

CHECKLIST FOR RENEWAL OF CERTIFICATE OF AUTHORITY

YEAR 2013 - 2014

COMPANY NAME: _____ COA # _____

CONTACT Person: _____ Contact E-Mail: _____

_____ ANNUAL STATEMENT
Filing fee \$50.00 on or before April 1st
Penalty \$500.00 after April 1st
\$100.00 per day after May 15th
Receipt Number: _____
Date Paid: _____
Amount Paid: _____

_____ APPLICATION RENEWAL FOR CERTIFICATE OF AUTHORITY (Form I-1)
_____ COA RENEWAL FEE (\$500.00 on or before July 1st)
_____ COA RENEWAL FEE (\$900.00 after July 1st)
Receipt No. _____
Date Paid: _____
Amount Paid: _____

_____ REQUEST FOR RENEWAL OF GENERAL AGENT'S LICENSE (Form I-6) – must have company seal.

_____ AFFIDAVIT OF COMPLIANCE (Form I-7) – must have company seal

_____ INSURANCE COMPANY BOND (Form I-3)-must have company seal and countersignature of resident general agent in Guam. COMPLETE DESCRIPTION of the Bond must be written on the space below.

_____ DEPOSIT AGREEMENT IN LIEU OF BOND (Form I-3) Complete description of deposit below.

_____ 2% ASSESSMENT ON COMMERCIAL & INDUSTRIAL LIABILITY POLICIES written by Property and Casualty Companies (Form I-8)

Receipt No.: _____ Date Paid: _____
Amount Paid: _____

_____ TAX CLEARANCE – (Form I-9)contact your general agent in Guam or your attorney to secure clearance. NO Certificate of Authority will be issued without a completed Tax Clearance..

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For questions and inquiries regarding renewal of Certificate of Authority, send an email toacruz@revtax.gov.gu or jqcarlos@revtax.gov.gu or call us at (671) 635-1843 thru 1846.

**RENEWAL
APPLICATION FOR CERTIFICATE OF AUTHORITY**

Date: _____

TO THE INSURANCE COMMISSIONER OF GUAM:

The _____

Company of _____
(Address of City) (State)

by _____, does hereby apply for authorization to transact from
July 1, _____ to June 30, _____, as an insurer, the following classes of insurance in Guam.

- | | | |
|--|--|--|
| <input type="checkbox"/> ACCIDENT, HEALTH | <input type="checkbox"/> MARINE | <input type="checkbox"/> TITLE |
| <input type="checkbox"/> FIDELITY & SURETY | <input type="checkbox"/> MISCELLANEOUS | <input type="checkbox"/> VARIABLE LIFE & ANNUITIES |
| <input type="checkbox"/> FIRE | <input type="checkbox"/> MOTOR VEHICLE | <input type="checkbox"/> WORKER'S COMPENSATION |
| <input type="checkbox"/> LIFE | <input type="checkbox"/> PROPERTY DAMAGE | <input type="checkbox"/> REINSURANCE - LIFE |
| <input type="checkbox"/> CREDIT LIFE | <input type="checkbox"/> & LIABILITY | <input type="checkbox"/> REINSURANCE - PC |

and states that it is so authorized by Articles of Incorporation (or Charter) or (or Articles of Association) under the laws of its home state of _____, and answers the following questions pertaining to the company.

Date Incorporated _____ or organized _____

and where _____. Commenced business _____

Authorized capital stock _____, Paid up capital stock _____

as of December 31st preceding, admitted assets, _____,

liabilities _____; surplus _____.

Location and Post Office Address of Principal Office _____

(The Insurance Commissioner must be notified promptly in case of change of Address)

Date of last examination _____.

State company authorized to transact business in:

By: _____

INSURANCE COMPANY'S BOND

KNOWN TO ALL MEN BY THESE PRESENTS:

That we, _____,
as principal and _____,

As surety, are held and firmly bound unto the Insurance Commissioner and his successors in office, in the sum of FIFTY THOUSAND DOLLARS (\$50,000.00), lawful money of the United States, for the payment of which, well and truly to be made, we hereby bind ourselves, our executors, administrators and assigns, jointly, severally and firmly by these presents.

WITNESS our hands and seals this _____ day of _____, 20_____.

The conditions of the above obligation are such that:

WHEREAS: The said _____
has filed its charter and statement, and in other respects conformed to the requirements of the Statutes in such cases made and provided; and,

WHEREAS: The said Company proposes to enter this Territory (or continue in this Territory) for the purpose of transacting the business of _____
Insurance for the period of one (1) year ending June 30, 20_____.

NOW, THEREFORE, If the said _____
shall promptly pay all claims arising and accruing to any person or persons, by virtue of any policy issued by the said Company, during the term of this bond, upon the life or person of any resident of Guam, or upon any property situated in the territory of Guam, when the same shall become due then this obligation shall become void; otherwise to remain in full force and effect.

)SEAL(

Signature (Principal Company)

(Print Name)

)SEAL(

Signature (Surety Company)

(Print Name)

Signature written above must be typewritten below.

COUNTERSIGNED:

Resident Agent

NOTE: This Bond must be countersigned by a licensed Resident Agent in Guam of the Surety.

DEPOSIT AGREEMENT IN LIEU OF BOND

Pursuant to Title 22 Guam Code Annotated, Section 15103(f), the _____ of _____ desires to qualify itself to transact the business of _____ in Guam and enters into this agreement with the Insurance Commissioner of Guam and deposits with him the following described securities to-wit:

It is agreed between the parties hereto that this Fifty thousand dollars (\$50,000.00) deposit of securities is made in lieu of a Fifty thousand dollars (\$50,000.00) bond and that securities of the value of at least Fifty thousand dollars (\$50,000.00) shall remain on deposit (though securities may be substituted with the approval of the Commissioner) for the benefit and protection of the policyholders and creditors of the Company so long as the Company has any liability outstanding in Guam.

The Company may collect and retain the interest when due on the securities deposited.

IN WITNESS WHEREOF, we have hereunto affixed our signatures and seals on the dates indicated below.

Company

By: _____
Name and Title

)SEAL(

ATTEST: _____
Secretary

Date: _____

Commissioner of Insurance of Guam

Date: _____

REQUEST FOR RENEWAL
OF GENERAL AGENT'S LICENSE

Pursuant to the requirements of Title 22 Guam Code Annotated, Section 15105(a), the _____ an insurer authorized to do business in Guam, does hereby request the renewal of the General Agent's License issued to _____ on the _____ day of _____, _____, and having a principal office and place of business at _____ in Guam, for the year beginning July 1, _____, through June 30, _____.

IN WITNESS WHEREOF, said insurer has caused this instrument to be executed in its name and behalf, by its proper authorized officers, this _____ day of _____, _____.

BY:

)SEAL(

BY:

AFFIDAVIT OF COMPLIANCE

Pursuant to the requirements of Title 22 Guam Code Annotated, Section 15105(b), the____
_____ of _____

an insurer authorized to do business in Guam does hereby make affidavit that it has
continued to comply with all applicable provisions of the aforesaid Title 22, since its
authorization to do business in Guam.

IN WITNESS WHEREOF, said Insurer has caused this instrument to be executed in
its name and behalf, by its proper authorized officers this day of _____ ,
_____.

)SEAL(

BY:

BY:

TAX CLEARANCE FORM APPLICATION

NAME: _____

Doing Business As (dba)Name: (if any) _____

SSN: _____ EIN: _____

GRT Account Number: _____ () New () Renewal

Type of License Applied: _____

Office Address: _____

Business Mailing Address: _____

Contact Nos: Landline: _____ Cellular: _____

Applicant's Printed Name

Authorized Signature

(DO NOT WRITE BELOW THIS LINE)

The above stated applicant is hereby issued a Tax Clearance for issuance of License indicated above.

(1) **GENERAL** (2) **BPTP/GRT** (3) **INCOME TAX** (4) **COLLECTION**

Cleared by: _____ Cleared by: _____ Cleared by: _____ Cleared by: _____
Date: _____ Date: _____ Date: _____ Date: _____

***for corporations
and LLCs only.