Utah Insurance Department

Certification of Compliance with Temporary License Requirements
(to be completed and signed by an owner, partner, officer, or designated responsible licensed producer (DRLP) of sponsoring insurance company or agency)

I, ___________________________ (name of owner, partner, officer, or DRLP), certify the accuracy of the following under penalty of Utah law:

1. I submit this Certification in support of the application of _____________________ (“Applicant”) for a temporary individual resident producer license.

2. If issued a temporary license, Applicant will be affiliated with and sponsored by the following licensed insurance company or licensed agency that is in good standing with the Department: _________________________________ (name of sponsoring insurance company or agency, aka “Sponsor”). The affiliation and sponsorship will be in place for the duration of the temporary license period. Sponsor is responsible for Applicant’s acts occurring in the course and scope of the temporary licensure.

3. During the temporary license period, Applicant will be supervised on the job by a licensed individual producer who is in good standing with the Department and is affiliated with Sponsor.

4. If Applicant’s affiliation or sponsorship with Sponsor ends before the last day of the temporary license period, Sponsor will immediately notify the Department.

5. Applicant has successfully completed 40 hours of training in the line(s) of authority for which the license is sought as identified in the Exam Content Outlines of the Utah Insurance Department License Information Bulletin, https://insurance.utah.gov/wp-content/uploads/LicensingBulletin.pdf.

6. I am an owner, partner, officer, or designated responsible licensed producer of Sponsor and am authorized to make this certification on Sponsor’s behalf.

Dated: ______________________

________________________________________
Signature of owner, partner, officer, or DRLP

________________________________________
Title or Position with Sponsoring Insurance Company or Agency