

PO Box 149104 | Austin, TX 78714 | 1-800-578-4677 | tdi.texas.gov

APPLICATION FOR INDIVIDUAL AGENT LICENSE

Applicant General Information Guide begins on Page 10.

This application form is to be used by individuals who are:

- not required to pass a qualifying examination through Pearson VUE
- · individuals applying for a Temporary license or provisional permit
- a military service member, veteran, or military spouse
- · reinstating an individual license that has been expired for more than 90 days but less than one year

This application must be typed or printed in ink.

Those applicants required to take a qualifying examination must apply electronically through www.sircon.com/texas **EXCEPT** for Life & Health Insurance Counselor, Insurance Service Representative, and Risk Manager applicants.

All applications are subject to further review. Any affirmative response to a screening question may extend processing times. Failure to disclose criminal history information may result in denial of license.

Part I-To be completed by all individual applicants – Applicants must choose only one license type.

Those who wish to apply for more than one license type must submit a separate application and fee for each type.

The license types with a "p" symbol below can be applied for as a provisional permit [Texas Insurance Code (TIC), Subchapter H, §4001.351

			plication submission:		
ш	General Lines–Life, Accident & Health þ		Life & Health Insurance Counselor		Insurance Service Representative
	General Lines–Property & Casualty þ		Full-Time Home Office Salaried Employee		Managing General Agent
	Life β		Personal Lines Property and Casualty		Surplus Lines
	Life Insurance Not Exceeding \$25,000 þ		Limited Lines		Risk Manager
	Funeral Prearrangement Life þ		County Mutual þ		
15 han are i	O for a temporary license. A \$75 ferone year (TIC §4003.007). Make check nonrefundable and nontransferable. (licant Information - Please read careform Are you requesting a provisional permodule. No Yes	e is re or mo TIC §4 ully ar it (þ) t	nd provide all requested information. for the license type selected above?	expire	ed for more than 90 days but les
2	Applicant's Full Legal Name-nicknam	es and	abbreviations are not acceptable.		
	LAST NAME	FI	RST NAME MIDDLE N	IAME	SUFFIX
3	Applicant's Social Security Number, I	Date o	RST NAME MIDDLE N f Birth, and Daytime Phone Number— re of Social Security Number is required I	The a	pplication cannot be
3	Applicant's Social Security Number, I	Date o sclosur —	f Birth, and Daytime Phone Number— re of Social Security Number is required I	The a	pplication cannot be
3	Applicant's Social Security Number, I processed without this information. Dissocial Security Number	Date o sclosur D	f Birth, and Daytime Phone Number— re of Social Security Number is required I	The aby Te	pplication cannot be xas Family Code §231.302 . NE NUMBER EXT
	Applicant's Social Security Number, I processed without this information. Dissocial Security Number	Date o sclosur D addres	f Birth, and Daytime Phone Number— re of Social Security Number is required I ATE OF BIRTH (MM/DD/YY) DAY TIME as of record with TDI; TDI correspondence	The aby Te	pplication cannot be xas Family Code §231.302 . NE NUMBER EXT

S٦	TREET, PHYSICAL LOCATION (P.O. BOX IS NOT ACCEPTED)		APT, STE, ETC.
CI	ITY	STATE	ZIP CODE
	rfficial Business Address (required —This must be your pecords of Texas insurance transactions)	orimary office address	where you will maintain business
 S1	TREET, PHYSICAL LOCATION (P.O. BOX NOT ACCEPTED)		APT, STE, ETC.
CI	ITY	STATE	ZIP CODE
A	pplicant's E-mail Address (required-E-mail will be use	ed only for TDI comm	unications)
_	MANI ADDRECC		_
	MAIL ADDRESS pplications will not be processed until proper docur	nontation or dotails	are received and a review is completed
	ll applications are subject to further review. Any affirmative resp		-
	isclose criminal history information may result in denial of licen	9 .	and the second processing taries. I ditare to
	xcluding traffic violations and first offense DWI:		
a.		or felony charges (by	indictment, information, or any
	other instrument) filed against you in Texas, in any o		
	□ No □ Yes	,	3
b.	. Have you ever been convicted of any misdemeano	r or felony offense i	n Texas, in any other state or by the
	federal government?	•	,
	□ No □ Yes		
c.	Have you ever had adjudication deferred on any n	nisdemeanor or felo	ny charge or offense in Texas, in any
	other state or by the federal government?		
	☐ No ☐ Yes		
d.	. Have you ever served any period of probation for	any misdemeanor or	felony offense in Texas, in any other state or
	by the federal government?		
	☐ No ☐ Yes		
	If you answer "Yes" to any of questions 8 a-d, you must	_	, , , , , , , , , , , , , , , , , , , ,
	information, or any other charging document, judgment of		·
	terminating probation, community supervision and/or pare		
	no longer have the records, please have the court provide		
	only and not prosecuted, please provide a records sear must submit a statement describing the circumstances le		,
	offenses. You may provide letters of recommendations fro		
н	ave you ever applied for a letter of consent, as requ	- ·	
	egulatory official from Texas or any other state?		
	□ No □ Yes		
	If you answer " Yes ", the application will not be processed	l until you provide full	details of the outcome of that proceeding and al
	supporting documents to the department.	, ,	
	If you answer "No", and you have been convicted of any cr		
	section 18 U.S.C. 1033, the application will not be process	ed until you submit a s	signed and notarized request for written consent
_	with all supporting documentation to the department.		,
	ave you or has any corporation, partnership, associ		•
	hareholder, manager, member or partner, ever bee	-	
	exas or any other insurance department, or financi		
	ny other state or by the federal government based of	_	
fi	nancial regulatory laws that you have not previousl	•	-
	If you answer " Yes ", a license will not be issued until full de No Yes	tails of the administrati	ve or legal action are provided.

11	Are you indebted to any policynoider, insurance or reinsurance company, insurance agency, general agent,	
	managing general agency, premium finance company or court appointed liquidator for premiums colle	ected or
	commissions retained, or have any claims or judgments been filed against you for retaining premiums or	
	commissions?	
	□ No □ Yes	
	If you answer " Yes ", a license will not be issued until full details of the indebtedness are provided.	
12	·	
12	Have you ever had an agency contract or company appointment cancelled for cause (e.g., misrepresentation of the contract of th	on,
	misappropriation, etc.)?	
	☐ No ☐ Yes	
	If you answer "Yes", a license will not be issued until full details are provided. Cancellation for cause does not include cancel	ellations due
	to license expiration (nonrenewal).	
12	During the last 6 months, have you applied for or received a temporary license of the type for which yo	NI aro
13		ou are
	now applying?	
	☐ No ☐ Yes	
	If you answer "Yes", a temporary license will not be issued. A temporary license may not be renewed or issued more than of	once in a
	consecutive six-month period to the same applicant.	
14	Do you currently hold any insurance agent license, adjuster or public insurance adjuster license in any state	other
	than Texas or have you held any insurance agent license, adjuster or public insurance adjuster license in	
	other than Texas within the last five years?	any state
	☐ No ☐ Yes	
	If you answer " Yes ", you must provide the following:	
	Applicants who have held a resident license in another state within the previous five years from the date of this a	•
	must attach a Clearance Letter from the Insurance Commission in the states in which the applicant was previously licenses	
	Producer Database printout showing the termination of the license in the applicant's previous resident states can take the	place of a
	Clearance Letter.	
	Applicants holding a current resident license in another state must attach an original Certificate of Good Standing	
	Insurance Commission in the applicant's state of residence. The Certificate of Good Standing must be dated within 90 days	of receipt
	of the completed application. A NIPR Producer Database print out showing that a current license—is held in the applicant's	's resident
	state with the same license type that you are applying for can take the place of a Letter of Certification.	
15	This application is for a license I previously held that is expired for more than 90 days but less than one	vear I
	will attach the required \$75 license fee. (TIC §4003.007)	<i>y</i> ca
	No Yes Previous License Number	
16	Do you qualify as any of the following? (attach proof of military identification to this application)	
	a. "Military service member" – means a person who is currently serving in the armed forces of the United States,	or in a
	reserve component of the armed forces including the National Guard, or in a state military service of any state	
	No ☐ Yes	••
	b. "Military spouse" – means a person who is married to a military service member who is currently on active du	ty.
	□ No □ Yes	
	c. "Military veteran" – means a person who has served in the Army, Navy, Air Force, Marine Corps, or Coast Guar	rd of
	the United States, or in an auxiliary service of one of those branches of the armed forces.	
	□ No □ Yes	
	d. Are you requesting a non-resident military fee waiver?	
	□ No □ □ Yes	
	If you answer "Yes" to a, b, or c in question 16, please mark the top of Page 1 of this application with a highlighted "M".	
4-		
1/	Do you have a child support obligation in arrearage?	
	☐ No ☐ Yes	
	If you answered " Yes ", you must answer a, b, and c of question 17:	
	a. How many months are you in arrearage?	
	, , , , , , , , , , , , , , , , , , , ,	
	b. Are you currently subject to and in compliance with any repayment agreement?	
	☐ No ☐ Yes	
	c. Are you the subject of a child support related subpoena or warrant?	
	□ No □ Yes	

Part II—Surplus Lines Agents (Surplus Lines Agents Only)

To qualify for a Texas Surplus Lines License, you must hold a current Texas General Lines-Property and Casualty License or a current Texas Managing General Agent License (TIC §981.203). Provide your underlying license type and current Texas license number: UNDERLYING LICENSE TYPE **TDI LICENSE NUMBER**

Part III-Insurance Service Representatives (Insurance Service Representatives Only)

Certificate for Insurance Service Representatives – Must be completed by the appointing licensed General Lines–Property and Casualty Agent, or Personal Lines Property and Casualty Agent, or an officer or partner of a licensed General Lines-Property and Casualty Agency or Personal Lines Property and Casualty Agency.

CERTIFICATE FOR INSURANCE SERVICE REPRESENTATIVES

This is to certify that the above-mentioned applicant is appointed to act as an Insurance Service Representative (ISR) for this General Lines-Property and Casualty Agent/Agency or Personal Lines Property and Casualty Agent/Agency in the state of Texas, subject to the applicant's qualifying for a license. If this appointment is terminated or canceled, the Texas Department of Insurance must be notified immediately of such termination. Notification should be made using the <u>Insurance</u>

Representative (ISR) Transfer/Cance	<u>el Employment</u> (TDI Form FII)	N529), which can be accessed from our Information	າ Update forms
web page at www.tdi.texas.gov/forms	<u>s/form11update.html</u> .		
Appointing General Lines-Prope	rty and Casualty or Perso	nal Lines Property and Casualty AGENT:	
SIGNATURE OF SPONSORING AGENT	PRINT OR TYPE SPONSORIN		
		(AS APPEARS ON THE CUR	RENT LICENSE)
DATE CICALED (AMAZED AAA			
DATE SIGNED (MM/DD/YY)			
Appointing General Lines-Proper	rty and Casualty or Person	nal Lines Property and Casualty AGENCY:	
SIGNATURE OF AGENCY OFFICER OR P	A DTNICD	CICNING OFFICER'S OF DARTHI	TD/C NIANAT
SIGNATURE OF AGENCY OFFICER OR P	AKINEK	SIGNING OFFICER'S OR PARTNI	:K S INAIVIE
SPONSORING AGENCY'S LEGAL NAME		AGENCY'S TDI LICENSE NUMBE	 R
(AS IT APPEARS ON THE CURRENT LICE		Notite 13 131 Electivativation	
	- ,		
DATE SIGNED (MM/DD/VV)			

Part IV-Notice of Appointment (appointments for provisional permits, see Part V)

To be completed by a sponsor on behalf of those applying for a Full-Time Home Office Salaried Employee's [HOSE] registration or Temporary License only. All other permanent license types including: General Lines Agent's [GL], Life Agent's [LAGT], Limited Lines Agent's [LL], Funeral Pre-arrangement Life Agent's [PN], Life Insurance Not Exceeding \$25,000 Agent's [LI], County Mutual Agent's [CM], Personal Lines Property and Casualty Agent's [PLPC] license appointments must be submitted electronically through National Insurance Producer Registry or Sircon for States. Subagent appointments or terminations must be made by submitting the paper FIN501 Notice of Appointment form.

An application to register a Full-Time Home Office Salaried Employee must include a completed Notice of Appointment.

Temporary License. All applicants for a General Lines Agent, Life Agent, Limited Lines, Funeral Prearrangement Life Agent, Life Insurance Not Exceeding \$25,000 Agent, Personal Lines Property and Casualty Agent or County Mutual Agent license may apply for a temporary license with this application. If a temporary license is requested by the appointing company and if the company and applicant are eligible, TDI will issue such a license for a period of 90 days, without examination. A temporary license may not be renewed or issued more than once in a consecutive six-month period to the same applicant. **A temporary license application must include a completed Notice of Appointment**.

Life Insurance Not Exceeding \$25,000, Funeral Prearrangement Life and County Mutual Agent temporary licensees must provide to TDI a certification by the appointing insurance company that the temporary agent has completed the required course of study and passed the written examination with a copy of the temporary license within the temporary license's active period to obtain the permanent license without a new application.

General Lines Agent, Life Agent, Limited Lines and Personal Lines Property and Casualty Agent <u>temporary</u> <u>licensees must successfully complete the required license examination within the temporary license period to obtain the permanent license without a new application. 28 TAC § 19.807</u>

If the temporary license is no longer active when the required license exam is passed, a new application and \$50 application fee must be submitted for the permanent license. Most license types will require you to apply electronically through <u>Sircon for States</u>. Refer to our <u>website</u> for instructions on how to apply for a license. A new company appointment will also need to be filed electronically through <u>National Insurance Producer Registry</u> or <u>Sircon for States</u>; or if a subagent appointment by filing the <u>FIN501 – Notice of Appointment or Appointment Termination</u>.

NOTICE OF APPOINTMENT FORM FOLLOWS ON THE NEXT PAGE

PLEASE FOLLOW INSTRUCTIONS ON PREVIOUS PAGE

NOTICE OF APPOINTMENT FOR TEMPORARY GL, LAGT, LL, PN, LI, PLPC, CM AND HOSE APPLICANTS Applicant's Full Legal Name – nicknames and abbreviations are not acceptable.

ELLI LECAL NAME OF ADDITIONAL ODDING OD TYPE LAST NAME	FIRST NAME	MIDDLE NAME	CLIETY		
FULL LEGAL NAME OF APPLICANT (PRINT OR TYPE) LAST NAME		MIDDLE NAME	SUFFIX		
Enter sponsoring company, sponsoring agency or sponsoring agent informations. Name of sponsoring insurance company appointing a TEN.		LI. PLPC. CM or HO	SE applicant		
· · · · · · · · · · · · · · · · · · ·	62, 261, 22, 111	,,	- upp		
APPOINTING COMPANY NAME (GROUP NAMES NOT ACCEPTABLE)	NAIC NUM	MBER OF APPOINTING CO	OMPANY		
OR—Name of sponsoring agency sponsoring a GL, LAGT o	or PLPC as a subage	nt:			
SPONSORING AGENCY NAME	AGE	NCY TAX ID NUMBER			
(AS IT APPEARS ON THE CURRENT AGENCY LICENSE)					
OR—Name of sponsoring individual agent sponsoring a G	iL, LAGT or PLPC as	a subagent:			
SPONSORING INDIVIDUAL AGENT'S NAME (AS IT APPEARS ON THE CURRENT AGENT LICENSE)	SSN OF SF	PONSORING INDIVIDUAL	. AGENT		
Temporary License: (for GL, LAGT, LL, PN, LI, PLPC or CM lice	nse types only):				
Does this company want the above-named applicant to		license to act as a fu	II-time agen		
in accordance with the provisions of TIC §4001, subchapter	<u> </u>		ii tiirie ageri		
If " Yes ", please provide the telephone number of the office where the a		_			
The Appointing Official must read and sign the following	statements:				
This is to certify that the applicant named on Page 1 and	above is appointed	to act as an agent for	this compar		
in the state of Texas subject to the applicant qualifying for a l Texas Department of Insurance will be notified immediately of	• • •	tment is terminated or	r canceled, th		
This applicant meets the requirements as set out in the TIC	and the rules and r	egulations promulga	ted by the		
Texas Department of Insurance for the type of license applied					
I acknowledge my responsibility for ensuring that the applic	ant receives training	, as required by the 1	ΓIC.		
(SIGNATURE REQUIRED)	(PRINT OR TYPE)				
SIGNATURE OF APPOINTING OFFICIAL FOR APPOINTING COMPANY, OR	APPOINTING OFF	ICIAL'S FULL LEGAL NAME			
SIGNATURE OF OFFICIAL FOR SPONSORING AGENCY, OR SIGNATURE OF SPONSORING INDIVIDUAL AGENT		RTNER'S FULL LEGAL NAME DIVIDUAL AGENT'S FULL LEC			
SIGNATURE OF SPONSORING INDIVIDUAL AGENT	SHOINSOKTING TIME	VINIDOUR AGENT 2 FULL LEC	JAL INAIVIE		
DATE SIGNED (MM/DD/VV)					
DATE SIGNED (MM/DD/YY)					

Part

Provisional Permit Appointment (Appointments: Pursuant to TIC 4001, Subchapter H, this part must be completed appointing official of the sponsoring company or by a sponsoring application, will only be used for the purpose of communication in the purpose	by all provisional permit applicants and authorized by an agent (TIC §4001.354). Addresses provided in Part V of the
FULL LEGAL NAME OF APPLICANT (PRINT OR TYPE) LAST NAME	FIRST NAME MIDDLE NAME SUFFIX
Enter sponsoring company, sponsoring agency or sponsoring agent infor Name of sponsoring insurance company appointing a GL	
APPOINTING COMPANY NAME (GROUP NAMES NOT ACCEPTABLE)	NAIC NUMBER OF APPOINTING COMPANY
APPOINTING COMPANY MAILING ADDRESS	APPOINTING COMPANY EMAIL ADDRESS
OR—Name of sponsoring agency sponsoring a GL, LAGT	or PLPC as a subagent:
SPONSORING AGENCY NAME (AS IT APPEARS ON THE CURRENT AGENCY LICENSE)	AGENCY TAX ID NUMBER
SPONSORING AGENCY MAILING ADDRESS	SPONSORING AGENCY EMAIL ADDRESS
OR—Name of sponsoring individual agent sponsoring a	GL, LAGT or PLPC as a subagent:
SPONSORING INDIVIDUAL AGENT'S NAME (AS IT APPEARS ON THE CURRENT AGENT LICENSE)	SSN OF SPONSORING INDIVIDUAL AGENT
SPONSORING INDIVIDUAL AGENT'S MAILING ADDRESS	SPONSORING INDIVIDUAL AGENT'S EMAIL ADDRESS
The Appointing Official must read and sign the following. This is to certify that the applicant named on Page 1 and OR a subagent for my agency, OR a subagent for me in the st If and when this appointment is terminated or canceled termination. This applicant meets the requirements as set out in the the TDI for the type of permit applied for herein.	above is appointed to act as an agent for this company ate of Texas subject to the applicant qualifying for a license I, the department will be notified immediately of suc
I acknowledge my responsibility for ensuring that the appli examination as required by the TIC.	cant has completed training, and passed the
I acknowledge my responsibility for ensuring that a backgrompleted that shows that the applicant has not (i) a felony ; or (ii) an act that requires the applicant to receive we in the business of insurance.	···
(SIGNATURE REQUIRED) SIGNATURE OF APPOINTING OFFICIAL FOR APPOINTING COMPANY OR	(PRINT OR TYPE) APPOINTING OFFICIAL'S FULL LEGAL NAME AND TITLE OR

DATE SIGNED (MM/DD/YY)

SIGNATURE OF OFFICIAL FOR SPONSORING AGENCY, OR

SIGNATURE OF SPONSORING INDIVIDUAL AGENT

OFFICER'S OR PARTNER'S FULL LEGAL NAME AND TITLE, OR

SPONSORING INDIVIDUAL AGENT'S FULL LEGAL NAME

Part VI–Background Information and Fingerprints

This part must be completed by all applicants except Full-Time Home Office Salaried Employee.

	. ,
have been submitted to the Texas Department of Public complete fingerprinting instructions) or, b. I have an active TDI agent/adjuster license and I have	m IdentoGo by MorphoTrust USA evidencing that my fingerprints olic Safety (see Fingerprint Requirements and Instructions for we already submitted fingerprints to TDI or, than an agent/adjuster license, and I have already submitted my
	, on
TYPE OF APPLICATION OR FILING	DATE FINGERPRINTS SUBMITTED TO TDI (MM/DD/YY)
registration and (2) submitted fingerprints to TDI with ano	rint receipt unless the applicant (1) has an active TDI license on the license application or TDI filing. Fingerprints will be used to ent of Public Safety and the Federal Bureau of Investigation
Commissioner's Producer Database or, b. I have attached a current Certificate of Good Stand	ident state as reflected on the National Association of Insurance ing from my resident state or, m IdentoGo by MorphoTrust USA evidencing that my fingerprints
All nonresident license applicants who do not hold a curi	•

All nonresident license applicants who do not hold a current insurance license in good standing in the applicant's state of residence shall, through the **law enforcement agency of the state of residence**, submit a copy of the applicant's criminal history records. If the resident state will not provide a criminal history record for licensing purposes, the applicant must provide a fingerprint receipt from IdentoGo by MorphoTrust USA evidencing that fingerprints have been submitted to the Texas Department of Public Safety (see **Fingerprint Requirements and Instructions** for complete fingerprinting instructions).

Part VII-Individual Applicant Signature Page (to be completed by all applicants)

All Applicants must read, sign, and have this section notarized before submitting the license application.

I hereby certify that I have personally answered each of the questions herein and that the answers are true and correct to the best of my knowledge and belief. I further certify that I am aware of the provisions of the Texas Insurance Code and the rules and regulations promulgated by the Texas Department of Insurance which relate to the issuance of the license for which I am applying and the grounds under which such license may be denied, suspended, revoked or non-renewed, and that I meet the requirements for the license type applied for herein. I further acknowledge that I am subject to both disciplinary action and criminal prosecution if my application contains a false, fictitious, or fraudulent statement or entry with regard to any material fact.

I understand that fingerprints provided with this application shall be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation in accordance with applicable statutes.

I acknowledge and understand that I have the duty to inform the commissioner of insurance of any disciplinary action taken against me in any other state in which I may be licensed within thirty (30) days of the happening of such disciplinary action.

I further acknowledge that I have the duty to update the information contained on this application, including a change of my address, and that failure to do so may constitute grounds for revocation or suspension of my insurance licenses.

I understand all applications are subject to further review. Any affirmative response to a screening question may extend processing times. **Failure to disclose criminal history information may result in denial of license**.

SIGNATURE OF APPLICANT				
	(PRINT OR TY	PE BELOW)		
FULL LEGAL NAME OF APPLICANT LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
The State of,	County of			
Before me,			, on this day personal	lly appeared
(PRINTED NAME OF NOTARY PU	IBLIC)			
			known to me or proved to m	е
(PRINTED FULL LEGAL NAME OF APPLICANT)				
on the oath of		or through		
(PRINTED NAME OF WITNESS KNO	WN TO NOTARY PU	BLIC) (DESCRIPTIC	N OF IDENTITY CARD OR OT	HER DOCUMEN
to be the person whose name is subscribed to the the purposes and consideration therein expressed.		nt and acknowledged to	o me that he or she executed	the same for
Given under my hand and seal of office this	day of		, A.D. 20	
(NOTARY SEAL)				
		(NOTARY PUBLIC SI	GNATURE)	
		Notary Public, State	of	

Send completed application, any other required documents, and a check or money order made payable to the

Texas Department of Insurance.

General Information Guide

- · Required parts
- * A temporary license is available for this license type. Part IV, Notice of Appointment is required for a temporary license.
- P A provisional permit is available for this license type. Part V, is required for a provisional permit.

LICENSE TYPE	PART I	PART II	PART III	PART IV	PART V	PART VI	PART VII
General Lines–LAH (§§ 4054.051) * ₱	•			*	P	•	•
General Lines-P&C (§§ 4051.051) * ₱	•			*	P	•	•
Life Agent (Chapter 4054)∗ ⊅	•			*	Ъ	•	•
Life Insurance Not Exceeding \$25,000 (§§ 4054.201) * P	•			*	P	•	•
Funeral Prearrangement Life (§§ 4054.151) * P	•			*	Ъ	•	•
Life & Health Insurance Counselor (Chapter 4052)	•					•	•
Full-Time Home Office Salaried Employee (§§ 4051.301)	•			•			•
Personal Lines Property and Casualty (Chapter 4051) *	•			*		•	•
Limited Lines (§§ 4054.101 and §§ 4051.101) *	•			*		•	•
County Mutual (§§ 4051.201) * P	•			*	P	•	•
Insurance Service Representative (§§ 4051.151)	•		•			•	•
Managing General Agent (Chapter 4053)	•					•	•
Surplus Lines Agent (Chapter 981)	•	•				•	•
Risk Manager (Chapter 4153)	•					•	•

An online application for a license is now required for most license types. License type information and descriptions, including examination/application requirements and exemptions, may be found on our website at http://www.tdi.texas.gov/agent/index.html.

This application with fee(s) and required attachments **must** be mailed to:

Texas Department of Insurance, MC 107-1A Agent and Adjuster Licensing P O Box 12069 Austin, TX 78711-2069

Overnight address:

Texas Department of Insurance, MC 107-1A Agent and Adjuster Licensing 208 E. 10TH Street, MC 107-1A Austin, TX 78701-2407

Obtaining a Printed License: A printed Texas Department of Insurance license may be obtained for free, **within 30 days** from when an application is approved and a license issued, if you applied through Compliance Express or if you have obtained a no cost ProducerEDGE account at: www.sircon.com/Texas. **After 30 days**, a **\$5.00** fee will be required, unless you maintain a no cost ProducerEDGE account. You will need your license number to access a printable license; your license number may be obtained via a search at: https://txapps.texas.gov/NASApp/tdi/TdiARManager.

NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES

With few exceptions, you are entitled to be informed about the information that the Texas Department of Insurance (TDI) collects about you. Under sections 552.021 and 552.023 of the Texas Government Code, you have a right to review or receive copies of information about yourself, including private information. However, TDI may withhold information for reasons other than to protect your right to privacy. Under section 559.004 of the Texas Government Code, you are entitled to request that TDI correct information that TDI has about you that is incorrect. For more information about the procedure and costs for obtaining information from TDI or about the procedure for correcting information kept by TDI, please contact the Agency Counsel Section of TDI's General Counsel Division at (512) 676-6551 or visit the Corrections Procedure section of TDI's website at www.tdi.texas.gov.

Fees: 28 TAC §§ 19.801–19.802: All **\$50** application, **\$150** temporary license application, or **\$100** provisional permit fees are nonrefundable and nontransferable as authorized by the Texas Insurance Code. Make check or money order payable to the **Texas Department of Insurance**.

Provisional Permit Applicants: A provisional permit allows you to act as an agent, with the supervision of a sponsor, until your license is issued. A sponsor can be another agent, an insurer, or health maintenance organization. The sponsor must appoint you as an agent under them. Permits are offered for these license types:

- County Mutual
- Funeral Pre-arrangement Life
- · General Lines Life, Accident, Health and HMO
- General Lines Property and Casualty
- Life Insurance
- Life Insurance Not Exceeding \$25,000

To learn more, go to the **Provisional permits webpage**.

Non-Resident Military Applicants: A military service member, veteran, or spouse with a license in another state doesn't have to pay an application fee for a similar Texas license. Candidates should include their military identification along with a request for a fee waiver when they apply. This waiver only applies to new applications, not license renewals. See Part 1, question #16.

Applicants with Expired Licenses: If a person's license has been expired for more than 90 days but less than one year, the person may not renew the license, but is entitled to a new license without taking the applicable examination if the person submits to TDI a new application, the license fee, and an additional fee equal to one-half of the license fee. If a person's license has been expired for one year or more, the person may obtain a new license by submitting to reexamination, if examination is required for original issuance of the license, and by complying with the requirements and procedures for obtaining an original license.

Temporary License Applicants: All applicants for a General Lines Agent, Life Agent, Limited Lines, Funeral Prearrangement Life Agent, Life Insurance Not Exceeding \$25,000 Agent, Personal Lines Property and Casualty Agent or County Mutual Agent license must apply for a temporary license with this application. The temporary license application must include a completed Notice of Appointment, Part IV, signed by the appointing company. A temporary license period is 90 days.

Temporary Funeral Prearrangement Life, Life Insurance Not Exceeding \$25,000 or County Mutual temporary license holders must submit to TDI, by fax to 512-490-1052, a certification by the appointing insurance company that the temporary agent has completed the course of study and examination as required by the Texas Insurance Code (TIC) with a copy of the temporary license to obtain a permanent Funeral Prearrangement Life License, Life Insurance Not Exceeding \$25,000 License, or the County Mutual License. If the temporary license is no longer active when the exam is passed, a new TDI FIN506 application and \$50 application fee is required for the full license.

A temporary license may not be renewed or issued more than once in a consecutive six-month period to the same applicant. If the temporary license is no longer active when the exam is passed, a new application and \$50 application fee is required for the full license. An online application for a license is now required for most license types. License type

information and descriptions, including examination/application requirements and exemptions, may be found on our website at http://www.tdi.texas.gov/agent/index.html.

Addresses: The **Mailing Address** provided in Part I, number 4 must be your permanent mailing address and is the address of record to which official correspondence, forms, notices and other information will be sent. The applicant's current **Mailing Address** is presumed to be the address on the most recent license renewal for an existing license or on this license application form, whichever is latest. This address will be considered the applicant's or agent's last known address for the purposes of notice to the applicant or agent by TDI. The **Legal Resident Address** is the address where you currently live. The **Legal Resident Address** is used to determine the state of residence for licensing purposes.

Address Changes: Address changes must be reported to TDI within 30 days as required in the TIC §4001.252 and §4003.009. Individual licensees who wish to submit an address change within the same state should submit the request online through **NIPR Contact Change Request or Producer Edge Account**. All other change requests should be submitted on the <u>Licensee Name/Address Change Request</u> (TDI Form FIN533) to TDI. There is no fee for this change request. Please review the instructions on the form carefully to ensure all necessary information is included, and that any delivery or mailing instructions are followed.

Texas Licensed Nonresident Individuals Changing Residency to Texas:

Processing a change from a nonresident licensee status to a resident licensee status requires a completed <u>Application for Residency Change to Texas</u> (TDI Form FIN594).

All address change request forms **MUST** be dated and signed by the license holder; and **MUST** include any of the required items listed in the appropriate form.

Fingerprint Requirements and Instructions:

Fingerprinting: The fingerprint requirement is authorized in TIC §801.056, §4001.103, and by 28 TAC §1.501 and §§1.503 – 1.509.

Applicants claiming exemption from the fingerprint requirement based on **28 TAC §1.504(b)** must provide information on the type of license application or TDI filing with which the fingerprints were submitted and the date the fingerprints were submitted to TDI.

The department strongly encourages applicants to utilize electronic fingerprinting through approved vendors, as authorized under the rule. Electronic fingerprinting is fast and accurate, and in most cases will avoid potential delays in the processing of your submission.

Fingerprint cards are no longer accepted by TDI.

For detailed information about fee requirements and about <u>Fingerprint Requirements and Instructions</u>, please click on the link.

TDI cannot complete processing an application until it receives a criminal history report from the DPS and the FBI for applicants required to provide a fingerprint receipt.

References: You may view the Texas Insurance Code at https://statutes.capitol.texas.gov/?link=IN and the Texas Administrative Code at https://texreg.sos.state.tx.us/public/readtac\$ext.viewtac.