

**OFFICE OF COMMISSIONER OF INSURANCE**

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER

Ralph T. Hudgens, Commissioner

2 Martin Luther King Jr., Dr., Suite 604, West Tower, Atlanta, GA 30334

Phone: 404-656-7556 ♦ Fax: 770-344-5798 ♦ E-mail: TBrewster@oci.ga.gov

www.oci.ga.gov**PREPAID LEGAL SERVICES
ANNUAL APPLICANT LETTER & CHECK LIST****NON-TRADITIONAL ENTITIES
GID-379-NT DEC2013**

December 6, 2013

To: All Licensed Prepaid Legal Services Applicant

From: Non-Traditional Entities- Insurance and Financial Oversight Division

Re: **Application for Licensure**

Dear Sir/Madam:

Pursuant to O.C.G.A. §33-35-1 et seq. and Georgia Rules and Regulations §120-2-29.01 et seq. licensure is required for any entity that provides “any arrangement whereby responsibility is undertaken to provide, arrange for, pay for, or reimburse any part of the cost of any legal services for a consideration consisting in part of prepaid or periodic charges or dues.”

The Applicant is responsible for remitting the following forms:

1. **GID-32** (Application for License as a Prepaid Legal services Sponsor)
2. **GID-34** (Bond by Sponsor of Prepaid Legal services Plan)
3. **GID-35** (Power to Sell and Assign Securities Deposited with the Commissioner of Insurance)
4. **GID-36** (Resolution Form Authorizing sale or Assignment)
5. **GID-37** (Authorization Form for Sale or Assignment)
6. **GID-37-C** (Assignment of Savings Share Certificate or CD)
7. **GID-41** (Biographical Questionnaire)
8. **GID-276-EN** (Citizenship Affidavit)

In accordance with O.C.G.A. §33-8-1, please include a check made payable to the Georgia Insurance Department in the amount of \$500.00.

Consideration of the application will be made once all materials have been received, a qualifying examination performed and a satisfactory review has been made. Please direct all materials to the following address:

**Commissioner of Insurance
Attn: Insurance and Financial Oversight Division
P.O. Box 935138
Atlanta, GA 31193-5138**

Please note that failure to file a timely renewal will result in penalties being assessed as stipulated at O.C.G.A. §33-1-8 as well as possible enforcement action

Prepaid Legal Services Annual Applicant Check Sheet

Name of Company: _____

EIN: _____ Check#: _____

Contact Person: _____

Email: _____

_____ **GID-32** (Application for License as a Prepaid Legal services Sponsor)

_____ **Renewal Application Fee - \$500.00**

Please make a copy of your check and include it in the renewal to the department. Then send the original check, along with a copy of your cover letter, to the Lock box address listed below:

Georgia Department of Insurance

P.O. Box 935138

Atlanta, GA 31193-5138

Amount: \$ _____

_____ **GID 34** (Bond by Sponsor of Prepaid Legal services Plan)

_____ **GID-35** (Power to Sell and Assign Securities Deposited with the Commissioner of Insurance)

_____ **GID-36** (Resolution Form Authorizing sale or Assignment)

_____ **GID-37** (Authorization Form for Sale or Assignment)

_____ **GID-37-C** (Assignment of Savings Share Certificate or CD)

_____ **GID-41** (Biographical Questionnaire)

_____ **GID-276-EN** (Citizenship Affidavit), along with verification.