purpose of paying losses and loss adjustment expenses for the company or carrier?  Yes  No

**The Appointing Official must read and sign the following statements:**

This is to certify that the above-mentioned applicant is appointed to act as an agent for this company OR a subagent for my agency OR a subagent for me in the State of Texas subject to the applicant's qualifying for a license. If and when this appointment is terminated or canceled, the Department will be notified immediately of such termination.

This applicant meets the requirements as set out in the *Texas Insurance Code* and the rules and regulations promulgated by the Texas Department of Insurance for the type of license applied for herein.

I acknowledge my responsibility for ensuring that the applicant receives training if required by the *Texas Insurance Code*.

\_\_\_\_\_  
SIGNATURE of Appointing Official of Appointing Insurance Company  
OR Executive Officer or Partner of Appointing Agency  
OR Appointing Individual Agent

\_\_\_\_\_  
PRINT OR TYPE Appointing Official's Legal Name and Title  
OR Officer's or Partner's Legal Name and Title  
OR Individual Agent's Legal Name

DATE SIGNED \_\_\_\_\_



**DO NOT SEND THIS APPLICATION TO TDI.**

**SEND COMPLETED APPLICATION, COMPANY CHECK, CERTIFIED CHECK OR MONEY ORDER AND OTHER REQUIRED DOCUMENTATION TO:**

**Oak Hill Technology**  
 ATTN: Texas Insurance Application  
 5508 Hwy. 290 West, Suite 202  
 Austin, TX 78735-8816  
 Phone: 866.267.0455

**General Information**

**Application sections to be completed by license type**

License Type	Part I	Part II	Part III	Part IV	Part V	Part VI	Part VII	Part VIII
1. General Lines L&H Agent *	●					<b>X</b>	●	●
2. General Lines P&C Agent *	●					<b>X</b>	●	●
3. Insurance Service Representative	●				●		●	●
4. Personal Lines Property and Casualty Agent	●					<b>X</b>	●	●
5. Managing General Agent *	●					<b>X</b>	●	●
6. Surplus Lines Agent	●			●			●	●
7. L&H Insurance Counselor	●						●	●
8. Limited Lines Agent *	●					<b>X</b>	●	●
9. Life Agent *	●					<b>X</b>	●	●
10. Adjuster – All Lines	●	●					●	●
11. Adjuster – Property and Casualty	●	●					●	●
12. Adjuster – Workers Comp	●	●					●	●
13. Risk Manager	●						●	●
14. Public Insurance Adjuster	●		●					●

\*Temporary licenses are available only for these license types.

**X**—Mandatory for those requesting a temporary license, optional for others.

Fees are \$50 per license type, or \$150 for a temporary license. Fees must be paid by company check, cashier's check or money order, made payable to Prometric, or by Visa or MasterCard. All license fees are nonrefundable and nontransferable.

**NOTICE ABOUT CERTAIN INFORMATION LAW AND PRACTICES:** With few exceptions, you are entitled to be informed about the information that the Texas Department of Insurance (TDI) collects about you. Under sections 552.022 and 552.023 of the *Texas Government Code*, you have a right to review or receive copies of information about yourself, including private information. However, TDI may withhold information for reasons other than to protect your right to privacy. Under section 559.004 of the *Texas Government Code*, you are entitled to request that TDI correct information that TDI has about you that is incorrect. For more information about the procedure and costs for obtaining information from TDI or about the procedure for correcting information kept by TDI, please contact the Agency Counsel Section of TDI's Legal Services at **(512) 475-1757** or visit the Corrections Procedure section of TDI's Web site at [www.tdi.state.tx.us](http://www.tdi.state.tx.us).



PROMETRIC  
Oak Hill Technology, Inc.  
Attn: TX Insurance  
5508 Hwy. 290 West  
Suite 202  
Austin, TX 78735-8816  
866.267.0455

*Register online at [www.prometric.com/texas](http://www.prometric.com/texas)*



**Register any time, day or night!**

You can register, schedule, and pay for your exam online in a secure environment, at your convenience.



**Confirm your appointment immediately!**

Your appointment is confirmed before you leave our Web site.

**See Page 9 for details.**

**FIRST  
CLASS  
MAIL**