



TEXAS DEPARTMENT OF INSURANCE

FIN530 | 0115

Financial Regulation Division - Agent and Adjuster Licensing Office (107-1A)
333 Guadalupe, Austin, Texas 78701 * PO Box 12069, Austin, Texas 78711-2069
(512) 676-6500 | F: (512) 490-1052 | (866) 554-4926 | TDI.texas.gov | @TexasTDI

REQUEST FOR LETTER(S) OF CERTIFICATION FOR AGENTS, ADJUSTERS, & ENTITIES

Third Party Administrators and Premium Finance– Do not use this form.

Each letter of certification requires a filing fee of **\$11.00**, made payable to the **Texas Department of Insurance**.

Please return this form with your remittance to:

Texas Department of Insurance, MC 107-1A
Agent and Adjuster Licensing
P.O. Box 12069
Austin, TX 78711-2069

Certifications may be ordered on line from www.sircon.com. Only Visa and MasterCard are accepted. There is a small convenience fee.

The following information is required to ensure that you receive the information being requested.

Please complete with no more than ten individuals or entity names per document.

| <u>INDIVIDUAL / ENTITY</u> | <u>SOCIAL SECURITY/ FEIN NO.</u> | <u>QUANTITY</u> |
|----------------------------|----------------------------------|-----------------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |
| 6. _____ | _____ | _____ |
| 7. _____ | _____ | _____ |
| 8. _____ | _____ | _____ |
| 9. _____ | _____ | _____ |
| 10. _____ | _____ | _____ |

LETTER(S) REQUESTED _____ X \$11.00 = FEE TOTAL \$ _____

CONTACT PERSON: _____

EMAIL ADDRESS: _____ TELEPHONE NO: _____

COMPANY NAME: _____

RETURN ADDRESS: _____