

Risk Retention Group Name \_\_\_\_\_

NAIC No.: \_\_\_\_\_

**Uniform Certificate of Authority Application (UCAA)  
Form 16B  
Statement of Voluntary Dissolution  
Summary of Registration Status in Non-Domicile States**

This statement is submitted to the Risk Retention Group’s domestic state regulator to summarize how the Risk Retention Group has addressed its registration in other states. Limit the information to those states in which a registration has been held within the last 10 years.

Registration has been held with the states listed below:	Date of notification of cancellation of registration by this state. If cancellation is not in effect, attach explanation.	Do any policyholder obligations of the dissolving Risk Retention Group exist in this state? If yes, attach explanation.	Have all premium taxes, fees and other monetary obligations owed to this state been paid? If no, attach explanation.

I acknowledge that I am an officer of the Risk Retention Group, am authorized to execute and am executing this document on behalf of the Risk Retention Group. I hereby certify under penalty of perjury under the laws of the applicable jurisdictions that all of the forgoing, including attachments, is true and correct as of the date of signature below.

Executed at \_\_\_\_\_  
Location

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Officer

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title of Officer