Print Form

OKLAHOMA INSURANCE DEPARTMENT
3625 NW 56th, Suite 100, Oklahoma City, OK 73112-4511
(405) 521-3916 or Fax: (405) 522-3642 Toll Free In-State 800-522-0071
www.oid.ok.gov

VIATICAL SETTLEMENT PROVIDER RENEWAL APPLICATION

$500.00 check or money order must be received at address above by the last date of your anniversary date.

I understand that failure to meet requirements prescribed in Title 36 O.S. § 4055.3(C) shall result in automatic revocation of the license. Please initial here_____

Neither the applicant, nor any of its employees, partners, members, directors, or officers have been found guilty of fraudulent or dishonest practices, have been found guilty of a felony or any misdemeanor of which criminal fraud is an element, or is otherwise shown to be untrustworthy or incompetent. Please initial here _____

Viatical Settlement Provider License # _____

Enter Name of Provider: _____ **Phone No.:** _____

Enter Email Address: _____ **Fax No.:** _____

Enter Mailing Address: _____

_____
City State Zip

Enter Business Address: _____

_____
City State Zip

Name of Contact Person: _____

To insure that your renewal will be processed timely:

1. The name and address above have been verified and any needed corrections have been made. Yes ____ No ____
2. Do you have a current Anti-Fraud Plan for Viatical Settlements as required by Title 36 O.S. §§ 4055.3(F)(6), 4055.13(G) on file with the Oklahoma Insurance Department? Yes ____ No ____ (if "No", attach to this renewal)
3. Pursuant to 36 O.S. §4055.7(A) provide a copy of most recent audited financial or an unaudited financial statement attested to by two of the officers of the corporation. **These documents must be provided in hard copy with original notarized signatures if the statement is unaudited.**
4. Pursuant to 36 O.S. §4055.3(D)) **if renewal application is for a Legal Entity,** provide the identity of any new stockholders with a 10% or over ownership, partners, officers, directors and members affiliated with entity. You **must** provide a UCAA Biographical and independent third party verification (background check) for each new individual listed. **These documents must be submitted hard copy.**
5. The form has been signed and the correct renewal fee of $500 is included. **Cash payments not accepted.**

Signing this form constitutes application for renewal of the indicated license and a declaration that the license is in good standing. Renewal application form and renewal fees may be submitted electronically; however the renewal application is not complete until items in 2 (if applicable), 3, and 4 above are received at the OID.

_____ _____
Signature **Date**

Please complete: Paid $_____ **Check/money order #**_____ **Date of Check**_____

ALL FEES ARE BY LAW DEEMED EARNED AND NON-REFUNDABLE

ATTENTION: WE COOPERATE WITH THE OKLAHOMA COUNTY DISTRICT ATTORNEY IN THE PROSECUTION OF BOGUS CHECK WRITERS.