

Applicant Company Name: _____

NAIC No. _____

FEIN: _____

Uniform Certificate of Authority Application QUESTIONNAIRE

For Adding or Deleting Lines of Business to an Existing Certificate of Authority

Directions: Complete **Section I** (questions 1 – 21) for adding new lines of business. Complete **Section II** (questions 22 through 25) for deleting lines of business. Each "Yes" or "No" question is to be answered by marking an "X" in the appropriate space. All questions should be answered. If the Applicant Company denotes a question as "Not Applicable" (N/A) an explanation must be provided. Other answers and additional explanations or details may be provided in writing attached to the affidavit. Please complete this form and file it with the Applicant Company's application to change lines of business to its Certificate of Authority.

Section I

1. Has the Applicant Company merged or consolidated with any other company within the last five years?
Yes ____ No ____

2. Have any of the following taken place since the date of the Applicant Company's most recent Annual Statement?
 - A. Is the Applicant Company presently negotiating for or inviting negotiations for any transaction as described in question 1 above?
Yes ____ No ____

 - B. A change of management or control?
Yes ____ No ____

 - C. Does the Applicant Company contemplate a change in management or any transaction which would normally result in a change of management within the next 12 months?
Yes ____ No ____

If the answer to any question is yes, provide the details in writing and attach to the Questionnaire.

3.
 - A. Has the Applicant Company's certificate of authority to do business in any state been suspended or revoked within the last five years?
Yes ____ No ____

 - B. Has the Applicant Company's application for admission to any state been denied within the last five years?
Yes ____ No ____

 - C. Has the Applicant Company's application to add lines of business to its Certificate of Authority in any state been denied within the last five years?
Yes ____ No ____

If the answer to any of the above question is yes, provide the details in writing and attach to the Questionnaire.

4. Since the date of the most recent Annual Statement, has any person who is presently an officer, director, or shareholder of the Applicant Company, been convicted of, or pleaded guilty, or nolo contendere to, a felony charge for theft, larceny or mail fraud, or of violating any corporate securities statute or any insurance statute?
Yes ____ No ____

If yes, provide the details in writing and attach to the Questionnaire.

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5. Is the Applicant Company presently engaged in a dispute with any state or federal regulatory agency?

Yes ____ No ____

If yes, provide the details in writing and attach to the Questionnaire.

6. Is the Applicant Company a plaintiff or defendant in any legal action other than one arising out of policy claims?

Yes ____ No ____

If yes, provide a summary of each case and attach to the Questionnaire.

7. Has the Applicant Company, within 18 months last preceding the date of this affidavit, entered into any material transactions, as defined in the NAIC Model Law on Mate-1.5 (aw)1.1 (o.9 (a)4.2 (i)6.9 (m)0.9 (s)9.4 (?)4.2 (7?)4.2 ((t)6.9

If yes, provide a ss (s)9.5d(nd a)4taelafo ad in 18 m9 (he)4.2 2 (t)6.9 (t)6.9 (a)4.2 (c)4.2 (h t)18.9 (o t)6 t2 (Q)5.1 (ue)16.2 (s)9.5
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~~ANSWER BY THE COMPANY TO THE NAIC MODEL LAW ON MATERNAL AFFIDAVIT (MATA) (REVISED 2014) (FORM 8C) (EFFECTIVE 08/18/2014)~~

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If yes, supply details including all sales literature which refers to the insurance and mutual fund or other investment plan connection.

19. If the Applicant Company is applying for authority to write Variable Annuities, provide the following:

A. Copy of any third party management or service contracts

B. Commission schedules

C. Five-year sales and expense projections

D. A statement from the Applicant Company's actuary describing reserving procedures including TS70 Td(2)(oc82 (e)4.2 (du)

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21. If the Applicant Company is applying for authority to write Life Insurance, has the Applicant Company at any time within the last five years, irrespective of changes in management, taught or permitted its agents to sell insurance by using any of the following devices, or representations resembling any of the following:
- A. "Centers of influence" and "advisory board"
Yes___ No___
 - B. Charter or founder's policy
Yes___ No___
 - C. Profit sharing plan
Yes___ No___
 - D. Only a limited number of a certain policies will be sold in any given geographical area
Yes___ No___
 - E. "Profits" will accrue or be derived from mortality savings, lapses and surrenders, investment earnings, savings in administration
Yes___ No___
 - F. Printed list of several large American or Canadian insurers showing the dollar amounts of "savings", "profits" or "earnings" they have made in such categories
Yes___ No___

If the answer to any of the above is yes, supply a complete set of all sales material including the sales manual, all Applicant Company instructional material, brochures, illustrations, diagrams, literature, "canned" sales talks, copies of the policies which are no longer in use, list of states where such methods were used and the date (by year) when they were used, the approximate amount of insurance originally written in each state on each policy form thusly sold, the amount currently in force, and the lapse ratio on each form year by year and cumulatively in gross to the present date.

Section II

22. Utilizing the information contained in Form 3, list all of the lines of business that the Applicant Company requests to be deleted from its Certificate of Authority.
23. Provide a detailed explanation for the Applicant Company's request to delete these lines of business.
24. For each state, indicate the number of policyholders by line of business that will be non-renewed or cancelled if therenewed ~~and~~