

**Oregon Department of Consumer and Business Services**

**Division of Financial Regulation**

350 Winter St. NE, Rm. 410, Salem, Oregon 97301-3881

Mailing address: P.O. Box 14480, Salem, Oregon

503-947-7982 ♦ Fax: 503-378-4351

web.inscomp@dcbs.oregon.gov

dfr.oregon.gov



**Rating Organization License Application**

Pursuant to the Oregon Insurance Code, the undersigned hereby applies to the State of Oregon for a rating organization license and, for that purpose, submits the following:

1. Name of applicant: \_\_\_\_\_
2. Domicile address (street, city, state, ZIP): \_\_\_\_\_
3. Principal office address (street, city, state, ZIP): \_\_\_\_\_
4. Mailing address (street, city, state, ZIP): \_\_\_\_\_
5. Name of agent for service of process, notice, or demand in Oregon: \_\_\_\_\_  
Address (street, city, state, ZIP): \_\_\_\_\_
6. Type of organization: \_\_\_\_\_
7. Classes of insurance or risks to be covered by license: \_\_\_\_\_

8. Documents required to accompany this application:
  - (a) A current certification from the insurance supervisory official of the applicant's domiciliary jurisdiction, affirming that the applicant is in good standing.
  - (b) A copy of each of the following:
    - (I) Charter, constitution, or articles of agreement, association, or incorporation, as amended to date
    - (II) Bylaws, rules, and regulations governing conduct of applicant's business
    - (III) Report of most recent examination by an insurance supervisory official
  - (c) A list of the applicant's members and subscribers
  - (d) A statement of applicant's qualifications as a rating organization. In the case of a fire insurance rating organization, see ORS 737.350(4).

Date: \_\_\_\_\_

President: \_\_\_\_\_

Secretary: \_\_\_\_\_

Corporate seal

Return this application, required attachments, and \$180 licensing fee (to be paid every three years) to the Oregon Division of Financial Regulation. Make check or money order payable to the Department of Consumer and Business Services.



**Remit with payment to:**  
Financial Services section  
Oregon Department of Consumer  
and Business Services  
P.O. Box 14610  
Salem, OR 97309-0445

**FISCAL USE ONLY: 92010/1519**  
**Fee: \$180.00**