

INSTRUCTIONS FOR EXCESS LINE BROKER APPLICANT

Match the submission code numbers listed under the “Resident” (one who has declared New York as their Home State; Home State means the District of Columbia or any state or territory of the United States in which the applicant maintains his, her or its principal place of residence or principal place of business) or “Non-Resident” (one who has declared a state OTHER than New York as their Home State AND who is licensed or authorized in their Home State).

INDIVIDUAL/TBA LICENSES WILL BE ISSUED WITH AN EXPIRATION DATE DETERMINED BY DATE OF BIRTH:

**If you were born in an even numbered year, your license will expire on your birthday in an even numbered year.

**If you were born in an odd numbered year, your license will expire on your birthday in an odd numbered year.

CODE	DESCRIPTION OF LICENSE	INS. LAW SECTION	SUBMISSION CODES		OTHER REQUIREMENTS	LICENSING PERIOD	FEE	
			RESIDENT	NON-RESIDENT			FULL FEE	HALF FEE
EX	Excess Line Broker	2105	1, 2, 3, 6	1, 2, 4, 5, 6, 7*	Must be licensed as a BR (broker) under Section 2104 **See 3 & 4 below for clarification	Individual/TBA – up to 2 years from date of issue to Date of Birth Expiration** (See Note Above) Corresponding with qualifying BR license Entities - 2 yrs-11/1 to 10/31 of even years corresponding with qualifying BR license	\$400 or \$50 (See code 2 below)	\$200 or \$25 (See code 2 below)

CODE	SUBMISSION REQUIREMENT CODE CHART
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1. Application
2. FEE –**RESIDENT** - \$400 or \$200 if the applicant maintains an office in, or acts as an excess line broker in placing insurance on risks located in any county in this state having a population of 100,000 or more. \$50 or \$25 in all other cases. **NON-RESIDENT** - \$400 OR \$200. **Full fees** are charged during the first year of a licensing period; **half fees** are charged during the second year. See “Fee” columns above. Make check payable to “Superintendent of Financial Services.” \$20 will be charged for each check dishonored by the bank.
3. **Section 2105 of the Insurance Law requires that an Excess Line Broker be licensed as a broker under Section 2104 of the Insurance Law. **Residents** must submit a separate application under Section 2104 of the New York Insurance Law
4. **Section 2105 of the Insurance Law requires that an Excess Line Broker be licensed as a broker under Section 2104 of the Insurance Law. If you are a non-resident and do not currently hold a New York broker license under Section 2104 and are applying for an Excess Line Broker License, an Excess Line Broker license from another state meets the qualification to become licensed as a broker in this state. No application is required for a broker license for **non-residents**; however, an additional fee for this license is required. See the attached fee schedule for a non-resident broker license under Section 2104. Please add this fee to the above applicable license fee.
5. Must be currently licensed and in compliance in your declared home state. **NOTE:** Your license information **MUST** be included in the National Producer Database; if not, you must submit a currently dated Certification from the state you have declared as your home state and in which your principle place of business or residence is located.
6. If not already on file with this Department, proof of required filing of a partnership, corporation, limited liability company, or trade name. It is recommended that the applicant obtain name approval for use of the name in the insurance industry from this Department before filing the name with a County Clerk office or the New York State Department of State. You may submit a list of proposed names in the order of preference to New York State Dept. of Financial Services, One Commerce Plaza, Albany, NY 12257 or to our e-mail address, licensing@dfs.ny.gov. Once a name is approved, licensing instructions will be provided.
7. *If Home State is **California** – \$50,000 BOND is required.

NOTE – If your declared home state is in Montana, Florida or Missouri (entities), you will be issued a LIMITED EXCESS LINE BROKER LICENSE.

**INDIVIDUAL FORM
ORIGINAL/RELICENSING**

**STATE OF NEW YORK
DEPT. OF FINANCIAL SERVICES
ONE COMMERCE PLAZA
ALBANY, NEW YORK 12257
www.dfs.ny.gov**

FOR DEPARTMENT USE ONLY	
License No. EX.....	
Ex. by	App. by
Issued	Exp.....
<input type="checkbox"/> Original.....	<input type="checkbox"/> Relicensing.....

**PRODUCER APPLICATION FOR EXCESS LINE BROKER'S LICENSE
UNDER SECTION 2105 OF THE INSURANCE LAW**

Resident _____
 Non-Resident _____
 Identify Home State _____
 Identify Home State License # _____ (If Home State is Not NY)

1.

Name of Applicant		Last	First	M.I.
Social Security Number*	If assigned, National Producer Number (NPN)		Date of Birth	Gender M____ F____
Trade Name (Sole Proprietorship) Read instructions before entering anything in this space				
c/o if any (pertaining to Principal Insurance Business Address)				Telephone Number
Principal Insurance Business Address: No. & Street (required)		P.O. Box, if any	City/Town/Village	County
Residence: No. and Street (required)		P.O. Box, if any	City/Town/ Village	County
Mailing Address: (required)(Indicate if same as Bus or Res)		P.O. Box, if any	City/Town/Village	County
			State/Country	Zip Code
			State/Country	Zip Code
			State/Country	Zip Code

(This Department must be notified within 30 days if any address changes.)

2. New York Broker's License number under Section 2104 of the New York Insurance Law (if already licensed) _____
3. If New York is the declared home state, provide name of largest county in New York State in which applicant maintains an office or in which risks are located upon which applicant proposes to place insurance as an excess line broker _____
4. Are you under obligation to pay child support?..... Yes or No
- If "Yes,"**
- (a) Are you current or less than 4 months in arrears?..... Yes or No
- (b) Are you paying by income execution plan agreed to by courts or parties?..... Yes or No
- (c) Is the obligation the subject of pending court proceeding?..... Yes or No
- (d) Are you receiving public assistance or supplemental income?..... Yes or No

If answer to the question regarding obligation to pay child support is "Yes," one of the answers to (a)-(d) must be "Yes" or license will expire 6 months from its effective date unless you notify the Department by that time which answer has changed to "Yes."

5. If any of the following questions are answered "YES," an explanation must be attached.

(a) Have you ever been convicted of a misdemeanor, had a judgment withheld or deferred, or are you currently charged with committing a misdemeanor?..... Yes or No

You may exclude the following misdemeanor convictions or pending misdemeanor charges: traffic citations, driving under the influence (DUI), 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 a juvenile court).

(b) Have you ever been convicted of a felony, had a judgment withheld or deferred, or are you currently charged with committing a felony?..... Yes or No

You may exclude juvenile adjudications (offenses where you were adjudicated delinquent in a juvenile court).

(c) Have you ever been convicted of a military offense, had a judgment withheld or deferred, or are you currently charged with committing a military offense?..... Yes or No

NOTE: For questions a, b, and c "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 no contest, or having been given probation, a suspended sentence or a fine.

(d) Have you 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?..... Yes or No

"Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation, sanctioned 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, or registration. "Involved" also means having a license, or registration application denied or the act of withdrawing an application to avoid a denial. INCLUDE any business so named because of your actions in your capacity as an owner, partner, officer, director, or member or manager of a limited liability company. You may EXCLUDE terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

(e) Has any demand been made or judgment rendered against you, or any business in which you are or were an owner, partner, officer, director, or member or manager of a limited liability company, for overdue monies by an insurer, insured or producer or have you ever been subject to a bankruptcy proceeding? Do not include personal bankruptcies, unless they involve funds held on behalf of others..... Yes or No

(f) Have you 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 or No

If you answer yes, identify the jurisdiction(s):

(g) Are you currently a party to, or have you ever been found liable in any lawsuit, arbitration, or mediation proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty?..... Yes or No

(h) Have you, or any business in which you are or were an owner, partner, officer, director, or member or manager of a limited liability company, ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct?..... Yes or No

RELICENSING APPLICANTS MUST ANSWER THIS QUESTION.

6. Since expiration of your last authority, have you transacted business in New York for the license you are applying for in this application?..... Yes or No

**Attestation and Signature required on page 3

Applicant Certification and Attestation

The Applicant must read the following very carefully:

- ◆ I hereby certify that, under penalty of perjury, all of the information submitted in this application and attachments is true and complete. I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license revocation or denial of the license and may subject me to civil or criminal penalties.
- ◆ Where required by law, I hereby designate the Superintendent of Financial Services to be my agent for service of process regarding all insurance matters in New York State and agree that service upon the Superintendent is of the same legal force and validity as personal service upon myself.
- ◆ I further certify that I grant permission to the Superintendent of Financial Services to verify any information supplied with any federal, state or local government agency, current or former employer, or insurance company.
- ◆ The New York State Superintendent of Financial Services is hereby authorized to give any information concerning me, as permitted by law, to any federal, state or municipal agency, or any other organization as referenced in Section 110 of the New York State Insurance Law and I release any person acting on the Superintendent's behalf from any and all liability of whatever nature by reason of furnishing such information.
- ◆ I acknowledge that I understand and will comply with the New York Insurance Laws and regulations promulgated thereunder.
- ◆ For **Non-Resident License Applicants**, I certify that I have been licensed within the last ninety (90) days and in good standing in the home state/resident state for the lines of authority requested from the non-resident state.

Dated _____ 20 _____

Telephone No. _____

Applicant Signature (Must be original signature)

E-Mail Address _____

Applicant Name (Printed or Typed)

URL/Website Address _____

* * CHILD SUPPORT NOTIFICATION * *

Persons four (4) months in arrears in child support or who have failed to comply with a summons, subpoena, or warrant relating to paternity or child support proceeding may be subject to suspension of their business, professional, driver, and/or recreational licenses and permits including, but not limited to, licenses pursuant to §11-0713 of the Environmental Law.

Intentional submission of false statements for the purposes of frustrating/defeating lawful enforcement of support obligations is punishable under §175.35 of the Penal Law.

* * PRIVACY NOTIFICATION * *

Pursuant to Article 1, Section 5 of the New York State Tax Law, it is mandatory that you report your Social Security Number and/or Employer Identification Number. Your failure to respond may be reported to the Department of Taxation and Finance. These tax identification numbers are being collected to enable the Department of Taxation & Finance to identify entities which are delinquent in or have understated their tax liabilities, and may be used for any purpose authorized by the Tax Law. They will be maintained by the Director, Licensing Services Bureau, New York State Department of Financial Services, One Commerce Plaza, Albany, New York 12257. Telephone: (518) 474-6630.

The New York State Department of Financial Services will, absent your written objection, which must be attached to this application, provide these tax identification numbers to the National Association of Insurance Commissioners for inclusion in its Producer Database.