

National Treatment and Coordination (E) Working Group

Company Licensing Proposal Form

<p style="text-align: right;">DATE: _____</p> <p>CONTACT PERSON: _____</p> <p>TELEPHONE: _____</p> <p>EMAIL ADDRESS: _____</p> <p>ON BEHALF OF: _____</p> <p>NAME: _____</p> <p>TITLE: _____</p> <p>AFFILIATION: _____</p> <p>ADDRESS: _____</p> <p>_____</p>	<p style="text-align: center;"><u>FOR NAIC USE ONLY</u></p> <p>Agenda Item # _____</p> <p>Year _____</p> <p style="text-align: center;"><u>DISPOSITION</u></p> <p>[] ADOPTED _____</p> <p>[] REJECTED _____</p> <p>[] DEFERRED TO _____</p> <p>[] REFERRED TO OTHER NAIC GROUP _____</p> <p>[] EXPOSED _____</p> <p>[] OTHER (SPECIFY) _____</p>
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IDENTIFICATION OF SOURCE AND FORM(S)/INSTRUCTIONS TO BE CHANGED

[] UCAA Forms [] UCAA Instructions [] UCAA Manual [] Company Licensing Best Practices Handbook

Forms:

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|---|--|-----------------------------------|
| [] Form 1 – Checklist | [] Form 2 - Application | [] Form 3 – Lines of Business |
| [] Form 6- Certificate of Compliance | [] Form 7 – Certificate of Deposit | [] Form 8 - Questionnaire |
| [] Form 8C- Corporate Amendment Questionnaire | [] Form 11-Uniform Consent to Service of Process | |
| [] Form 13- ProForma | [] Form 14- Change of Address/Contact Notification | |
| [] Form 15 – Affidavit of Lost C of A | [] Form 16 – Voluntary Dissolution | |
| [] Form 17 – Statement of Withdrawal | | |

DESCRIPTION OF CHANGE(S)

REASON OR JUSTIFICATION FOR CHANGE **

Additional Staff Comments:

** This section must be completed on all forms.

Revised 01-2014