



Oklahoma Insurance Department
2401 NW 23rd, Ste 28 (73107)
P O Box 53408 (73152-3408)
Oklahoma City, OK
(405) 521-3916

Select Appropriate Box:

- Resident
- Non-Resident
- Individual
- Corporation
- Firm
- Association

LICENSE APPLICATION FOR REINSURANCE INTERMEDIARY

- Reinsurance Intermediary Broker – RB Reinsurance Intermediary Manager – RM

This application is to be used by all persons, firms, associations or corporations applying for a license as a reinsurance intermediary broker (RB) or reinsurance intermediary manager (RM).

No person, firm, association or corporation shall act as a RB in this state if the RB maintains an office either directly or as a member or employee of a firm or association, or an officer, director or employee of a corporation: 1. In this state unless such RB is a licensed producer in this state; or 2. In another state, unless such RB is a licensed producer in this state or another state having a law substantially similar to this law or such RB is licensed in this state as a non-resident reinsurance intermediary. *36 O.S. §5103 (A)(1)(2)*. No person, firm, association or corporation shall act as a RM: 1. For a reinsurer domiciled in this state, unless such RM is a licensed producer in this state; 2. In this state, if the RM maintains an office either directly or as a member or employee of a firm or association, or an officer, director or employee of a corporation in this state, unless such RM is a licensed producer in this state; or 3. In another state for nondomestic insurer, unless such RM is a licensed producer in this state or another having a law substantially similar to this law or such person is licensed in this state as a non-resident reinsurance intermediary. *36 O.S. §5103 (B)(1)(2)(3)*. Licensed attorneys-at-law of this state when acting in their professional capacity as attorneys shall be exempt from this section. *36 O.S. §5103 (F)*.

RB means any person, other than an officer or employee of the ceding insurer, firm, or association or corporation, who solicits, negotiates or places reinsurance cessions or retrocessions on behalf of a ceding insurer without the authority to bind reinsurance on behalf of such insurer. *36 O.S. §5102 (6)*.

RM means any person, firm association or corporation that has authority to bind or manages all or part of the assumed reinsurance business of a reinsurer, including management of a separate division, department or underwriting office, and acts as an agent for such reinsurer whether known as an RM, manager or other similar term. *36 O.S. §5102 (7)*.

The insurer annually shall obtain a copy of statements of the financial condition of each RB with which the insurer transacts business. *36 O.S. §5106 (C)*.

The reinsurer shall annually obtain a copy of statements of the financial condition of each RM which such reinsurer has engaged, prepared by an independent certified accountant in a form acceptable to the Commissioner. *36 O.S. §5109 (B)*.

18. If a corporation, please list all officers and designated employees and directors authorized to act pursuant to the license. Please attach a separate sheet of paper if needed:

Full Name	Address	Position/Title	DOB/SSN
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

19. Have any of the individuals or entities listed ever been convicted of, pled guilty or nolo contendere to:

- A. Felony? Yes No
- B. Misdemeanor involving moral turpitude or dishonesty? Yes No
- C. Any offense involving misappropriation of money or assets? Yes No
- D. Violating any laws for acts arising from an insurance transaction? Yes No
- E. If "Yes", give details on a separate sheet and attach a copy of final judgment and sentencing.

20. If applicant is a non-resident of Oklahoma, please complete the following:

Designation of Insurance Commissioner as Agent for Service of Process

I designate the Insurance Commissioner of the State of Oklahoma as the person upon who may be served all lawful process in any action, suit or proceeding instituted by or on behalf of any interested person arising out of my insurance business in the State of Oklahoma.

This designation shall constitute an agreement that such service of process is of the same legal force and validity as personal service or process in the State of Oklahoma upon me. This designation further authorizes the Insurance Commissioner of the State of Oklahoma to forward any such process to me at my last "residence" address as it appears in the Oklahoma Insurance Commissioner's records. I understand that a failure to accept any such process shall subject my license to administrative action by the Oklahoma Insurance Commissioner.

Dated this _____ day of _____, _____

Printed or Typed Name of Applicant or Officer of Firm,
Association or Corporation

Signed Name of Applicant or Officer of Firm, Association or
Corporation

21. Please provide the name and address of an Oklahoma resident as a designate agent upon whom notices or process may be served. Every chance in the designated agent for service of process must be made in writing and does not become effective until acknowledge.

Resident Agent of Designation Name: _____

Address: _____
Street City State Zip

22. Do you understand that you are required by law to notify the Oklahoma Insurance Department of all changes among members, directors, officers and all other individuals designated in the license within ten (10) working days of the change? Yes No

