

Pursuant to Sections 1704 through 1707 and 1756 of the California Insurance Code

Insurer Name: _____

FEIN: _____ NAIC # _____
Federal Employer Identification Number

To the Insurance Commissioner of the State of California: Notice is hereby given that effective from the date shown on this notice; the designated insurer hereby appoints the person(s) named herein to act as its agent.

Appoint Type: Only one appointment type per line.

*AH - Accident and Health Agent; *LO - Life-Only Agent; LI - Life-Limited to the Payment of Funeral & Burial Expenses; *PR - Property Broker-Agent;
*CA - Casualty Broker-Agent; AU - Limited Lines Auto Insurance Agent; LA - Life and Disability Analyst; CS - Cargo Shipper's Agent;
**CI - Credit Insurance Agent; PL - Personal Lines Broker Agent; MC - Motor Club Agent; PF - Part Time Fraternal Agent;
TA - Limited Lines Travel Agent; ***TMR - Title Marketing Representative; DO - Disability Only; HP - Home Protection; VC - Variable Contract

Appoint Type	National Producer Number (NPN)	CA License #	Name: As shown on license	Effective date of Appointment
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Signature of Insurer: Signature must be that of an officer of the Company or a person authorized under a Special Power of Attorney on file with the Department.

► Name _____ Official Title _____ Date _____
Phone Number () _____ E-mail _____

Filing fee: Submit \$32 filing fee per appointment type. Enter number of appointments: _____ X \$32 \$

Please note: if you are appointing an applicant for an insurance license, submit only one name per form and attach the form to the application.

If you are submitting only this Action Notice form, Mail Action Notice and fee to: California Department of Insurance, P.O. Box 311, Sacramento, CA 95812-0311.

or

If Action Notice is being submitted with original application, Mail Action Notice with Application and fee to: California Department of Insurance, P.O. Box 1139, Sacramento, CA 95812-1139

*If appointment types are Accident and Health Agent, Life-Only Agent and Variable Contract Authority or Property Broker Agent and Casualty Broker-Agent submit only one filing fee of \$32..

** For Credit Insurance applicants only: submit \$45 per endorsement.

*** For Title Marketing Representative: no fee