



## TITLE INSURANCE AGENT PRODUCER INSTRUCTIONS

Insurance Law Section 2102 prohibits any person or business entity from acting as an insurance producer in New York, including as a title insurance agent, without a license. Insurance Law Section 2101(y) defines “title insurance agent” as any authorized or acknowledged agent of a title insurance corporation, and any subagent or other representative of such an agent, who or which for commission, compensation, or any other thing of value, performs the following acts in conjunction with the issuance of a title insurance policy:

1. sells, or negotiates the sale of a title insurance policy;
2. evaluates the insurability of title, based upon the performance or review of a title search; and
3. performs one or more of the following functions:
  - A. Collects, remits or disburses title insurance premiums, escrows or other related funds;
  - B. Prepares, amends, marks up or delivers a title insurance commitment or certification of title for the purpose of the issuance of a title insurance policy by a title insurance corporation;
  - C. Prepares, amends or delivers a title insurance policy on behalf of a title insurance corporation; or
  - D. Negotiates the clearance of title exceptions, in connection with the issuance of a title insurance policy.

This does not include any regular salaried officer or employee of an authorized title insurance corporation or of a licensed title insurance agent, who does not receive a commission or other compensation for services, when the commission or other compensation is directly dependent upon the amount of title insurance business done.

## Qualifications

### **If New York is the declared home state:**

In order to obtain a title insurance agent license in New York, an applicant must complete a New York-approved preclicensing course for title insurance agents and pass the New York State title insurance agent examination unless the applicant can waive the preclicensing requirements based on his/her status as an attorney\*. You can search for an approved provider offering the title agent preclicensing course by using the Preclicensing Provider/Course Search at:

<https://myportal.dfs.ny.gov/>

The applicant must complete the preclicensing course prior to sitting for the examination. To register and reserve an examination date, contact PSI Services LLC by telephone at (800) 733 – 9267 or online at: [www.psiexams.com](http://www.psiexams.com)

**\*The preclicensing course and exam are waived IF the applicant is a licensed New York State Attorney.**

If an applicant is currently licensed as an attorney-at-law in New York State and is in good standing with the New York State Office of Court Administration, then the applicant does not need to complete a preclicensing course or pass a title insurance agent examination. The applicant must submit a certificate of good standing from the Appellate Division of the Supreme Court for the Division where the attorney was admitted.

### **Non-Resident Title Insurance Agent**

If an applicant is a resident of a state other than New York, applicant must be currently licensed and in compliance in the applicant's declared home state. **NOTE:** The applicant's license information MUST be included in the National Producer Database; if not, the applicant must submit a currently dated certification from the applicant's declared home state.

### **Terminated Title Insurance Agent License**

If an applicant previously passed the written title insurance agent examination in New York and was licensed as a title insurance agent in New York, or if an applicant was licensed as a title insurance agent in New York but did not pass such an examination, then the applicant does not need to complete a New York preclicensing course or pass a New York title insurance agent examination, provided the applicant applies within two years following the date of termination of the applicant's title insurance agent license.

## How to Apply

An applicant must submit a fully completed and signed application for a title insurance agent's license, including all applicable attachments, and the licensing fee in accordance with the fee schedule. Please make checks payable to the "Superintendent of Financial Services." Applicants should mail their applications to:

New York State Department of Financial Services  
Licensing Bureau  
One Commerce Plaza  
Albany, NY 12257

Note that the Department will charge \$20.00 for each check dishonored by the bank.

### **Additional Information:**

#### **Sponsoring Insurer**

A title insurance agent who is licensed with no company appointments is considered to be "inactive." Pursuant to the Insurance Law, in order for a title insurance agent to do business, a Company Appointment must be filed by an insurer on the title insurance agent's behalf within 15 days from the date **an agency contract is executed or the first insurance application (Contract/Policy) is submitted to the insurer. Title Insurers have been notified of this requirement.**

A title insurance agent may not transact business until a licensed title insurer has filed an appointment on behalf of the title agent.

All licensed title insurers in New York have been notified about the appointment process. If you are seeking to be appointed, please contact the insurer.

To contact the Department with questions, please call (518) 474 – 6630 or (800) 342 – 3736 or email [licrenewal@dfs.ny.gov](mailto:licrenewal@dfs.ny.gov)

**New York State Department of Financial Services  
INSTRUCTIONS FOR TLA (TITLE INSURANCE AGENT) APPLICANT**

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

**\*\*If applicant was born in an even numbered year, then applicant's license will expire on applicant's birthday in an even numbered year.**

**\*\*If applicant was born in an odd numbered year, then applicant's license will expire on applicant's birthday in an odd numbered year.**

**A license will not be issued for a period of more than two years.**

**\*Resident** - an applicant who has declared New York as his, her, or its 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. **\*Non-Resident** - licensee who has declared a state OTHER than New York as his, her, or its home state. "Home State" means the District of Columbia or any other state or territory of the United States in which the applicant maintains a principal place of residence or principal place of business AND is licensed in good standing for the line or lines of authority for which the applicant is applying in this application.

SUBMISSION CODES – See Code Description Below							
CODE	DESCRIPTION OF LICENSE	INS/LAW SECTION	RESIDENT	NON-RESIDENT	EXEMPT FROM # 3 (Pre-Licensing Course & Exam)	LICENSING PERIOD	FEES
<b>TLA</b>	Title Insurance Agent (Producer)	2139	1,2,3,5,	1,2,4,5,	(1) Currently licensed as an attorney-at-law in New York State and in good standing with the New York State Office of Court Administration. (Attach a certificate of good standing from the Appellate Division of the Supreme Court for the Division where the attorney was admitted); (2) An applicant who has been licensed within the last 90 days and is in good standing in the applicant's home state as a title insurance producer; or (3) Passed the written title insurance agent exam in New York, or was licensed as a title insurance agent in New York but did not pass such an examination, provided applicant submits an application within two years following the date of termination of the applicant's license.	Individual/TBA – up to two years from date of issue to date of birth expiration** (See note above)  Entities - two years – 07/01 to 06/30 of odd years	See attached fee schedule

CODE	SUBMISSION REQUIREMENT CODE CHART
<b>1</b>	Fully completed application. Download from the Department's website at <a href="http://www.dfs.ny.gov">www.dfs.ny.gov</a>
<b>2</b>	<b>FEE</b> – See attached fee schedule. <b>Full fees</b> are charged when a license is issued for a licensing period of one year or more; <b>half fees</b> are charged when a license is issued for a licensing period of less than one year. Make check payable to "Superintendent of Financial Services." A fee of \$20 will be charged for each check dishonored by the bank. <b>RESIDENT:</b> Partnership, corporation, limited liability company or other entity fee is per sub-licensee. <b>NON-RESIDENT:</b> See attached fee schedule.
<b>3</b>	Original passed score report for title insurance agent exam taken within two years unless "exempt from # 3" above. Call PSI* for examination information. A first time applicant must submit the precicensing course certificate (precicensing course must be completed prior to sitting for the examination) and the passed exam score report.
<b>4</b>	Must be currently licensed and in compliance in applicant's declared home state. <b>NOTE:</b> Applicant's license information <b>MUST</b> be included in the National Producer Database; if not, applicant must submit a currently dated certification from the state applicant has declared as applicant's home state as defined above.
<b>5</b>	Proof of required filing of a partnership, corporation, limited liability company, trade name or other. It is recommended that applicant obtain name approval for use of the name in the insurance industry from this Department before filing the name with a County Clerk's Office or the New York State Department of State. Applicant may submit a list of proposed names in the order of preference to New York State Department of Financial Services, Licensing Services Bureau, One Commerce Plaza, Albany, New York 12257, or email <a href="mailto:licensing@dfs.ny.gov">licensing@dfs.ny.gov</a> Once a name is approved, licensing instructions will be provided.

**\*PSI Services LLC, 3210 E Tropicana, Las Vegas, NV 89121, Telephone (800) 733-9267**

[www.psiexams.com](http://www.psiexams.com)

**ORIGINAL/RELICENSING TITLE INSURANCE AGENT FEES****DETERMINATION OF RESIDENT OR NON-RESIDENT STATUS:**

- If you declared New York State as your home state, pay the fee listed on the chart for New York.
- If you declared a home state other than New York, pay the license fee listed on the chart for the state declared as the home state and in which you are a licensed insurance producer.

**COMPUTATION OF FEE TO BE SUBMITTED WITH APPLICATION:**

- The term for title insurance agent licenses is up to two years.
  - **INDIVIDUALS/TBA – Effective Date of Issued License to Date of Birth Expiration:** 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.
  - **TITLE INSURANCE AGENT ENTITIES – July 1 to June 30 of odd numbered years.**
- To compute a licensing fee for an application to be issued for a period greater than one year, add the licensing fee plus any retaliatory fee indicated. To compute a licensing fee for an application to be issued for one year or less, add *one-half (1/2)* the licensing fee plus the *whole* of any retaliatory fee indicated.
- In addition, a relicensing applicant whose license expired within the last 2 years and who was required to document Continuing Education had he/she renewed the license, must also include both the required documentation of the accumulation of 15 credits of Continuing Education and a \$10.00 filing fee (per application, not per sub-licensee).

STATE	INDIVIDUAL/ENTITY RETALIATORY FEES	INDIVIDUAL LICENSE FEES	ENTITY LICENSE FEES
Alabama		Does not issue to non-residents	Does not issue to non-residents
Alaska		Does not issue to non-residents	Does not issue to non-residents
Arizona		(AZ does not issue Title Agent licenses to Individuals)	\$ 120 plus \$80 per sub-licensee
Arkansas		\$ 80.00	\$ 250 with 1 sub-licensee plus \$80 for each additional sub-licensee
California		\$ 228	\$ 228 plus \$80 per sub-licensee
Colorado		\$ 112	\$ 112 plus \$80 per sub-licensee
Connecticut		CT does not issue Title Agent licenses	CT does not issue Title Agent licenses
Delaware		\$ 80	\$ 80 plus \$80 per sub-licensee
District of Columbia		\$ 100	\$ 100 plus \$80 per sub-licensee
Florida		\$ 80	\$ 80 per sub-licensee
Georgia		\$ 115	\$ 115 plus \$80 per sub-licensee
Hawaii		\$ 300	\$ 225 plus \$80 per sub-licensee
Idaho		(ID does not issue Title Agent licenses to Individuals)	\$ 100 plus \$80 per sub-licensee
Illinois		\$ 500	\$ 500 plus \$80 per sub-licensee
Indiana		\$ 90	\$ 90 plus \$80 per sub-licensee
Iowa		IA does not issue Title Agent licenses	IA does not issue Title Agent licenses
Kansas		\$ 80	\$80 per sub-licensee
Kentucky		KY does not issue Title Agent licenses	KY does not issue Title Agent licenses
Louisiana		\$ 80	\$ 80 per sub-licensee
Maine		\$ 80	\$ 80 plus \$80 per sub-licensee
Maryland		\$ 80	\$ 80 per sub-licensee
Massachusetts		MA does not issue Title Agent licenses	MA does not issue Title Agent licenses
Michigan		\$ 80	\$ 80 per sub-licensee
Minnesota		\$ 80	\$ 200 plus \$80 per sub-licensee
Mississippi		\$ 100	\$ 100 plus \$80 per sub-licensee
Missouri		\$ 100	\$ 100 plus \$80 per sub-licensee

STATE	INDIVIDUAL/ENTITY RETALIATORY FEES	INDIVIDUAL LICENSE FEES	ENTITY LICENSE FEES
Montana		MT does not issue Title Agent licenses	MT does not issue Title Agent licenses
Nebraska		\$ 80	\$ 80 per sub-licensee
Nevada		Does not issue to non-residents	Does not issue to non-residents
New Hampshire		\$ 80	\$ 80 per sub-licensee
New Jersey		\$ 170	\$ 170 plus \$80 per sub-licensee
New Mexico		\$ 80	\$ 80 per sub-licensee
New York		\$ 80	\$ 80 per sub-licensee
North Carolina		\$ 100	\$ 100 plus \$80 per sub-licensee
North Dakota		\$ 100	\$ 100 plus \$80 per sub-licensee
Ohio		\$ 80	\$ 80 per sub-licensee
Oklahoma		\$ 100	\$ 100 plus \$80 per sub-licensee
Oregon		Does not issue to non-resident	Does not issue to non-residents
Pennsylvania		\$ 165	\$ 165 plus \$80 per sub-licensee
Rhode Island		\$ 130	RI does not issue licenses to entities
South Carolina		\$ 80	\$ 80 per sub-licensee
South Dakota		Does not Issue	Does not Issue
Tennessee		Does not issue to non-residents	Does not issue to non-residents
Texas		Does not issue to Non-residents	Does not issue to non-residents
Utah		\$ 80	\$ 85 plus \$80 per sub-licensee
Vermont		\$ 80	\$ 80 per sub-licensee
Virginia		\$ 80	\$ 80 per sub-licensee
Washington	\$ 5	\$ 80	\$ 80 per sub-licensee
West Virginia		\$ 80	\$ 200 plus \$80 per sub-licensee
Wisconsin		\$ 80	\$ 100 plus \$80 per sub-licensee
Wyoming		Does not issue to non-residents	Does not issue to non-residents

**CANADA – Individuals and sub-licensees must qualify by New York State Requirements**

PROVINCE	INDIVIDUAL/ENTITY RETALIATORY FEES	INDIVIDUAL LICENSE FEES	ENTITY LICENSE FEES
Alberta		\$ 80	\$ 80 per sub-licensee
Manitoba		\$ 80	\$ 80 per sub-licensee
Northwest Territories		\$ 80	\$ 80 per sub-licensee
Nova Scotia		\$ 80	\$ 80 per sub-licensee
Ontario		\$ 80	\$ 80 per sub-licensee
Quebec		\$ 80	\$ 80 per sub-licensee
Saskatchewan		\$ 80	\$ 80 per sub-licensee
Yukon Territories		\$ 80	\$ 80 per sub-licensee

TERRITORY	INDIVIDUAL/ENTITY RETALIATORY FEES	INDIVIDUAL LICENSE FEES	ENTITY LICENSE FEES
Puerto Rico		\$ 157	\$ 315 plus \$80 per sub-licensee
Virgin Islands		Does not Issue	Does not Issue

**ORIGINAL/RELICENSING  
ENTITY FORM**  
**NEW YORK STATE DEPARTMENT  
OF FINANCIAL SERVICES**

Attention: Licensing Bureau  
One Commerce Plaza  
Albany, New York 12257

**PRODUCER APPLICATION FOR TITLE INSURANCE AGENT'S  
LICENSE UNDER SECTION 2139 OF THE INSURANCE LAW**

www.dfs.ny.gov

FOR DEPT USE ONLY

License No. TLA-.....
Ex. By.....App. By.....
Issued.....
Original.....Relicensing.....

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

1. Name of Applicant _____					
Entity Name in Full			Fed. Employer ID No.*		
Principal Business Address (Required) _____					
Street and Number (Required)			P.O. Box (if any)		
City, Town or Village		County	State	Zip Code	Telephone No.
Mailing Address (Required)(Indicate if Same as Business) _____					
Street and Number			P.O. Box (if any)		
City, Town or Village		County	State	Zip Code	

(If either address changes, then the applicant must notify the Department of Financial Services in writing within 30 days of the change.)

2. Indicate if your entity is a \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership\* \_\_\_\_\_ Limited Liability Company  
 \_\_\_\_\_ Other (Please Specify) \_\_\_\_\_

\*If a Partnership – at least two partners/members are required

3. List all officers/directors/partners/members/managers and give information requested below. If a sub-licensee/designated responsible person, then check box(es) at the right. Only **qualified** officers/directors/partners/members/managers may be sub-licensees/designated responsible persons; employees are not eligible. At least one sublicensee/designated responsible person must have a financial or other beneficial interest in the applicant.

(a) Name (Last, First, M.I.)	Title	Social Security No*	Date of Birth	Sex M__ F__
Residence: Number and Street (Required)	P. O. Box (If any)	City	State	Zip Code
			Sub-licensee/Designated Responsible Person? Yes_____ No_____	
(b) Name (Last, First, M.I.)	Title	Social Security No*	Date of Birth	Sex M__ F__
Residence: Number and Street (Required)	P. O. Box (If any)	City	State	Zip Code
			Sub-licensee/Designated Responsible Person? Yes_____ No_____	

\* See Privacy Notification on Page 4.

3. (CONTD.)

(c) Name (Last, First, M.I.)		Title	Social Security No*		Date of Birth	Sex M__ F__
Residence: Number and Street (Required)	P. O. Box (If any)	City	State	Zip Code	Sub-licensee/Designated Responsible Person? Yes_____ No_____	
(d) Name (Last, First, M.I.)		Title	Social Security No*		Date of Birth	Sex M__ F__
Residence: Number and Street (Required)	P. O. Box (If any)	City	State	Zip Code	Sub-licensee/Designated Responsible Person? Yes_____ No_____	
(e) Name (Last, First, M.I.)		Title	Social Security No*		Date of Birth	Sex M__ F__
Residence: Number and Street (Required)	P. O. Box (If any)	City	State	Zip Code	Sub-licensee/Designated Responsible Person? Yes_____ No_____	

4. If applicant is a corporation, then identify all persons who directly or indirectly own, control, or hold with the power to vote ten percent or more of the voting securities of the applicant:

Name	SSN/FEIN	Date of Birth	Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. Identify at least one sub-licensee/designated responsible person listed in question 3 who has a financial or other beneficial interest in the applicant:

Name	Full description of type of financial or other beneficial interest
_____	_____
_____	_____
_____	_____
_____	_____

6. If a **corporate** applicant - attach a copy of its charter or certificate of incorporation that confers upon it the right to act as a title insurance agent; also attach a copy of the corporation's Department of State filing receipt, unless previously submitted.

If a **partnership** applicant – attach a copy of its business certificate from the county clerk's office in which the business address is located, unless previously submitted.

If a **limited liability company** applicant – attach a copy of its articles of organization. Also attach a copy of the Department of State filing receipt, unless previously submitted.

If **other** – attach a copy of the written instrument by which the applicant is created under state law.

7. Are any of the individuals named in question 3 or 4 under an obligation to pay child support? .....                       
Yes or No

If "yes," then attach signed child support obligation form for each individual under such obligation.



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

(a) Has the applicant or any person named in question 3 or 4 ever been convicted of a misdemeanor, had a judgment withheld or deferred or is the applicant or person 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) 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).

(b) Has the applicant or any person named in question 3 or 4 ever been convicted of a felony, had a judgment withheld or deferred, or is the applicant or person currently charged with committing a felony?.....

Yes or No

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

(c) Has the applicant or any person named in question 3 or 4 ever been convicted of a military offense, had a judgment withheld or deferred or is the applicant or person currently charged with committing a military offense?..

Yes or No

NOTE: For questions 8a, 8b, and 8c "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) Has the applicant or any person named in question 3 or 4 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, registration or certification?.....

Yes or No

"Involved" means having a license, registration, or certification 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, registration, or certification 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, registration or certification. "Involved" also means having a license, registration or certification 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.

(e) Has any demand been made or judgment rendered against the applicant or any person named in question 3 or 4 for overdue monies by an insurer, insured or producer, or has the applicant or person 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) Has the applicant or any person named in question 3 or 4 ever been notified by any jurisdiction of any delinquent tax obligation that is not the subject of a repayment agreement?.....

Yes or No

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

(g) Is the applicant or any person named in question 3 or 4 a party to, or 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) Has the applicant or any person named in question 3 or 4 ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct?.....

Yes or No

9. **RELICENSING APPLICANTS MUST ANSWER THIS QUESTION.**

Since expiration of its last authority, has this applicant transacted business in New York State for the license being applied for in this application?.....

Yes or No

**Applicant Certification and Attestation**

The undersigned sub-licensee(s)/designated responsible person hereby certifies, under penalty of perjury that:

- ◆ all of the information submitted in this application and attachments is true and complete and (I am) or (we are) 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/us and the applicant to civil or criminal penalties;
- ◆ where required by law, the applicant hereby designates the New York State Superintendent of Financial Services to be its agent for service of process regarding all insurance matters in New York State and agrees that service upon the Superintendent is of the same legal force and validity as personal service upon the applicant;
- ◆ the applicant grants permission to the New York State 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 the Superintendent may have concerning (me) or (us) to any federal, state, or local agency, or any other organization referenced in New York Insurance Law Section 110, and any person acting on the Superintendent's behalf is hereby released from any and all liability of whatever nature by reason of furnishing such information;
- ◆ it is acknowledged that (I) or (we) understand and comply with the New York Insurance Laws and regulations promulgated thereunder; and
- ◆ **For Non-Resident License Applicants**, it is certified that (I) or (we) have been licensed within the last ninety (90) days and (am) or (are) in good standing in the home state/resident state for title insurance.

**THIS APPLICATION MUST BE VERIFIED AND SIGNED BY ALL SUB-LICENSEES/ DESIGNATED RESPONSIBLE PERSONS**

DATED _____  E-Mail Address: _____  WebSite URL: _____
--

Name of Entity Applicant
Signature of Sub-licensee/Designated Responsible Person
Signature of Sub-licensee/Designated Responsible Person
Signature of Sub-licensee/Designated Responsible Person
Signature of Sub-licensee/Designated Responsible Person
Signature of Sub-licensee/Designated Responsible Person

**\* \* 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 and 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, NY 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.

**CHILD SUPPORT OBLIGATION FORM**

\_\_\_\_\_  
Name of Entity on Application (Please Print)

\_\_\_\_\_  
Name of Individual (Please Print)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security Number

Are you under obligation to pay child support?

Yes    No

  

If "yes," (a) Are you current or less than 4 months in arrears?

  

(b) Are you paying by income execution plan agreed to by courts or parties?

  

(c) Is the obligation subject of pending court proceeding?

  

(d) Are you receiving public assistance or supplemental security income?

  

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 six months from the effective date of this license unless you notify the Department by that time which answer has changed to "yes."

Persons four 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 license and permits including but not limited to, licenses issued pursuant to §11-0713 of the Environmental Conservation Law.

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

Under penalty of perjury, I affirm that I have read this form and affirm that the information given on this form is true and hereby subscribe thereto.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This form may be reproduced

csoform2.doc

## **INSTRUCTIONS FOR CORPORATIONS, PARTNERSHIPS, TRADE NAMES, NAME CHANGES, ETC.**

The names of all corporations, partnerships, limited liability companies and trade names must receive prior approval from the Department of Financial Services for use in New York. Name changes for entities must also receive prior approval. The name must first be submitted to the Department for consideration, and either approval or disapproval will be forwarded in writing, along with the appropriate licensing application and/or instructions. After receiving Department approval, follow the instructions below and on the application.

**PLEASE NOTE: THE LICENSEE CAN ONLY DO BUSINESS IN THE NAME IN WHICH HE/SHE OR IT IS LICENSED.**

### **INDIVIDUAL TRADE NAMES**

**RESIDENTS** - you must file with the County Clerk's Office in the county in which your business address is located. After filing, we require a copy of the Business Certificate from the County Clerk's Office.

**NON-RESIDENTS** – 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.

### **ENTITY TRADE NAMES**

**RESIDENT AND NON-RESIDENTS** - must file with the New York State Department of State. After filing, we need a copy of the New York State Department of State filing receipt or proof of filing the assumed name with the New York State Department of State. Information/filing process can found on their website at <http://www.dos.ny.gov/corps/index.html> or you may contact that Department by calling (518)473-2492.

### **CORPORATIONS**

**RESIDENTS and NON-RESIDENTS** – must file with the New York State Department of State. After filing, we need a copy of the New York State Department of State filing receipt or proof of filing with the New York State Department of State. Information/filing process can found on their website at <http://www.dos.ny.gov/corps/index.html> or you may contact that Department by calling (518)473-2492. We also require a copy of your Articles of Incorporation or Charter attached to your application.

**NON-RESIDENTS** - must be currently licensed in the corporate name and in compliance in the declared home state. **NOTE:** The license information for your entity and for each of the individuals named as sublicensees on the licensing application **MUST** be included in the National Producer Database; if not, a currently dated Certification must be submitted from the state you have declared as your home state and in which your principle place of business or residence is located.

## **INSTRUCTIONS FOR CORPORATIONS, PARTNERSHIPS, TRADE NAMES, NAME CHANGES, ETC. (CONT'D)**

### **LIMITED LIABILITY COMPANIES**

**RESIDENTS AND NON-RESIDENTS** must file with the New York State Department of State. After filing, we need a copy of the New York State Department of State filing receipt or proof of filing with the New York State Department of State. Information/filing process can found on their website at <http://www.dos.ny.gov/corps/index.html> or you may contact that Department by calling (518)473-2492. We also require a copy of your Articles of Organization attached to your application.

**NON-RESIDENTS** - must be currently licensed in the limited liability name and in compliance in the declared home state. **NOTE:** The license information for your entity and for each of the individuals named as sublicensees on the licensing application **MUST** be included in the National Producer Database; if not, a currently dated Certification must be submitted from the state you have declared as your home state and in which your principle place of business or residence is located.

### **PARTNERSHIPS**

**RESIDENTS** - You must file with the County Clerk's Office in the county in which your business address is located. After filing, we require a copy of the Business Certificate from the County Clerk's Office.

**NON-RESIDENTS** – must be currently licensed in the partnership name and in compliance in the declared home state. **NOTE:** The license information for your entity and for each of the individuals named as sublicensees on the licensing application **MUST** be included in the National Producer Database; if not, a currently dated Certification must be submitted from the state you have declared as your home state and in which your principle place of business or residence is located.

### **LIMITED PARTNERSHIPS**

**RESIDENTS and NON-RESIDENTS** – must file with the New York State Department of State. After filing, we need a copy of the New York State Department of State filing receipt or proof of filing with the New York State Department of State. Information/filing process can found on their website at <http://www.dos.ny.gov/corps/index.html> or you may contact that Department by calling (518)473-2492.

**NON-RESIDENTS** - must be currently licensed in the limited partnership name and in compliance in the declared home state. **NOTE:** The license information for your entity and for each of the individuals named as sublicensees on the licensing application **MUST** be included in the National Producer Database; if not, a currently dated Certification must be submitted from the state you have declared as your home state and in which your principle place of business or residence is located.

**THE LICENSEE CAN ONLY DO BUSINESS IN THE NAME IN WHICH HE/SHE OR IT IS LICENSED.**

**NAME CHANGES FOR ENTITIES MUST INCLUDE AMENDED FILING RECEIPTS OR BUSINESS CERTIFICATES AND THE RETURN OF ALL LICENSES IN THE PREVIOUS NAME.**