

UNIFORM CERTIFICATE OF AUTHORITY APPLICATION

STATE FILING FEES – PRIMARY AND EXPANSION APPLICATIONS

The following table shows the fees charged by each state for filing either a Primary or Expansion Uniform Application. Please note that, due to retaliatory statutes, the ultimate amount of fees you pay in any state may be more than the amount indicated below.

✓ = This information has been updated by the state department of Insurance

State	Filing Fees	Payee	Instructions
✓AL	\$1,005 or retaliatory, whichever is greater, due upon <u>approval</u> . \$1,500 nonrefundable application examination fee due at filing.	Alabama DOI P.O. Box 303351 Montgomery, AL 36130	Mail \$1,500 check with application. Richard L. Ford (334) 241-4151 richard.ford@insurance.alabama.gov
AK	\$2,250 or retaliatory, whichever is greater.	Division of Insurance State of Alaska 550 West 7 th Avenue, Suite 1560 Anchorage, AK 99501-3567	Mail check with application.
AZ	<u>Primary Application:</u> \$270.00 Application fee \$100.00 Arizona Examiners’ Revolving Fund deposit \$24.00 per individual for fingerprint card processing fee <u>Expansion Application:</u> The greater of \$570.00 or retaliatory amount Application Fee \$100.00 Arizona Examiners’ Revolving Fund deposit \$175.00 Articles of Incorporation filing fee	Arizona Department of Insurance Arizona Examiners’ Revolving Fund Arizona Department of Insurance Arizona Department of Insurance Arizona Examiners’ Revolving Fund Arizona Corporation Commission	Arizona Department of Insurance Financial Affairs Division 2910 North 44 th Street, Suite 210 Phoenix, AZ 85018

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AR	\$1,000 or retaliatory, whichever is greater	Arkansas DOI Finance Division 1200 West Third Little Rock, AR 72201-1904	Kimberly S. Johnson Market Analyst/Admissions Coordinator (501) 371-2680 kimberly.johnson@arkansas.gov
CA	Primary App: \$3,599 Expansion App: \$3,599	Insurance Commissioner State of CA Corp. Affairs Bureau 45 Fremont Street, 24 th Floor San Francisco, CA 94105	
√CO	\$500 nonrefundable processing fee If approved, additional \$ 1,231	Payable to: Colorado Division of Insurance	Mail checks with application.
√CT	\$ 220 for filing all documents prerequisite to the issuance of a license. Health Care Centers \$ 1,350 (Primary Apps only)	Treasurer – State of Connecticut	Fee should NOT be included with the application. An invoice will be sent to the applicant for appropriate filing fee.
DE	\$700 (or retaliatory, whichever is greater) for filing application for initial Certificate of Authority, including all documents submitted as part of such application. \$100 (or retaliatory, whichever is greater) issuance fee for the Certificate of Authority, if application is approved.	Make checks payable to: Delaware Department of Insurance 841 Silver Lake Boulevard Dover, DE 19904	
√DC	\$500	Make checks payable to: District of Columbia Treasurer Mail Fees To: c/o DC Treasurer, P.O. Box 92180 Washington, DC 20092	Denise Parker Insurance Licensing Specialist (202)442-7815 denise.parker@dc.gov Mail Correspondence To: Department of Insurance and Securities Regulation 810 First Street, Suite 701 Washington, DC 20002

State	Filing Fees	Payee	Instructions
FL	<p>Primary & Expansion App: \$1,500 Filing Fee \$1,000 Company License Tax.</p> <p>Primary App: \$25 Permit Filing Fee</p>	<p>Make checks payable to: Department of Financial Services P.O. Box 6100 Tallahassee, Florida 32314-6100</p>	<p>Applicants are required to include the following codes on each check:</p> <p>Primary & Expansion App: \$1,500 Filing Fee Codes: B/T-C, TY/CL-10/06, F/T-F \$1,000 Company License Tax Codes: B/T-C, TY/CL-10/30, F/T-L</p> <p>Primary App: \$25 Permit Filing Fee Codes: B/T-C, TY/CL-10/08, F/T-F</p>
GA	<p>\$600 or retaliatory fee, whichever is greater</p>	<p>Georgia DOI Suite 604, West Tower 2 MLK, Jr. Drive Atlanta, GA 30334</p>	<p>Application fee should accompany application.</p>
√HI	<p>Effective July 1, 2010 to June 30, 2014, all insurance licensing fees will be doubled. One-half of the fees “shall constitute an insurance license and service tax, which shall be deposited into the general fund” (2010 Session Laws of Hawaii—Act 59)</p> <p>Initial Application Fee \$1,800 (due at time of application)</p> <p>Certificate of Authority \$2, 400 (due before issuance of C/A)</p>	<p>Make check payable to: Department of Commerce and Consumer Affairs.</p>	<p><u>Contacts:</u></p> <p>Sally D. Bautista, Insurance Examiner Certification and Agency Exam. Section (808) 586-7414 Fax#: (808) 586-3873 sbautista@dcca.hawaii.gov</p> <p>Dwight Hamamura, Chief Examiner Ph: (808) 586-7383 Fax: (808) 586-3873 DHamamura@dcca.hawaii.gov</p>
ID	<p>Surplus less than \$10M: \$1,000 Surplus greater than \$10M, but less than \$100M: \$2,500 Surplus greater than \$100M: \$4,500</p>	<p>Idaho Department of Insurance 700 West State Street 3rd Floor P.O. Box 83720 Boise, ID 83720-0043</p>	
IL	<p>Filing all documents for admission \$5,000 Certificate of Authority \$200 See state specific page for additional fees and taxes.</p>	<p>Director of Insurance Illinois DOI 320 West Washington Springfield, IL 62767</p>	<p>Mail check with application.</p>

State	Filing Fees	Payee	Instructions
√IN	Domestic Insurance Companies: LSHMOs and HMOs \$350 Foreign Insurers: Larger of \$510 or retaliatory amount Redomestication fee: Larger of \$470 or retaliatory amount, plus \$90 for filing of Articles. Redomestication Application Fee: \$450 Amended Certificate of Authority: \$10 Articles of Redomestication: \$10	Indiana DOI 311 W. Washington, Suite 300 Indianapolis, IN 46204-2787 Filing of Articles Indiana Secretary of State	Mail check with application.
IA	Application Filing Fee: Larger of \$50 or retaliatory amount Certificate of Authority Issuing Fee: Larger of \$50 or retaliatory amount Desk Audit Fee in Accordance w/ 507.2: Larger of \$1,500 or retaliatory amount	Iowa DOI 330 Maple Street Des Moines, IA 50319	
KS	Larger of \$500 or retaliatory amount.	Checks are made payable to the Kansas Insurance Department.	Mail check with application. If the larger admission fee is \$500, additional fees will be required only if the Certificate of Authority is approved. If the larger admission fee is the retaliatory amount, no additional fees will be required.
KY	Domestic Companies Charter Documents \$100 Original Certificate of Authority \$500 Total \$600 Foreign Companies Annual Statement \$100 Charter Documents \$100 Original Certificate of Authority \$500 Total \$700 Or retaliatory fee, whichever is greater.		Checks are made payable to Kentucky State Treasurer and forwarded with the application.

State	Filing Fees	Payee	Instructions
√LA	Application fee is calculated as follows: Certificate of Authority \$2,500 Recordation of Articles of Incorporation \$25 Total Fee to be submitted \$2,525		Checks are made payable to the Louisiana Department of Insurance. The check for Policy Form Review must be a separate check.
ME	Primary App: \$1,000 Expansion App: \$1,000 Fees are retaliatory per Title 24-A, M.R.S.A., §428.	Make Checks Payable to: Treasurer, State of Maine Mail to: Maine Bureau of Insurance 34 State House Station Augusta, ME 04333	
MD	Maryland's required Certificate of Authority filing fee is \$1,225 subject to retaliatory provision as set forth in Section 6-303 of the Insurance Article of the Annotated Code of Maryland. Dollar amounts for fees are set forth in the Insurance Article of Annotated Code of Maryland in Sections 2-112, 2-112.1 and 2-113. Fees for Health Maintenance Organizations are set forth in Section 19-709 of Article Health General of the Annotated Code of Maryland.	Maryland Insurance Administration 200 St. Paul Place, Suite 2700 Baltimore, MD21202-2272	Expansion App: Please include a letter from domiciliary jurisdiction setting forth filing requirements and fees for filing an application and issuance of an original Certificate of Authority, pay the greater fees. Conrad A. Ragone Company Licensing Analyst (410) 468-2156 (410) 468-2112 cragone@mdinsurance.state.md.us

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✓MA	<p>Primary App: \$1,000</p> <p>Expansion App:</p> <p>Examination Fee \$1,000</p> <p>Charter Admission Fee \$125</p> <p>Annual Statement Filing Fee \$150</p> <p>Total Application Fees \$1,275</p>	<p>Checks payable to: The Commonwealth of Massachusetts Division of Insurance</p> <p>Massachusetts Division of Insurance Company Licensing Section Attn: Peter J. Arens, Sr. Licensing Coordinator 1000 Washington Street, Suite 810 Boston, MA 02118-6200</p>	<p>Application fee should be mailed with the application.</p>
MI	<p>Primary & Expansion Apps:</p> <p>Application Filing Fee \$500 or Retaliatory whichever is the greater amount</p> <p>Certificate of Authority Issuing Fee \$25</p> <p>Primary App:</p> <p>Articles of Incorporation Review Fee \$25 (Domestic Only)</p>	<p>Make checks payable to “The State of Michigan”</p> <p>Office of Financial & Insurance Regulation Enterprise Monitoring & Insurance Examinations Division 611 W. Ottawa Street, 3rd Floor Lansing, MI 48933</p> <p>Office of Financial & Insurance Regulation Enterprise Monitoring & Insurance Examinations Division P.O. Box 30220 Lansing, MI 48909-7720</p>	<p>Application filing fees must accompany the application. The issuing fees will be billed if the applicant is approved for licensure.</p>
✓MN	<p>Primary & Expansion Apps:</p> <p>Application Fee \$1,500</p> <p>In addition, the Company is also billed a desk audit charge.</p> <p>Expansion App:</p> <p>Upon licensing the company will be billed \$1,032.50 for a Property and Casualty Company (including Title Companies) or \$1,082.50 for a Life Company.</p>	<p>Minnesota Department of Commerce 85 7th Place East, Suite 500 St. Paul, MN 55101-2198</p>	

State	Filing Fees	Payee	Instructions
MS	<p>Primary App: \$200</p> <p>Expansion App: \$1,000 nonrefundable filing fee for the filing of a certified copy of the company’s charter or deed of settlement.</p>	<p>MS Insurance Department P.O. Box 79 Jackson, MS 39205-0079</p> <p>Or: 1001 Woolfolk State Office Building 501 N. West Street Jackson, MS 39201</p>	<p>Mail check with application. Other licensing fees will be requested at the time of licensing.</p>
MO	<p>Strictly Retaliatory Admission Fee - \$250.00</p>	<p>Missouri DOI Rm. 630, HST Bldg. 301 W. High Street Jefferson, MO 65101</p>	<p>Mail check with application.</p> <p>Include notation on check stating company name and “Application fee”.</p>
MT	<p>\$1,900 or retaliatory, whichever is greater.</p>	<p>Commissioner of Insurance State of Montana 840 Helena Avenue Helena, MT 59601</p>	<p>Submit payment with the application payable to the Commissioner of Insurance State of Montana</p> <p>Russ Ehman (406) 444-4350 rehman@state.mt.us</p>
NE	<p>§44-114 Nonrefundable Preadmission Review Fee: \$1,000 §44-114 Final Admission Filing Fee (Due upon approval): \$300 §44-150 Subject to retaliation</p>	<p>Nebraska DOI 941 “O” Street, Suite 400 Lincoln, NE 68508-3639</p>	<p>Terry A. Sindelar, CFE Assistant Chief Examiner Company Administrator (402) 471-0373 terry.sindelar@nebraska.gov</p>

State	Filing Fees	Payee	Instructions
√NV	<p>Authorized Insurers:</p> <p>Application Fee \$2,450</p> <p>Review Fee 500</p> <p>Service of Process 5</p> <p>HMO only (Cof A) 250</p> <p>Motor Clubs</p> <p>Application Fee 500</p> <p>Premium Finance</p> <p>Application Fee 500</p> <p>Surplus Lines</p> <p>Application Fee \$2,450</p> <p>Review Fee 500</p> <p>Foreign Risk Retention Group</p> <p>Application Fee 250</p> <p><u>See chart for additional information</u></p>	<p>Nevada Division of Insurance Corporate & Financial Affairs 1818 East College Pkwy, Suite 103 Carson City, NV 89706</p>	<p>Kathy Lamb 775-687-0753 klamb@doi.state.nv.us</p> <p>or</p> <p>Joy Grimmer 775-687-0754 jgrimmer@doi.state.nv.us</p> <p>Special Deposits: Judi Waite 775-687-0752 jdwaite@doi.state.nv.us</p>
√NH	<p>Primary App:</p> <p>RSA 400-A:I,(a) Application Fee \$1,000</p> <p>RSA 400-A:I,(b) License Fee \$100</p> <p>Or</p> <p>RSA400-A:35 Retaliatory Provisions</p> <p>Expansion App: Retaliatory</p>		<p>Expansion App: Please submit proper payment according to company's state of domicile. See state specific page for fees.</p> <p>Mary Verville 603-271-7973 x9254 mary.verville@ins.nh.gov</p>
✓NJ	<p>Primary App:</p> <p>Feasibility Study Review: \$1,000</p> <p>To file a Certificate of Incorporation of a domestic insurer: \$1,000</p> <p>Criminal History Checks: \$15 per person</p> <p>Expansion App:</p> <p>Non Life/Health Admissions: \$3,500</p> <p>Life/Health Admissions: \$5,000</p>	<p>Payable to the New Jersey General Treasury</p> <p>New Jersey Department of Banking and Insurance P.O. Box 325 Trenton, NJ 08625-0325</p>	<p>Fee is submitted with the application.</p> <p>Admissions:</p> <p>Non Life/Health Attn: <u>Kwame Asare</u></p> <p>Life/Health Attn: Adelaide Phelan</p>

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NM	\$1,000 Nonrefundable	New Mexico Insurance Division P.O. Box 1269 Santa Fe, NM 87504-1269	Make check payable to: New Mexico Insurance Division
NY	\$10 fee for initial issuance of license \$30 fee for initial filing of Charter (certified copy) Per Section 9107 of the N.Y. Ins. Law	All filing fees are payable to the "Superintendent of Insurance" and must be remitted to the Office of General Counsel in Albany.	
NC	Application Fee: \$1000 (nonrefundable) (NCGS 58-6-5(1))	Make checks payable to: North Carolina Department of Insurance 1201 Mail Service Center Raleigh, NC 27699-1201	Mail check with application. Anne Morgan Company Admissions Officer (919) 807-6603 anne.morgan@ncdoi.gov
ND	Larger of \$500 or retaliatory amount	Commissioner North Dakota DOI 600 E. Boulevard Avenue Bismark, ND 58505	Yvonne T. Keniston, (701) 328-3328 Fax: (701) 328-9610 ytkeniston@nd.gov
OH	Strictly Retaliatory	Ohio DOI Risk Assessment 50 W. Town Street, Suite 300 Columbus, OH 43215	Primary & Expansion Apps: Gary Burchfield Office of Risk Assessment (614) 728-1074 gary.burchfield@insurance.ohio.gov Corporate Amendment Apps: Beth Chase Office of Risk Assessment (614) 644-2648 beth.chase@insurance.ohio.gov
✓OK	Primary App: Application Review Fee (Retaliatory) \$ 1,000 Fraud Fee (Upon approval) \$ 750 Expansion App: Pending application review, the greater of retaliatory or \$ 1,000 Fraud Fee (Upon approval) \$ 750 Primary & Expansion:	Oklahoma DOI Financial Division (Admissions) 3625 N.W. 56th Street, Suite 100 Oklahoma City, OK 73112-45211	Jeanette Pearce Administrative Assistant Oklahoma Insurance Department (405) 521-6651 Fax (405) 522-2640 jeanette.pearce@oid.ok.gov

State	Filing Fees	Payee	Instructions
	Certificate of Authority \$ 150 Appointment of Commissioner as Agent for service of process \$ 10		
OR	Larger of \$2,500 or retaliatory, nonrefundable amount	Oregon Department of Consumer & Business Services Insurance Division 350 Winter Street NE, Room 440 Salem, OR 97301-3883	Mail check with application.
√PA	\$2,500	Commonwealth of Pennsylvania	Please mail check with application to: Chief, Company Licensing Division Pennsylvania Insurance Dept. 1345 Strawberry Square Harrisburg, PA 17120
RI	Primary App: There is no statutory fee for issuing a Certificate of Compliance. However, to obtain a Certificate of Compliance, the applicant must submit to an organizational exam, the cost of which is borne by the applicant, pursuant to R.I. Gen. Laws §27-13.1-1 et seq. Expansion App: Rhode Island General Law (R.I. Gen Laws) Chapter 27-2.1 mandates a nonrefundable Application Fee of \$1,200 for new foreign company applications. Once your company's application has been accepted, you will be notified of that fact and will be asked to submit an additional, non-refundable Review Fee of \$1,800. Note: Pursuant to R.I. Gen. Laws §27-2-17(a), foreign company fees are retaliatory if the company's state of domicile would charge a R.I. insurance company a higher fee for a like transaction.	R.I. General Treasurer	Expansion App: Please mail check with application, or, in the case of the Review Fee, separately as later requested to: Matt DiMaio Principal Licensing Insurance Division Rhode Island Insurance Division 1511 Pontiac Avenue, Bldg. 69-2 Cranston, RI 02920 (401) 462-9612 mdimaio@dbr.state.ri.us
SC	Strictly Retaliatory	South Carolina DOI	Tim Campbell

State	Filing Fees	Payee	Instructions
		1201 Main Street, Suite 1000 (29201) P.O. Box 100105 Columbia, SC 29202-3105	Chief Financial Analyst (803) 737-6221 tcampbell@doi.sc.gov
SD	Application filing fee: \$500 Certificate of Authority: \$25 Subject to Retaliatory Law	South Dakota DOI 445 E. Capitol Avenue 1 st Floor Pierre, SD 57501	Application filing fee is non-refundable and collected whether or not a license is issued. Retaliatory fees, if any, will be assessed if a license is issued.
TN	Primary App: Nonrefundable review fee \$675 If a Certificate of Authority is issued \$440 Expansion App: Nonrefundable review fee: Larger of \$675 or retaliatory fee Certificate of Authority: Larger of \$440 or retaliatory fee All other fee related to admissions are on a retaliatory basis.	TN Dept. of Commerce and Insurance 4 th Floor, Examinations Dept. 500 James Robertson Parkway Nashville, TN 37243	Make all fees payable to TN Department of Commerce and Insurance and include retaliatory reviewing fees, if applicable. Payment should be submitted with original filing.
TX	Primary App: Domestic entities that wish to be incorporated under Texas law and receive a Certificate of Authority \$1,500 Expansion App: Foreign entities that wish to receive a Certificate of Authority \$2,000 Redomestication: Re-stated Articles of Incorporation \$250	Company Licensing and Registration MC 305-2C Texas DOI 333 Guadalupe Austin, TX 78701	Make all fees payable to Texas Department of Insurance.

State	Filing Fees	Payee	Instructions
✓UT	<p>Primary App: Certificate of Authority: Initial license application: \$1,000 (NO retaliatory fees) E-commerce and Internet technology services fee: \$75</p> <p>Redomestication: Initial license application: \$2,000 E-commerce and Internet technology services fee: \$75</p> <p>Expansion App: \$1,000 filing fee + \$75 e-commerce fee (Retaliatory fee not applicable)</p>	Utah Insurance Department Company Licensing Division State Office Bldg., Room 3110 Salt Lake City, UT 84114	Check is made payable to the Utah Insurance Department.

VT	<p>Application Fee: Domestic Insurer, Surplus Lines, Reinsurer, Fraternal Organizations and Premium Finance Companies: \$0 Viatical Settlement Companies: \$50 Alien, Foreign, Reciprocal, HMOs: \$200 Continuing Care Retirement Communities: \$1500 All fees are subject to retaliation.</p>	Vermont DOI Company Licensing Section 89 Main Street, Drawer 20 Montpelier, VT 05620	Include retaliatory fees (802) 828-2470
VA	Nonrefundable filing fee \$500 (§ 38.2-1024)	Payable to: Treasurer of Virginia Virginia State Corporation Commission Bureau of Insurance P.O. Box 1157 Richmond, VA 23218	The fee must accompany application.
✓WA	Larger of \$400 or retaliatory amount	Do not mail check with application. Applicant will be informed of applicable fees at the time the application is approved.	Gayle Pasero Company Licensing Manager (360) 725-7210 gavlep@oic.wa.gov
WV	Larger of \$100 or retaliatory amount	West Virginia Insurance Commissioner P.O. Box 50540 Charleston, WV 25305-0540	Mail check with application.
WI	Application Fee: Larger of \$400 or retaliatory amount. Certificate of Authority: Larger of \$400 or retaliatory amount	Office of the Commissioner of Insurance P. O. Box 7873 Madison, WI 53707-7873	Mail check with application.
WY	Larger of \$750 or retaliatory amount Upon approval of the application, an assessment for the Department's budget will need to be paid before a Certificate of Authority is issued. The assessment amount varies depending on the amount of the Department's budget.	Wyoming DOI 106 East 6 th Avenue Cheyenne, WY 82002	Make checks payable to: Wyoming State Treasurer