



Insurance Department

State of Utah

GARY R. HERBERT
Governor
SPENCER J. COX
Lieutenant Governor
TODD E. KISER
Commissioner

Bail Bond Oversight Board Meeting

(http://www.insurance.utah.gov/producers/bailbond_board.html)

Date: July 12, 2017

Time: Noon

Place: East Building, Copper Room

BOARD MEMBERS

Clay Carlos (Chair)
Ryan Cooper (Co-Chair)
Lt. Kati Booth
Stephen Aina

Dominic Sanone
Tony Choate
VACANT
Brett Barratt (Non-Voting)

DEPARTMENT STAFF

Todd Kiser, *Ins. Commissioner*
Reed Stringham, *AG Counsel*

Suzette Green-Wright, *MC Director*
Steve Gooch, *PIO Recorder*

Cathy Burton, *Examiner*

AGENDA

- **General Session (Open to the Public)**
 - Welcome / Clay Carlos, Chair
 - Swear in new board members / Cathy
 - Dominic Sanone
 - Tony Choate
 - Adoption of Minutes for April 12, 2017
- **Executive Session - If Needed (Closed to the Public)**
- **General Session (Open to the Public)**
 - **Approve Recommended Actions from Executive Session** – Not needed
 - **Licensing Report for April through June** / Cathy
 - **Summary of Enforcement Reports** / Cathy
 - Proposed Penalties for Board's Review: None
 - Agency Audit Update / Cathy
 - **New Business**
 - **New App:** Out On Bail LLC / Cathy
 - Changes made to SB 167 / Sen. Stuart Adams (*tentative*)
 - New general public board member / Steve
 - **Old Business**
 - **Other Business**
- **Adjourned**
 - **Next Meeting:** October 11, 2017 — Copper Room, East Building

2017 Meetings (Noon to 1:30pm)

Jan 11, 2017	Apr 12, 2017	July 12, 2017	Oct 11, 2017
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Bail Bond Agency/Company Monthly Report

For the month of April 2017

New Licenses:

Agency	Name	Original Issue Date	Expiration Date
None			

Lapsed Licenses:

Agency	Name	Original Issue Date	Expiration Date
None			

Suspended Licenses:

Agency	Name	Original Issue Date	Suspended Date
547615	Best Bail Bonds	14-Oct-15	20-Apr-17

Reinstated Licenses:

Agency	Name	Original Issue Date	Expiration Date	Reinstate Date
None				

Bail Bond Individual Monthly report

For the month of April 2017

New Licenses:

Individual	Name	Original Issue Date	Expiration Date
130506	BANKS, KRISTINA	3-Apr-17	31-Jul-19
35640	CROWTHER, CAMILLE	21-Apr-17	31-Jul-19
1703671	GURULE, JAYCEE	17-Apr-17	31-Aug-19
1701180	HELMS, AMANDA	6-Apr-17	31-Jul-19
1705305	JENKINS, CONNER	27-Apr-17	31-Mar-20
1704915	JOLLEY, BROOKE	21-Apr-17	31-Mar-20
1703196	OLSEN, BAILEE	17-Apr-17	31-Oct-19
1702799	PETTINGILL, BRIAN	5-Apr-17	30-Sep-19
1704804	RODRIGUEZ, PAMELA	17-Apr-17	31-Dec-19
1705308	RUNOLFSON, MARY	19-Apr-17	31-Dec-19
1706075	TAYLOR, DANIEL	1-May-17	29-Feb-20

Lapsed Licenses:

Individual	Name	Original Issue Date	Expiration Date	Lapsed Date
32348	CUMMINGS, ROBERT	24-Jan-00	31-Mar-17	30-Apr-17
1563779	DAVIS, PAUL	17-Apr-14	31-Mar-17	30-Apr-17
101608	ELDREDGE, STEPHEN	12-Oct-10	31-Mar-17	30-Apr-17
1607125	HOSKINS, HOPE	23-Mar-15	31-Mar-17	30-Apr-17
1431021	JOHNSON, RYAN	20-Aug-10	31-Mar-17	30-Apr-17
1421158	KELLER, KATIE	26-Apr-10	31-Mar-17	30-Apr-17
1384787	SHEPHERD, BRIDGET	29-Jan-09	31-Mar-17	30-Apr-17
1568535	SLINGERLAND, JOSH	13-May-14	31-Mar-17	30-Apr-17

Reinstated Licenses:

Individual	Name	Original Issue Date	Expiration Date	Reinstated Date	# Days License Not Active
18297	BAUCUM, MICHAEL	17-Mar-99	31-Mar-19	10-Apr-17	10
36003	COOPER, RYAN	31-Jul-98	28-Feb-19	13-Apr-17	44
140326	LOPEZ, ROBIN	11-Jan-07	31-Mar-19	13-Apr-17	13
40863	STEVENS, CLYDE	16-Sep-98	31-Mar-19	13-Apr-17	13

Bail Bond Agency/Company Monthly Report

For the month of May 2017

New Licenses:

Agency	Name	Original Issue Date	Expiration Date
None			

Lapsed Licenses:

Agency	Name	Original Issue Date	Expiration Date
None			

Reinstated Licenses:

Agency	Name	Original Issue Date	Expiration Date	Reinstate Date
None				

Bail Bond Individual Monthly Report

For the month of May 2017

New Licenses:

Individual	Name	Original Issue Date	Expiration Date
1706790	BETTIS, MICHELLE	11-May-17	29-Feb-20
1708320	CRANDALL, LYNETTE	22-May-17	31-Aug-19
1659691	PERSON, DESIREE	11-May-17	31-Mar-20
1706091	SEWELL, CEANNE	11-May-17	30-Sep-19
1706997	STEELE, AMBER	26-May-17	31-Dec-19
1706075	TAYLOR, DANIEL	1-May-17	29-Feb-20

Lapsed Licenses:

Individual	Name	Original Issue Date	Expiration Date	Lapsed Date
1421467	KINGSTON, CHARLES	4-May-10	30-Apr-17	30-May-17
1601567	LEWIS, LAURA	26-Jan-15	30-Apr-17	30-May-17
1509376	MITCHELL, LARAE	4-Dec-12	30-Apr-17	30-May-17
1580295	SHERMAN, ALEX	21-Aug-14	30-Apr-17	30-May-17
1573426	TAUFNER, MISLENY	24-Jun-14	30-Apr-17	30-May-17

Reinstated Licenses:

Individual	Name	Original Issue Date	Expiration Date	Lapsed Date	# Days License Not Active
1513458	ESANCI, STAR	21-Dec-12	30-Apr-19	7-May-17	7

Bail Bond Agency/Company Monthly Report

For the month of June 2017

New Licenses:

Agency	Name	Original Issue Date	Expiration Date
None			

Lapsed Licenses:

Agency	Name	Original Issue Date	Expiration Date
None			

Reinstated Licenses:

Agency	Name	Original Issue Date	Expiration Date	Reinstate Date
None				

Bail Bond Individual Monthly Report

For the month of June 2017

New Licenses:

Individual	Name	Original Issue Date	Expiration Date	Lapsed Date	# Days License Not Active
1710896	BARNES, RORY	13-Jun-17	30-Sep-19		
1708237	CANFIELD, ELISHA	8-Jun-17	31-Aug-19		
1710560	DAVIS, MELISSA	14-Jun-17	31-Dec-19		
1709879	DONALDSON, MANDY	15-Jun-17	31-May-20		
1709138	NORDELL, MATTHEW	5-Jun-17	30-Jun-19		
1710553	SCHULTZ, JESSICA	2-Jun-17	31-Dec-19		
1712568	UDY, JOHN	29-Jun-17	30-Sep-19		

Lapsed Licenses:

Individual	Name	Original Issue Date	Expiration Date	Lapsed Date	# Days License Not Active
1343816	GRANDSTAFF, LINDSEY	29-Jul-14	31-May-17	30-Jun-17	
1608500	HERRING, CIARA	23-Mar-15	31-May-17	30-Jun-17	
1428077	HOALDRIDGE, NICOLE	15-Jul-10	31-May-17	30-Jun-17	
30196	HOYT, TAMARA	30-Jun-10	31-May-17	30-Jun-17	
1382868	JONES, SHERYL	30-Dec-08	31-May-17	30-Jun-17	
1513318	LUND, DUSTIN	12-Dec-12	31-May-17	30-Jun-17	
88467	NIELSEN, BONNIE	1-Apr-03	31-May-17	30-Jun-17	
30045	STARLEY, MELINDA	26-Mar-01	31-May-17	30-Jun-17	

Reinstated Licenses:

Individual	Name	Original Issue Date	Expiration Date	Reinstated Date	# Days License Not Active
32348	CUMMINGS, ROBERT	24-Jan-00	31-Mar-19	28-Jun-17	89
128683	IACONA, CHARLES	15-May-06	28-Feb-19	17-Jun-17	109
108149	JENKINS, PATTY	1-Dec-04	31-May-19	11-Jun-17	11
1560079	LEFEVRE, ANNA	20-Oct-14	31-May-19	11-Jun-17	11
1590872	VARIO, MARISA	27-Oct-14	31-May-19	11-Jun-17	11



Bail Bond Meeting Monthly Report

As of 06/30/2017

Complaints

	Apr/May/Jun	Year to Date
Open	0	12
Closed	2	12

Audits

Scheduled	9	14
Conducted	9	14
Closed	3	7

Investigations

Open	41	115
Closed	40	136

E-Case

New	2	13
Closed	1	8

	I-Cases	E-Cases
Open 0-90 days	1	1
Open 91-120 days	1	1
Open 121 - 180 days	0	0
Open over 180 days	1	1

Opened Investigations

Open last 90 days

I Case #	Opened	Closed	# of days opened	Reason
68907	04/04/17	04/06/17	3	Failure to pay judgment
68913	04/05/17	04/28/17	24	Designation Issue
68914	04/05/17	04/28/17	24	Designation Issue
68915	04/05/17	04/05/17	24	Designation Issue
68916	04/05/17	04/28/17	24	Designation Issue
68919	04/05/17	04/19/17	15	Designation Issue
68920	04/05/17	04/19/17	15	Designation Issue
68921	04/05/17	04/14/17	10	Designation Issue
68923	04/05/17	04/14/17	10	Designation Issue
68924	04/05/17	04/19/17	15	Designation Issue
68925	04/05/17	04/19/17	15	Designation Issue
68926	04/05/17	04/19/17	15	Designation Issue
68927	04/05/17	04/19/17	15	Designation Issue
68928	04/05/17	04/19/17	15	Designation Issue
68932	04/06/17	04/18/17	13	Failure to pay judgment
68933	04/06/17	04/18/17	13	Failure to pay judgment
68930	04/06/17	04/18/17	13	Failure to pay judgment
68935	04/06/17	04/18/17	13	Failure to pay judgment
68934	04/06/17	04/18/17	13	Failure to pay judgment
68931	04/06/17	04/18/17	13	Failure to pay judgment
68938	04/07/17	04/18/17	12	Failure to pay judgment
68942	04/07/17	04/14/17	8	Failure to pay judgment
68950	04/11/17	04/20/17	10	Failure to pay judgment
69000	04/20/17	06/16/17	58	Failure to pay judgment
69105	05/16/17	05/23/17	8	Failure to pay judgment
69119	05/18/17	06/07/17	21	Designation Issue
69126	05/19/17	06/07/17	20	Designation Issue
69128	05/19/17	06/15/17	28	Designation Issue
69129	05/19/17	06/27/17	40	Designation Issue
69130	05/19/17	06/15/17	28	Designation Issue
69131	05/19/17			Designation Issue
69161	05/24/17	05/26/17	3	Designation Issue
69162	05/24/17	05/26/17	3	Designation Issue
69163	05/24/17	05/31/17	8	Designation Issue
69164	05/24/17	05/31/17	8	Designation Issue

69166	05/25/17	06/15/17	22	Designation Issue
69167	05/25/17	06/15/17	22	Designation Issue
69200	06/08/17	06/21/17	14	Contract Dispute
69265	06/13/17	06/16/17	4	Failure to pay judgment
69286	06/16/17	06/20/17	5	Failure to pay judgment
69301	06/20/17	06/20/17	1	Unfair Marketing Practices

Application for Utah Resident Bail Bond Business Entity License

**Utah Insurance Department
Suite 3110 State Office Building
PO Box 146901
Salt Lake City, UT 84114**

Demographic Information				
1 Business Entity Name <u>Out on Bail LLC</u>		2 Incorporation/Formation Date (month) <u>3</u> (day) <u>15</u> (year) <u>17</u>		3 FEIN [REDACTED]
4 If assigned, National Producer Number (NPN)		5 If applicable, FINRA Firm Central Registration Depository (CRD) Number		
6 List any other assumed, fictitious, alias or trade names under which you are doing business or intend to do business.		7 State of Domicile <u>Utah</u>	8 Country of Domicile <u>U.S.</u>	
9 Is the business entity affiliated with a financial institution/bank? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
10 Business Address <u>360 W. 300 N.</u>		11 City <u>Orangeville</u>	12 State <u>UT</u>	13 Zip Code <u>84537</u>
14 Foreign Country <u>N/A</u>		15 Phone Number (include extension) <u>(801) 570-4840</u>		
16 Fax Number <u>(435) 653-2171</u>		17 Business Web Site Address		18 Business E-Mail Address <u>Utahoutonbail@gmail.com</u>
19 Mailing Address <u>360 W. 300 N.</u>		20 P.O. Box <u>101</u>	21 City <u>Orangeville</u>	22 State <u>UT</u>
		23 Zip Code <u>84537</u>	24 Foreign Country <u>N/A</u>	
Designated/Responsible Licensed Producer				
25 Identify at least one Designated/Responsible Licensed Producer responsible for the business entity's compliance with the insurance laws, rules, and regulations of this state.				
Name <u>Thomas Breerton</u>		SSN <u>[REDACTED]</u>		
Name _____		SSN - - -		
Name _____		SSN - - -		
Name _____		SSN - - -		
Owners, Partners, Officers and Directors				
26 Identify all owners with 10% interest or voting interest, partners, officers and directors of the business entity, or members or managers of a limited liability company:				
Name <u>Linda Barnes</u>		Title <u>Member</u>	SSN/FEIN <u>[REDACTED]</u>	Owner: <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
Name <u>Thomas Breerton</u>		Title <u>Registered Agent</u>	SSN/FEIN <u>[REDACTED]</u>	Owner: Yes / <input checked="" type="checkbox"/> No
Name <u>Dinia Morales Arana</u>		Title <u>Registered Agent</u>	SSN/FEIN <u>[REDACTED]</u>	Owner: Yes / <input checked="" type="checkbox"/> No
Name _____		Title _____	SSN/FEIN - - -	Owner: Yes / No
Name _____		Title _____	SSN/FEIN - - -	Owner: Yes / No
Name _____		Title _____	SSN/FEIN - - -	Owner: Yes / No
Name _____		Title _____	SSN/FEIN - - -	Owner: Yes / No
Name _____		Title _____	SSN/FEIN - - -	Owner: Yes / No

(State Use)

Application for Utah Resident Bail Bond Business Entity License

Business Entity Qualifications

27 Check the legal business type and the financial qualifications of the license for which you are applying.

Legal Business Type:

- C - Corporation
 P - Partnership
 S - Sole Proprietorship
 LLC - Limited Liability Company
 LLP - Limited Liability Partnership

Financial Qualifications:

- Surety Insurer: Lexington National Insurance Corp (Provide name)
 Real/ Personal Property - \$300,00 Net Worth (\$100,000 Liquid)
 Financial Institution Line of Credit - \$300,000

Required Additional Information with Initial Application

28 The following additional information is required. Please submit electronically to the department by faxing to the attention of Cathy Burton at 801-537-9113 or as a PDF attachment to an email at caburton@utah.gov.

- 1) Articles of Organization and/or Articles of Incorporation identifying business' legal name and all owners, partners, shareholders and managers.
- 2) Proof of business entity registration through the Department of Commerce.
- 3) A copy of all forms to be used by the agency, filed with the department using the attached Property & Casualty Transmittal Document. **Note: The agency cannot begin business until these forms are filed.**
- 4) Proof of meeting the financial requirements by submitting one of the following:
 - a) **Letter of Credit Basis** - Applicant must provide an irrevocable letter of credit with a minimum face value of \$300,000 assigned to the State of Utah from a qualified Utah Financial Institution.
 - b) **Ownership of Real or Personal Property basis** - Applicant must provide the following:
 - i) A Certified Public Account reviewed financial statement as of the end of the most current fiscal year showing a net worth of at least \$300,000, including a minimum of \$100,000 in liquid assets.
 - ii) A copy of the applicant's federal income tax return for the prior two years.
 - iii) A preliminary title report dated not more than one month prior to the date of the application and an appraisal dated not more than two years prior to the date of the application for each parcel of real property owned by the applicant and included in the applicant's net worth calculation.
 - c) **Agent of a bail bond Surety Insurer basis** - Applicant must provide a qualifying power of attorney issued by the bail bond surety insurer.
- 5) Proof that at least one principal has a minimum of 2,000 hours of experience working as an employee of a bail bond surety company as a licensed bail bond agent, including the following:
 - a) a statement of the exact details of the character and nature of the experience;
 - b) a statement by each employer verifying the number of hours worked for the employer; and
 - c) federal income reporting forms that account for the wages for hours claimed, or documented approval of the claimed hours by the Utah Insurance Department (note: the total of 2,000 hours may be proved in part by federal income reporting forms and in part by approval by the insurance department).
- 6) **Laws and Rules** - The applicant is required to be aware of and comply with all the laws and rules governing the business of bail bonds. For the applicants information some of the laws that specifically apply to bail bonds can be found on our web site <https://www.insurance.utah.gov/> among other statutes, the applicant may want to refer to Utah Code Annotated 31A-23a-409, 31A-35, and Utah Administrative Code R590-170, R590-186, R590-196.

**Application for
Utah Resident Bail Bond Business Entity License**

Background Information

29 Please read the following very carefully and answer every question. All written statements submitted by the Applicant must include an original signature.

1. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, ever been convicted of, or is the business entity or any owner, partner, officer or director, member or manager currently charged with, committing a crime, had a judgment withheld or deferred, or are you currently charged with committing a crime? Yes ___ No

"Crime" includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations or convictions involving driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license and juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence or a fine.

If you answer yes, you must attach to this application:

- a) a written statement identifying all parties involved (including their percentage of ownership, if any) and explaining the circumstance of each incident.
- b) a copy of the charging document,
- c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.

2. Has the business entity or any owner, partner, officer or director, or manager or member of a limited liability company, ever been named or involved as a party in an administrative proceeding regarding any professional or occupational license, or registration? Yes ___ No

"Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license. "Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. You may EXCLUDE terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

If you answer yes, you must attach to this application:

- a) written statement identifying the type of license, all parties involved (including their percentage of ownership, if any) and explaining the circumstances of each incident,
- b) copy of the Notice of Hearing or other document that states the charges and allegations, and
- c) copy of the official document which demonstrates the resolution of the charges or any final judgment.

3. Has any demand been made or judgment rendered against the business entity or any owner, partner, officer or director, or member or manager if a limited liability company, for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding? Do not include personal bankruptcies, unless they involve funds held on behalf of others.. Yes ___ No

If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment.

4. Has the business entity or any owner, partner, officer or director, or member or manager of a limited liability company, ever been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement? Yes ___ No

If you answer yes, identify the jurisdiction(s): _____

5. Is the business entity or any owner, partner, officer or director a party to, or ever been found liable in any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? Yes ___ No

If you answer yes, you must attach to this application:

- a) written statement summarizing the details of each incident,
- b) copy of the Petition, Complaint or other document that commenced the lawsuit arbitration or mediation proceedings and
- c) copy of the official document which demonstrates the resolution of the charges or any final judgment.

6. Has the business entity or any owner, partner, officer or director, or member or manager if a limited liability company, ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct? Yes ___ No

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and
- b) copies of all relevant documents.

7. Are you engaged in any unprofessional conduct as described in Utah Insurance Department Rule R590-186, Bail Bond Surety Companies? Yes ___ No

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident and
- b) copies of all relevant documents (if necessary)

8. Have any of the person(s) named on this application willfully misstated or negligently reported any material fact in the application or procured a misstatement in the documents supporting the application? Yes ___ No

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details
- b) copies of all relevant documents (if necessary)

Application for Utah Resident Bail Bond Business Entity License

<p>9. Have any of the person(s) named on this application been the subject of any outstanding civil judgment? Yes ___ No <input checked="" type="checkbox"/></p> <p style="font-size: small;">If you answer yes, you must attach to this application: a) a written statement summarizing the details b) copies of all relevant documents (if necessary)</p>	Yes ___ No <input checked="" type="checkbox"/>
<p>10. Have you failed to report, preserve, and retain separately, or return collateral taken as security on any bond to the principal, indemnitor, or depositor of such collateral? Yes ___ No <input checked="" type="checkbox"/></p> <p style="font-size: small;">If you answer yes, you must attach to this application: a) a written statement summarizing the details b) copies of all relevant documents (if necessary)</p>	Yes ___ No <input checked="" type="checkbox"/>
<p>11. Have any of the person(s) named on this application have an outstanding judgment on a bail forfeiture which judgment is or has been subject to execution? Yes ___ No <input checked="" type="checkbox"/></p> <p style="font-size: small;">If you answer yes, you must attach to this application: a) a written statement summarizing the details b) copies of all relevant documents (if necessary)</p>	Yes ___ No <input checked="" type="checkbox"/>
<p>12. Do the person(s) named on this application certify: They are doing business under one name in the State of Utah and comply with state and local business regulations, including filing with the appropriate authority if doing business under an assumed name? Yes ___ No <input checked="" type="checkbox"/></p> <p style="font-size: small;">If you answer yes, you must attach to this application: a) a written statement summarizing the details b) copies of all relevant documents (if necessary)</p>	Yes ___ No <input checked="" type="checkbox"/>
<p>13. Do the person(s) named on this application certify: They are the holders of real or personal property in Utah? Yes ___ No <input checked="" type="checkbox"/></p> <p style="font-size: small;">If you answer yes, you must attach to this application: a) a written statement summarizing the details b) copies of all relevant documents (if necessary)</p>	Yes ___ No <input checked="" type="checkbox"/>

Applicant's Certification and Attestation

- ⑩ On behalf of the business entity or limited liability company, the undersigned owner, partner, officer or director of the business entity, or member or manager of a limited liability company, hereby certifies, under penalty of perjury, that:
1. All of the information submitted in this application and attachments is true and complete and I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license or registration revocation and may subject me and the business entity or limited liability company to civil or criminal penalties.
 2. Unless provided otherwise by law or regulation of the jurisdiction, the business entity or limited liability company hereby designates the Commissioner, Director or Superintendent of Insurance, or an appropriate representative in each jurisdiction for which this application is made to be its agent for service of process regarding all insurance matters in the respective jurisdiction and agree that service upon the Commissioner or Director of that jurisdiction is of the same legal force and validity as personal service upon the business entity.
 3. The business entity or limited liability company grants permission to the Commissioner or Director of Insurance in each jurisdiction for which this application is made to verify any information supplied with any federal, state or local government agency, current or former employer or insurance company.
 4. Every owner, partner, officer or director of the business entity, or member or manager of a limited liability company, either a) does not have a current child-support obligation, or b) has a child-support obligation and is currently in compliance with that obligation.
 5. I authorize the jurisdictions to give any information they may have concerning me to any federal, state or municipal agency, or any other organization and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
 6. I acknowledge that I understand and comply with the insurance laws and regulations of the jurisdictions to which I am applying for licensure/registration.
 7. I hereby certify that upon request, I will furnish the jurisdiction(s) to which I am applying, certified copies of any documents attached to this application or requested by the jurisdiction(s).
 8. I hereby certify that I am the owner, partner, or officer of this named company; that all the information in this application is complete and true to the best of my knowledge and belief, and acknowledge that any misrepresentation or misstatement of facts may be cause for revocation of this license. By signing this application, I hereby authorize the commissioner to make inquiry of any person regarding this application.

Must be signed by an officer, director, or partner of the business entity, or member or manager if a limited liability company:

03/24/2017
 Month/Day/Year

Linda Barnes
 Signature

Linda Jillene
 Typed or Printed Name

Member
 Title

Po Box 101 Orangethorpe Wt 84537
 Address (City, State, Zip)