## STATE OF CALIFORNIA – DEPARTMENT OF INSURANCE

## APPLICATION TO WITHDRAW FROM CALIFORNIA AS AN UNDERWRITTEN TITLE COMPANY

CDI-060 (Rev. 11/2015)

## TO THE INSURANCE COMMISSIONER OF THE STATE OF CALIFORNIA:

The undersigned underwritten title company, incorporation office in the City of in said State of California and being desirous of withdrawing	State, duly licensed	as an underwritten titl	e company in the
has entered into a contract withadmitted title insurer or another licensed underwritten			, an
admitted title insurer or another licensed underwritte	n title company of the	ne City of	State of
Applicant to residents of the State of California. Appunderwritten title company License and requests that Department of Insurance website, and inform all Calsuch residents may comment to the Insurance Command California 94612, within fifteen (15) days from the day Applicant has duly discharged all such liabilities or to be permitted to withdraw from the State of California 1 of the Insurance Code of said State.	the Insurance Commifornia residents of insissioner at 1901 Hanate of the first public ransferred all such lenia pursuant to the properties.	ders for cancellation it missioner publish its a ts application to withd rrison Street, 6th Floor cation thereof; and if it iabilities, then Applica provisions of Article 1	s California pplication on the lraw, so that any r, Oakland, shall appear that ant hereby requests 5, Chapter 1, Part 2,
Dated at	this _	day of	, 20
	Applicant		
	By:	President	
	By:		
		Secretary	
A ( 11: (1 CC	C' 'C' 1 '		
A notary public or other officer completing this certificate is attached, and			
State of		.,	
On before me,	Notary Public)		
who proved to me on the basis of satisfactory evident within instrument and acknowledged to me that he/sl capacity(ies), and that by his/her/their signature(s) or which the person(s) acted, executed the instrument.	ce to be the person(s	s) whose name(s) is/ard same in his/her/their a	authorized
I certify under PENALTY OF PERJURY under the l true and correct.	aws of the State of C	California that the fore	going paragraph is
WITNESS my hand and official seal.			
Signature(S	eal)		