



## Viatical Settlement Broker Business Entity Renewal Application

**Important Notice:** Disclosure of this information is required under the Illinois Revised Statutes' insurance laws. Failure to provide this information will result in this form not being processed. This form has been approved by the Forms Management Center.

**Fee Requirement:** Attach a check or money order for \$500 payable to the Director of Insurance.

### Demographic Information

Business Entity Name		Incorporation / Formation Date MM                  DD                  YY		FEIN # or License #	
DBA/Trade Name (if applicable)				State of Domicile	
Business Address		City		State	Zip Code
Phone Number (include extension)	Fax Number	Business Web Site Address		Business E-mail Address	
Mailing Address		P.O. Box	City	State	Zip Code

### Designated Licensed Individual Broker or Provider

Designate every individual who is authorized to act for the Business Entity under the business Entity's License. Each designated individual must have an individual Settlement Broker license. The Business Entity must have at least one Designated Licensed Individual Viatical Settlement Broker who is responsible for the Business Entity's compliance with the laws, rules and regulations of the State of Illinois. (Please list additional Individual Brokers on separate sheet.)

Name \_\_\_\_\_ SSN \_\_\_\_\_ DOI# \_\_\_\_\_  
 Name \_\_\_\_\_ SSN \_\_\_\_\_ DOI# \_\_\_\_\_  
 Name \_\_\_\_\_ SSN \_\_\_\_\_ DOI# \_\_\_\_\_

### Background Information

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, been convicted of, or is currently charged with, committing a crime or had a judgement withheld or deferred which has not been previously reported to this state? 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 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 circumstances 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 judgement.

2. Has the business entity or any owner, partner, officer or director of the business entity, or member or manager of a limited liability company, been named or involved as a party in an administrative proceeding regarding any professional or occupational license, or registration, which has not been previously reported to this state? Yes  No

"Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, placed on probations 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) a written statement identifying the type of license; identifying all parties involved (including their percentage of ownership, if any and explaining the circumstances of each incident,
- b) a copy of the Notice of Hearing or other document that states the charges and allegations, and
- c) a copy of the official document, which demonstrates the resolution of the charges or any final judgement.

# Applicant's Certification and Attestation

On behalf of the business entity, the undersigned viatical settlement broker officer of the business entity hereby certifies, under the 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 be 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 the 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 jurisdiction to give any information they may have concerning me to any federal, state or municipal agency, or any other organization and I release the jurisdiction 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 jurisdiction to which I am applying for license/registration.
7. For Non-Resident License Applications, I certify that I am licensed and in good standing in my home state/resident state for the lines of authority requested from the non-resident state.
8. 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).

Must be signed by an officer, director, or partner of the business entity who is a licensed viatical settlement broker.

\_\_\_\_\_  
Month/Day/Year

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code