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## **Uniform Application for** Individual **Producer** License/Registration

(Please Print or Type)

		Demogra	aphic Inforn	nation				
1) Soc. Security Number		2) If assigned, National Producer Number (NPN)						
<u>_</u>								
If applicable, FINRA Individual Number	Central Registration Deposite	ory (CRD)						
4 Last Name	JR./SR. etc	(5) First N	lame	6) N	Aiddle Nam	ne	7 Date of Birt	h
							_	lay) (year)
Residence/Home Address (Physic	cal Street)	Cit	у	l		State	Zip Code	Foreign Country
Home Personal-Phone Number  ( ) -  Individual ApplicantPersonal Email Address:  Employer's Business Entity Nam.	Male Female  Non-Binary	Are you a Citizen of the United States? (Check One) Yes No (If No, of which country are y (If NO, and this is an application for a Resident License, you work in the U.S.)			•			
Employer 8 Dustness Entity Name	е							
(8) Business Address (Physical Street	(i) P.C	). Box	20City	(	State		22 Zip Code	Foreign Country
Business Phone Number (include extension)	Business Fax Number		Business I	E-Mail Adddre	ss Agency		Business Wel	Site Address
,	( )							
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## Uniform Application for Individual Producer License/Registration

Applicant Name:	

## **Background Questions**

The Applicant must read the following very carefully and answer every question. All written statements submitted by the Applicant must include an original signature.

NOTE: For Questions 1a, 1b and 1c, "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.

If you answered "Yes" to any of the below questions (1a, 1b, or 1c), you must attach to this application:

- a) a written statement explaining the circumstances of each incident,
- b) a copy of the charging documents of each incident,
- c) a copy of the official documents of each incident, which dem

Please note the application may be revereference the National Insurance Production		•	re filing the cu	irrent versio	on of the ap	plication,	please	
<b>EVER</b> been subject to a bankruptcy procee which would include, but is not limited to monies held by you in a capacity for third p 3.	o, deposits, insured's pre	ersonal bankruptcies, unless emium payments, employee	they involve fund tax withholdings.	s held on beha , escrow acco	alf of others, unts, or any	Yes	No	
If you answer yes, submit a statement summ location of bankruptcy.	narizing the details of the	e indebtedness and arrangen	nents for repaymen	nt, and/or type	and			
4. Have you been notified by any jurisdiction of a repayment agreement?	to which you are applyin	g of any delinquent tax obli	gation that is not the	he subject		Yes	No%	]
If you answer yes, identify the jurisdiction(	s):							
5. Are you currently a party to, or have you ev of fraud, misappropriation or conversion of				ing involving	allegations			
If you answer yes, you must attach to this a  a) a written statement summarizing th  b) a copy of the Petition, Complaint o  c) a copy of the official documents, w	e details of each incident r other document that con	mmenced the lawsuit or arb		ion proceeding	gs, and			
Have you or any business in which you are or company, ever had an insurance agency or securities business terminated for any alleger.	securities broker contract							
If you answer yes, you must attach to this a  a) a written statement summarizing the receiving an insurance license, and		and explaining why you feel	this incident shou	ald not preven	t you from			
b) copies o c)	a written u \$ a copy	\$ M M	g	M	\$			

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## **Uniform Application for Individual Insurance Producer** License/Registration

Applicant Name: \_\_\_ 8. In response to a "Yyes" answer to one or more of the Background Questions for this application, are you submitting, or have you previously submitted document(s) to the NAIC/NIPR Attachments Warehouse? N/A Yes No NOTE: The state(s) identified on this application will receive an alert that your supporting documents are available if: You have previously loaded a document(s); You have recently submitted an application that is pending; You are submitting the same type of application (resident/nonresident, initial/renewal); and You are answering "Yes" to the same background question(s). If you have not previously loaded your supporting documents, you may do so after you have successfully completed your application. You will be provided a link to the Attachment Warehouse instructions upon completion. If you answer yes Will you be associating (linking) previously filed documents from the NAIC/NIPR Attachments Warehouse to this application? Note: If you have previously submitted documents to the Attachments Warehouse that are intended to be filed with this application, you must go to the Attachments Warehouse and associate (link) the supporting document(s) to this application based upon the particular background question number you have answered yes to on this application. You will receive information in a follow up page at the end of the application process, providing a link to the Attachment Warehouse instructions. Yes \_\_\_ No\_ 9. Are you a member or veteran of the armed forces, or the spouse or surviving spouse of a service member or veteran?