

DESIGNATED COMPLIANCE OFFICER

Name	Address	City	State	Zip Code	Title and/or Occupation

THE FOLLOWING ITEMS ARE ATTACHED TO BE MADE PART OF THIS APPLICATION:

<input type="checkbox"/> Certificate from Secretary of State of North Dakota showing compliance with the corporation laws of this state. (N.D.C.C. § 26.1-53.1-03(1)(a))
<input type="checkbox"/> \$500 application fee. Check made payable to North Dakota Insurance Commissioner. (N.D.C.C. § 26.1-53.1-03(3)(a))
<input type="checkbox"/> NAIC Biographical Affidavit (Form 11) for all Officers and Directors. (N.D.C.C. § 26.1-53.1-03(3)(b))
<input type="checkbox"/> Copy of Form Contract between Organization and Officers and Directors. (N.D.C.C. § 26.1-53.1-03(3)(c))
<input type="checkbox"/> All marketing materials to be used in this state. (N.D.C.C. § 26.1-53.1-03(3)(d))
<input type="checkbox"/> Description of complaint procedures. (N.D.C.C. § 26.1-53.1-03(3)(e))
<input type="checkbox"/> Copy of cancellation and refund policy. (N.D.C.C. § 26.1-53.1-03(3)(f))
<input type="checkbox"/> Resident Power-of-Attorney Form, SFN 8330. (N.D.C.C. § 26.1-53.1-03(3)(g))
<input type="checkbox"/> Copy of Surety Bond in applicant's name in an amount not less than \$35,000. (N.D.C.C. § 26.1-53.1-05)
<input type="checkbox"/> The name and address of the person who is to have charge of the business under the license.
Name
Address
City
State
ZIP Code