



LOUISIANA DEPARTMENT OF INSURANCE

JAMES J. DONELON
COMMISSIONER

AFFIDAVIT OF NON-RESIDENT INDIVIDUAL TITLE INSURANCE PRODUCER
(RENEWAL FORM FOR CURRENT LICENSE HOLDER)

BEFORE ME, the undersigned authority, personally came and appeared the following affiants:

1) (Applicant) (hereinafter "Non-Resident Title Insurance Producer"), a non-resident Individual producer licensed for the line of title in Louisiana and a resident of the state of ; and

2) (Representative of Resident Agency Producer), as an authorized representative of (Name of Resident Agency Producer) (hereinafter "Resident Agency Producer"), an insurance agency producer licensed for the line of title in Louisiana; and, who, after being individually sworn, did depose and affirm that:

A) The Resident Agency Producer is a resident agency producer licensed in Louisiana for the line of title and has a Louisiana producer license number of: .

B) The Resident Agency Producer has properly affiliated the Non-Resident Title Insurance Producer pursuant to La. R.S. 22:1546.B.

C) The Non-Resident Title Insurance Producer is licensed as a non-resident individual title insurance producer in Louisiana and has a Louisiana producer license number of: .

D) Check One:

The Non-Resident Title Insurance Producer is a full-time employee of the Resident Agency Producer as contemplated in La. R.S. 22:512(9.1) but is not the Resident Agency Producer's designated individual producer.

The Non-Resident Title Insurance Producer is a full-time employee of the Resident Agency Producer as contemplated in La. R.S. 22:512(9.1) and is the Resident Agency Producer's designated individual producer. The Non-Resident Title Insurance Producer has never had his/her insurance producer license suspended, revoked, or denied by any court or agency in any jurisdiction.

Signature of Resident Agency Producer Representative

Printed Name of Resident Agency Producer Representative

Signature of Non-Resident Title Insurance Producer

Printed Name of Non-Resident Title Insurance Producer

SWORN TO and subscribed before me this day of , 20.

Notary Public or Bar Roll Number

Signature of Notary Public

My Commission Expires

Printed Name of Notary Public