STATE OF MAINE
DEPARTMENT OF PROFESSIONAL
AND FINANCIAL REGULATION
BUREAU OF INSURANCE
34 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0034

Business Entity (Agency)

Add or Terminate Affiliation Form

Pursuant to 24-A M.R.S. §1413(4), "Whenever a business entity changes the individuals designated to act in the name of the entity, the entity shall notify the superintendent within 30 days of those changes."

Note: The Bureau of Insurance does not affiliate to branch locations only to the primary office.

Please check one per form: [ ] **Add** Affiliations [ ] **Terminate** Affiliations

Business Entity Name : _____

Business Entity FEIN #: _____ License #: _____

Contact Person: _____ Phone #:_____

Name of Licensee	Maine License #	NPN #

There is **no fee** to add or terminate affiliations to a business entity.
Revised: May 2014