

## **Department of Consumer and Business Services** Division of Financial Regulation — 3

P.O. Box 14480, Salem, OR 97309-0405 Phone: 503-947-7981, Fax: 503-378-4351 350 Winter St. NE, Salem, Oregon Email: web.insagent@dcbs.oregon.gov

dfr.oregon.gov

## Affiliation of producer, adjuster, or insurance consultant; or designation of responsible producer

This form may be used to add or remove agency affiliations or responsible producers as required by Oregon law. ORS 744.068 (5) provides that "not later than the 30th day after the authority of an individual insurance producer to act for an insurance producer that is a business entity has commenced or terminated the business entity shall notify the director of the commencement or termination." ORS 744.059 (2)(b) requires each business entity holding an insurance producer license to designate a licensed insurance producer to be responsible for the business entity's compliance with the insurance laws and rules of this state. The designation of a responsible producer is not required of adjusting or consulting firms, unless these firms hold a license as an insurance producer also.

This form does *not* change any address or employer information. No fee is required. This form may be mailed to the address at the top of the form, faxed to 503-378-4351, or scanned and emailed to web.insagent@dcbs.oregon.gov. To confirm the request has been processed, visit www.statebasedsystems.com.

Action to take:	☐ Affiliate ☐ Remove affiliation	☐ Designate responsible producer ☐ Remove responsible producer
Type of license:	Producer Adjuster	Consultant
Name of individual being af	filiated/designated/removed	Individual's Oregon license number
Business name		Business entity license number  Check if applying for new business
Business address		entity and provide FEIN below:
City, state, ZIP		Business Entity FEIN
Business email address		
Name:		
Owner or o	fficer (please print or type)	Date of affiliation/removal/designation
Owner or o	fficer	Date of signature

