

APPLICATION FOR RENEWAL OF AN INSURANCE AGENT'S LICENCE

Send to:

Superintendent of Insurance Government of the Northwest Territories

Courier: 5003-49th St., LAI-3 Yellowknife, NT X1A 1P5 General Post: P.O. Box 1320, LAI-3 Yellowknife, NT X1A 2L9 FORM 10 (Section 27)

In order to avoid a delay in processing, Please read and follow these instructions	Fee Schedule:	2 YEAR LICENCE		
 Complete <u>all</u> sections of this form Enclose payment payable to the <i>Government of the Northwest Territories</i> 	General	All Applicants \$320		
Send the original signed application and required documents to the above address	Life Accident & Sickness	\$214 \$214		
Non-Residents must also submit one of the following: An original letter/certificate of status/authority; or	Accident & Cickness	ΨΣΙΤ		
2. A print-out from the licensee search of a regulator's website				
The undersigned applies for the renewal of his or her licence to carry on the business of an insurance agent in the Northwest Territories and submits the following statements:				
Resident Life		(Object the best for the		
Non-Resident Accident & Sickness		(<u>Check this box</u> for Life, Accident and Sickness.)		
Genera				
1. Name of applicant:				
Last First		Middle		
Full Residence address:				
	Applicant's date of birth	:		
	•	Month Day Year		
2. Length of time residing in this community: Occupat Year(s)/Month(s)	ion:			
3. Full Business address:				
Business name: (This will appear on your licence)				
Business telephone:	Business fax:			
E-mail:				
4. Sponsoring Insurance Company: (Do not abbreviate)				
5. Have you during the past year engaged in any occupation (or occupations) other than an insurance agent?				
If Yes, Indicate the				
a) nature of the occupation (<i>or occupations</i>):				
b) name of your employer:				
c) position you occupy in relation to the business:				
d) amount of time devoted to insurance:				
6. Current NWT License Number:				
Signature of applicant	Date			

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FORM 10

I hereby state that I understand that it is contrary to the provisions of the *Insurance Act* of the Northwest Territories to

- a) act as an insurance agent without having obtained the appropriate licence from the superintendent of insurance and to do so would make me guilty of an offence;
- b) provide an illustration, circular or statement that misrepresents or is so incomplete that it misrepresents the terms, benefits or advantages of any policy issued or to be issued;
- c) make any misleading statement as to the terms, benefits or advantages of any policy;
- d) make an incomplete comparison of any policy with that of any other insurer for the purpose of inducing an insured to lapse, forfeit or surrender a policy;
- e) rebate any part of the premium or commission or offer any valuable consideration as an inducement to any insured to purchase insurance;
- f) continue to carry on business as an insurance agent after my licence has expired or after that suspension of my licence without securing a renewal or reinstatement of my licence.

STATUTORY DECLARATION

In the matter of the *Insurance Act* and in the matter of the foregoing application for the renewal of an insurance agent's licence:

- I, the applicant make oath and say
 - 1. That all statements and answers contained in this application are true.
 - 2. That this application is made in good faith on my own behalf and not on behalf of any person who is not competent to receive a licence and on receipt of a licence under this application, I intend to hold myself out publicly and carry on business in good faith as an insurance agent.

SWORN before me

at

	(place)	
on		
	(date)	
	(signature of notary or commissioner of oaths)	(signature of applicant)

Affix seal here

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FORM 10 (Section 27)

NOTICE OF APPOINTMENT OF AGENT NOTE: The notice of appointment of agent may only be signed by an officer of the insurance company authorized to sign for the head office of the insurer or by a specifically authorized appointee. of _____ has been authorized (community of residence) (name of applicant) to act as an agent of a licensed insurer duly authorized to carry (name of sponsoring insurance company) to carry on business in the Northwest Territories, in the soliciting of and negotiating for insurance. The qualifications and record of the applicant have been investigated and all statements and answers contained in this application are true and correct to the best of my knowledge, information and belief. I hereby recommend _____ as a trustworthy and competent person _____ as a trustworthy and competent person entitled to receive an insurance agent's licence as an agent of In the event that this insurance agency is terminated, written notice will be sent to the Superintendent of Insurance, without delay, indicating the reason for the termination. Dated at ______ on _____ (signature of officer or appointee) (print or type full name)

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