REQUEST FOR LETTER OF CLEARANCE

NORTH DAKOTA INSURANCE DEPARTMENT
AGENT LICENSING DIVISION
SFN 60808 (6-2016)

NEW RESIDENT STATE (for Request for Letter of Clearance)	Date Change Becomes Effective

Producer Name (First, Middle, Last)		National Producer Number
Cell Phone Number	Home Telephone Number	Business Telephone Number
Email Address		

NEW RESIDENT ADDRESS

Physical Street Address	City	State	ZIP Code

NEW MAILING ADDRESS

Physical Street Address or Post Office Box	City	State	ZIP Code

NEW BUSINESS ADDRESS

Physical Street Address	City	State	ZIP Code

☐ I wish to voluntarily cancel my North Dakota Resident Producer License.

☐ I wish to convert my North Dakota Resident Producer License to a Non-Resident License.

(A 30-day Non-Resident license will be issued pending issuance of a Resident license in the producer's new Resident state. If a Resident license is not issued within 30 days, the North Dakota Non-Resident license will be cancelled.)

Signature of Producer	Date

- There is no fee to request a Letter of Clearance.
- There is no fee to convert a Resident license to a Non-Resident license.
- The completed Request for Letter of Clearance form can be emailed, faxed, or mailed to the North Dakota Insurance Department.

North Dakota Insurance Department
Agent Licensing Division
600 E Boulevard Ave Dept. 401
Bismarck, ND 58505-0320

Fax: (701) 328-4880
ndlicensing@nd.gov
www.nd.gov/ndins