Appointment/Termination Form and Instructions

Before completing the form, be sure that the person/agency being appointed is actively licensed in Maine and not already appointed. Verification can be done on our website: www.maine.gov/pfr/insurance under "Licensee Search".

- 1. Please include the company name and address, contact name, phone number and extension, in case the Bureau of Insurance has questions concerning the completed form.
- 2. Please be aware that entries on the form must be either all appointments **OR** all terminations.
- 3. Column 1 Appointee (Licensee) License Information

Be sure to include the licensees' National Producer Number (NPN) and Maine License Number.

4. Column 2 - Appointee (Licensee) Name

Be sure the name is written on the form as it appears on the Maine license.

5. Columns 3-6 - Appointer (Insurer) License Information

Include both the insurers' Maine company license number and the NAIC number. Note: Please be sure you are using the correct Maine license number. All license numbers begin with a 3-letter prefix. If you are not sure, please verify on our website or call.

6. Column 7 - Effective Date

Enter the effective date that the insurer appointed or terminated the licensee, using mm/dd/yyyy format.

7. Column 8 - C - For Cause

The column with a **C** is to be checked **only** when the termination is "**for cause**". A termination is "for cause" when an insurer ends its agency relationship with a

producer for one of the reasons specified in Section 1420-K of the Maine Insurance Code. Terminations for cause must be submitted to the Superintendent within 30 days following the effective date of the termination. Additional written documentation **must** be submitted to the Maine Bureau of Insurance in accordance with the requirements of Section 1420-N(1).

Appointments are per licensee, per company, no matter how many authorities the licensee holds. If adding a new authority and the licensee is already appointed to the company, no new appointment is needed.

Questions may be directed to Accounting Associate at 207-624-8475 or by email to insurance.pfr@maine.gov.

Rev 06/2024

Maine Appointment/Termination Form

(rev 06/10/2024)

Return form & fees to: Accounting Associate, Bureau of Insurance, 34 State House Station, Augusta ME 04333-0034

Company Mailing Address: Please include name of contact person.		Company contact phone # & extension () Please check one only (see (a) below): Appoint (Include payment*) Terminate (No Fee)						
APPOINTEE National Producer # & Maine License #	APPOINTEE Producer/Business Entity Name		APPOINTER ME Lic # & NAIC #	Effective Date	С			
								1

There is no fee required for appointing producer business entities, prefixes AGN & AGR.

Form and payment may be emailed with credit card authorization form (found at www.maine.gov/insurance) to insurance.pfr@maine.gov. Payment by check, made payable to "Treasurer State of Maine", may be mailed to the address above.

- a. Entries on a form must be either all appointments or all terminations
- b. Effective Date- Use mm/dd/yyyy format
- c. **C**-Mark this column <u>only</u> if the termination is "for cause." A termination is "for cause" when an insurer ends its agency relationship with a producer for one of the reasons specified in Section 1420-K of the Maine Insurance Code. Additional written documentation **must** be submitted to the Insurance Department in accordance with the requirements of Section 1420-N(1).
- d. Confirmation of appointment/termination will **NOT** be sent to the insurer. Confirmation can be verified on the NAIC's Producer Database or the Bureau's website: www.maine.gov/insurance

^{*}Appointment Fees: \$30 Resident Individual or \$45 Nonresident Individual, per company; \$30 Resident Motor Vehicle Business Entity or \$70 Nonresident Motor Vehicle Business Entity, per company.