JAMES M. THOMSON
COMMISSIONER OF INSURANCE

THOMAS S. NARDO FIRST DEPUTY COMMISSIONER



BOX 1157 RICHMOND, VA. 23209 TELEPHONE (804) 786 –374

STATE CORPORATION COMMISSION BUREAU OF INSURANCE

FEB - 4 1985

ADMINISTRATIVE LETTER 1985-3

TO: All Persons Licensed as Surplus Lines Brokers in Virginia

RE: Application for License as Surplus Lines Broker

Pending final determination by the State Corporation Commission regarding the proposed Surplus Lines Insurance Regulation, you are being sent the necessary forms to apply for renewal of your license as a Surplus Lines Broker which expires on March 15, 1985. Under the provisions of Article 5, Chapter 7.1, Title 38.1 of the Code of Virginia, the new license, regardless of when issued and effective, will expire on March 15, 1986.

At such time as the Commission reaches final determination regarding the proposed Regulation, which could amend some of the information set forth in the enclosed Application, a copy of the Regulation adopted by the Commission will be forwarded to you.

To assure that a lapse in Surplus Lines Broker licensing does not occur, the application, fee remittance, bond, affidavit and acknowledgments, all properly completed, must be received by the Bureau of Insurance at the earliest possible moment, but in any event, prior to March 15, 1985.

Please direct any questions you might have to James L. Sheets at (804) 786-6099.

Sincerely, (

James M. Thomson

Commissioner of Insurance

JMT/glhjr/ah

Enclosures:

Form SLB-1 - Application For License

Form SLB-2 - Bond

Form SLB-2a - Acknowledgment Of Principal Form SLB-2b - Acknowledgment Of Principal

VIRGINIA FORM SLB-1 (REV. 1/85)

COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION BUREAU OF INSURANCE Richmond, Virginia

APPLICATION FOR LICENSE AS SURPLUS LINES BROKER

TO:	STA	TE CORPORATIO	N COMMISSION, BU	IREAU OF INSUR	ANCE, RICHM	iond, vir	GINIA
Artic	monvele 5,	vealth of Virginia h	cant who is currentereby applies for a e 38.1 of the Code cense issue date.	license as a Surpl	lus Lines Broke	er under the	e provisions of
	se ap	nittance of (\$50.0) oplication is filed bee fee is \$25.00).	0) (\$25.00) is subm efore September 15	itted herewith to, the license fee	o cover the re is \$50.00; if fi	equired lic iled after	eense fee. (Ii September 15
	The	applicant submits	the following states	nents and answers	s in support of	this applic	ation:
	1.	Name of Applican	t			IRS #	
	2.	Business Address	(Street Number)		*	() Individual) Partnership) Corporation
			(Town or City)	**************************************	(State)		(Zip Code)
	3.	Residence Address					
		(Street Number)	(Town or Cit	<u>y</u>)	(State)		(Zip Code)
	4.	employees		action of ir directors, nsed as a	members, or Property and		
		NAME	SS#	TITLE		RESIDEN	ICE ADDRESS

- 5. The submission of this application signifies the applicant's understanding and agreement to abide by the following conditions pertaining to insurance transacted under the authority of the license applied for:
 - A. Applicant will not procure or aid in the procurement, directly or indirectly, of any contract of insurance on a Virginia risk from any insurer not licensed to transact insurance in Virginia unless the applicant has been unable after diligent effort to procure the kind and class of insurance requested in a form and at a premium acceptable to the insured from among insurers which are licensed to transact that kind and class of insurance in Virginia.
 - B. Not more than thirty days after the end of the calendar month in which any such insurance has been procured by the Surplus Lines Broker, an individual or combined affidavit executed by the Surplus Lines Broker will be filed with the Bureau of Insurance of the State Corporation Commission setting forth the following:
 - (1) Non-availability of the subject insurance from insurers licensed in Virginia in a form and at a premium acceptable to the insured.
 - (2) Details of the insurance including full name of the company from which procured; description and location of the risk; kind and class of insurance; amount of insurance; effective date; policy number; date procured; term of policy; and premiums, assessments, dues, and fees charged for the policy.
 - C. Licensee will comply with Section 38.1-327.52.B. by giving to the insured the notice in a form prescribed by the Commission.
 - D. Licensee will not issue or deliver any policy or other written evidence of insurance or represent the insurance will be or has been granted by an unlicensed insurer unless he has prior written authority from such insurer for the insurance, or has received information from such insurer in the regular course of business that such insurance has been granted, or actually issued by the insurer and delivered to the insured.
 - E. Each policy or other written evidence of insurance procured under this authority shall be delivered promptly to the insured.
 - F. Applicant will keep in his office a complete record of each contract of insurance procured under this authority, including:
 - (1) Full name and address of the insurer or insurers and the insured;
 - (2) Description and location of the risk;
 - (3) The perils insured against;
 - (4) Amount of coverage, and inception and expiration dates;
 - (5) The premium rate and the gross premium (including assessments, dues and fees) charged for the policy;
 - (6) The amount of additional and/or returned premium, if any;
 - (7) Such other information as the State Corporation Commission may require.
 - G. Applicant may accept surplus lines business from any PROPERTY AND CASUALTY AGENT duly licensed in Virginia and may compensate such agent therefor, and any such duly licensed PROPERTY AND CASUALTY AGENT may place surplus lines business with a licensed Surplus Lines Broker as constituted and accept compensation therefor.

(continued)

- H. Annually on or before March 1, the Surplus Lines Broker will file with the Bureau of Insurance of the State Corporation Commission a statement verified by oath or affidavit containing, with regard to each contract of insurance transacted during the previous calendar year, information in a form prescribed by the Commission.
- I. Annually on or before MARCH 1, the Surplus Lines Broker must file Virginia Form SLB-7, Gross Premiums Tax Report, and pay to the State Corporation Commission the assessment provided for in Sections 38.1-44 and 38.1-45 of the Code of Virginia, and the taxes provided for in Sections 58.1-2500 and 58.1-2501 of the Code of Virginia, both assessment and taxes being based upon gross premiums on business transacted under this authority during the preceding calendar year. Any penalty imposed by the Commission pursuant to Title 38.1 or Title 58.1 must be paid prior to the issuance of any new or renewal Surplus Lines Broker's license.
- J. The authority under a Surplus Lines Broker's license applies to the kinds and classes of insurance enumerated in Section 38.1-327.46 of the Code of Virginia.
- K. The applicant understands that any violation of the foregoing conditions or other applicable insurance laws of Virginia is punishable by a fine as provided by Section 38.1-40 of the Code of Virginia; or by suspension or revocation of license, as provided by Section 38.1-327.43 of the Code of Virginia, or by both.

The applicant hereby declares that the foregoing answers are true and correct; and that the conditions set forth above are fully understood and will be fully complied with.

	(Signature of Applicant, if an individual) (Print name of applicant, if a partnership or corporation)
Ву	(Officer or Partner)
Title	

(continued)

NOTARIAL ACKNOWLEDGMENT

STATE OF VIRGINIA COUNTY (CITY) OF	· 			
This day(Name of Deponent)	_ appeared before me, a Notary Public in and for the State			
and County (City) aforesaid, and, being	duly sworn, deposed and stated that the answers and			
declarations given in this application are tru	ue and correct; and he has this day acknowledged the same			
before me. Subscribed and sworn to before r	me this, 19			
·				
	(Notary Public)			
	My commission expires			

FORM SLB-2 (REV. 1/85)

$\frac{\rm BOND\ FOR\ SURPLUS\ LINES\ INSURANCE\ BROKER}{\rm (To\ comply\ with\ Section\ 38.1-327.50\ of\ the\ Code\ of\ Virginia)}$

KNOW ALL MEN BY THESE PRESENTS, Th	eto
	as Principal, and th
sum of TWENTY-FIVE THOUSAND DOLLA	Company, a corporation organized and existin, and authorized to do business in the Commonwealth ound unto the COMMONWEALTH OF VIRGINIA in the pens RS (\$25,000) for the payment of which, well and truly to bur heirs, successors and assigns, jointly and severally, firmly
SIGNED, SEALED, AND DATED THIS	, 19
THE CONDITION OF THIS OBLIGATION	ON IS SUCH THAT:
Commonwealth of Virginia for a license to a 7.1, Title 38.1 of the Code of Virginia and,	applied to the State Corporation Commission of the act as a Surplus Lines Broker pursuant to Article 5, Chapte in accordance with Section 38.1-327.50 thereof, is required e COMMONWEALTH OF VIRGINIA in the penal sum of 1,000;
business under said license in accordance Commonwealth of Virginia pertaining to Su	this obligation is such that if the said Principal shall conduct with the provisions of the laws and regulations of the property remit the property remit the said regulations, then this obligation shall be null and void ;
such license becomes effective and ending	acts of the Principal during the period beginning on the date on the fifteenth day of March next succeeding; and in no hereunder for all losses exceed the penal sum of TWENTY
conditions of this bond only after thirty days	hay be released from liability for future breaches of the have elapsed from the giving of written notice to the State alth of Virginia of its desire to be so released;
IN WITNESS WHEREOF, the said Prir Surety has caused these presents to be signe corporate seal affixed on the day and year fi	ncipal has caused these presents to be signed and the saided by its duly authorized officer or Attorney-in-Fact and its irst written above.
	(Principal)
	(If Principal is Partnership or Corporation)
(SEAL OF SURETY)	TITLE
	(Surety)
COUNTERSIGNED BY:	Officer or Attorney-in-Fact)
(Licensed Virginia Agent of Surety)	
Date	

FORM SLB-2a (REV. 1/85)

ACKNOWLEDGMENT OF PRINCIPAL (INDIVIDUAL OR PARTNERSHIP)

STATE OF VIRGINIA CITY (COUNTY) OF	_, to wit:
I, aforesaid, in the State of Virginia, do certify that _	, a Notary Public in and for the City (County)
whose name or names is or are signed to Virginia Fo	orm SLB-2 bearing date on the day of ore me and acknowledged the same.
My term of office expires on the de	
Given under my hand this day of	
	Notary Public
AFFIDAVIT AND ACKNO	WLEDGMENT OF SURETY
STATE OF VIRGINIA CITY (COUNTY) OF	_, to wit:
aforesaid, in the State of Virginia, do certify that personally appeared before me and made oath that of the foregoing bond by virtue of a certain power of attorior.	, a Notary Public in and for the City (County) he is ; that he is duly authorized to execute the rney of said company, dated ok No. , page ; that said power npany has complied with all the requirements of law
regulating the admission of such companies to tran- company holds a license authorizing it to do busin policyholders of \$; that the penal centum of said sum; that the said company is not be account of the principal named in said bond a liabili	asset business in the State of Virginia; that the said ess in the State of Virginia; that it has a surplus to ty of the foregoing bond is not in excess of ten per y said bond incurring in the aggregate on behalf or on ity for an amount larger than one-tenth of its surplus and fully able to meet promptly all of its obligations,
My term of office expires on the da	y of, 19
Given under my hand this day of	
	Notary Public

FORM SLB-2b (REV. 1/85)

ACKNOWLEDGMENT OF PRINCIPAL (CORPORATIONS ONLY)

STATE OF VIRGINIA CITY (COUNTY) OF, to wit:
I,, a Notary Public in and for the City (County) aforesaid, in the State of Virginia, do certify that appeared before me personally on the day of, 19 and, being duly sworn
appeared before me personally on the day of , 19 and, being duly sworn by me, deposed and stated that he resides in ; that he is the of the , the corporation described in and which executed Virginia Form SLB-2; and that he signed his name thereto by like order.
of the, the corporation described in and which executed Virginia Form SLB-2; and that he signed his name thereto by like order.
I further certify that my term of office expires on the day of, 19
Given under my hand this day of, 19
(Notary Public)
AFFIDAVIT AND ACKNOWLEDGMENT OF SURETY
STATE OF VIRGINIA
CITY (COUNTY) OF, to wit:
I,, a Notary Public in and for the City (County) aforesaid, in the State of Virginia, do certify that
personally appeared before me and made oath that he is
of the; that he is duly authorized to execute the foregoing bond by virtue of a certain power of attorney of said company, dated,
and accorded to the C1-utile (RM
of
and the said thereupon, in the name and on behalf of the said company, acknowledging the foregoing writing as its act and deed.
My term of office expires on the day of, 19
Given under my hand this day of, 19
Notary Public