3. Definition of relevant terms

A. <u>Breach of Trust</u>. A crime involving breach of trust includes, but is not limited to, an offense constituting or involving misuse, misapplication or misappropriation of: (a) anything of value held as a fiduciary (including, but not limited to, a trustee, administrator, executor, conservator, receiver, guardian, agent, employee, partner, officer director or public servant); or (b) anything of value of any public, private or charitable organization A wrongful act, use, misappropriation, or omission with respect to any property or fund which has been committed to a person in a fiduciary, official ca

<u>be sent to other states where written consent was granted</u>. Failure to file a timely amendment may result in denial of written consent or withdrawal of previously granted consent.

5. Process for granting or denying an Application

- A. Each jurisdiction will establish a process for the <u>receipt and</u> review of an Application. This may include incorporating the 1033 consent process into the process a jurisdiction uses to issue an insurance producer license.
- <u>B.</u> Notification of a 1033 waiver application availability should be clearly presented prior to and during the licensing application process.
- <u>C.</u> A jurisdiction's process for review of a 1033 waiver application should be provided to an applicant at the time of submission.
- <u>D.</u> A jurisdiction should submit its final decision to grant or deny a 1033 waiver to the NAIC's 1033 State Decision Repository.

6. Standard by which an Application is evaluated

A. An Application provides a prohibited person with the opportunity to demonstrate that, notwithstanding the conviction(s), he or she they is sufficiently trustworthy to participate may engage in the business of insurance without being a risk to consumers and/or insurers. A prohibited person has the burden of satisfying this standard. Factors that may be considered by the Commissioner may be determined by each jurisdiction's rules, and may

- r. whether the prohibited person's civil rights have been restored;
- s. whether the prohibited person has a pattern of unlawful activity;
- t. extent an insurance license offers opportunity to engage in further criminal activity;
- **L**u. level of cooperativeness of the prohibited person during the application process.

7. Ongoing duties of person who Application is granted Conditions of Written Consent

- A. An Application granted by the Commissioner is conditioned on the truth of the documents and information submitted by or on behalf of the prohibited person. If a prohibited person has made materially false or misleading statements, has presented materially false or misleading information, or has failed to disclose material information, that may constitute a separate violation of law.
- B. A person whose Application is granted has the Commissioner's consent to engage in the business of insurance according to the terms and conditions of the written consent.

SHORT FORM APPLICATION FOR WRITTEN CONSENT TO ENGAGE IN THE BUSINESS OF INSURANCE PURSUANT TO 18 U.S.C. §§ 1033 AND 1034

Notice to Applicant: 18 U.S.C. § 1033 prohibits certain activities by or affecting persons engaged, or proposing to become engaged, in the business of insurance:

- (e)(1)(A) Any individual who has been convicted of any criminal felony involving dishonesty or a breach of trust, or who has been convicted of an offense under this section, and who willfully engages in the business of insurance whose activities affect interstate commerce or participates in such business, shall be fined as provided in this title or imprisoned not more than five (5) years, or both.
 - (B) Any individual who is engaged in the business of insurance whose activities affect interstate commerce and who willfully permits the participation described in subparagraph (A) shall be fined as provided in this title or imprisoned not more than five (5) years, or both.
- (e)(2) A person described in paragraph (1)(A) may engage in the business of insurance or participate in such business if such person has the written consent of any regulatory official authorized to regulate the insurer, which consent specifically refers to this section.

This Application will be reviewed by the chief insurance regulatory official in this state to determine whether the Applicant should be given written consent to engage in the business of insurance or participate in the business pursuant to 18 U.S.C. § 1033(e)(2).

You must answer every question on the Application. If a question does not apply, indicate N/A in the space provided for the answer. Your answers are not limited to the space provided on the Application. At

PLEASE TYPE

SECTION I - APPLICANT INFORMATION

1. Full Name of Applicant:

Last Name First Na		lame	me Middle Name		
Have you ev	er been known by or used and	other name, includin	ng maiden name? † Y	Yes † No	
If yes, Ident	ify:		_		
Home Addres	ss:				
	Street Address	City	State	ZIP	
Mailing Addre	ess:				
	P.O. Box or Street Address	City	State	ZIP	
Personal Em	ail Address:				
Home Telephone Number:		Work Teleph	Work Telephone Number:		
Social Secur	ity No				
Have you eve	er used or been issued another s	ocial security numbe	r?		
If so provide	an explanation and prevocise?	h1471toZocils)r			

2.	Provide details of the conviction for which you are seeking written consent and the final disposition of these matter(s)—i including sentence; dates of incarceration; dates of probation/parole (if you are currently under probation/parole, include the name and phone number of person supervising your parole or probation; restitution paid; fines/costs ordered: fines/costs paid; and pardons granted. Include information as to whether or not your civil and political rights have been restored. Attach additional pages if needed.					
3.	Have you ever applied for consent from an insurance regulatory authority? † Yes † No If yes, provide details below:					
	State(s):					
	† Granted † Denied † Other					
	Please provide details of outcome of prior or pending applications for Consent:					
SEC	TION III - PRESENT/PROPOSED INSURANCE EMPLOYMENT					
1.	Please specify the name and address of your current or proposed employer to which the requested exemption_consent_will apply.					
2.	Please describe in detail the office, position, and title to which the requested exemption_consent will apply and a complete description of the activities, duties and responsibilities. Please attach or describe any proposed or current written or oral agreements, contracts, or understandings with any entity engaged in the business of insurance as defined by 18 U.S.C. § 1033. (If consent is given, it will be applicable to the activities described herein.) Please include your date of employment or proposed date of employment.					