



Department of Consumer & Business Services

Insurance Division – 4
350 Winter St. NE, Room 440
Salem, Oregon 97301-3883
Phone (503) 947-7982
www.oregoninsurance.org

Remit with payment to:
Fiscal Services Section
Oregon Department of Consumer
& Business Services
PO Box 14610
Salem, OR 97309-0445

**Application for Renewal of
Certificate of Registration for
Legal Expense Organization**

Exhibit 1
OAR 836-14-035
Filing Fee: \$350

Name of legal expense organization _____

Street address _____

City _____ State _____ ZIP _____

Phone: _____

Contact person: _____
Last name First name Middle name

President, senior partner, or senior official: _____

The organization is the following type of entity (check only one):

- individual partnership corporation other

To the Oregon Insurance Commissioner, Salem, Oregon:

The registrant hereby applies for renewal of the **Certificate of Registration** of the legal expense organization which, pursuant to ORS 750.505 to 750.715, authorizes the organization to operate in Oregon until its certificate expires or is suspended, revoked, or not renewed by the Oregon Insurance Commissioner.

Name of registrant: _____
Name of person, company, corporation, partnership, or other entity

The registrant agrees to the following:

1. The registrant shall not act as a legal expense organization without written agreements between each plan and provider and each plan and member.
2. Each such agreement shall be retained in the official records of the organization for the duration of the agreement and five years thereafter.
3. Each such written agreement shall comply with the requirements of ORS 750.505 to 750.715.
4. Whenever a member uses the services of the legal expense organization under the terms of a written agreement between the plan and the member, the payment to the provider of any amount owed by or on behalf of the member by the legal expense plan shall be deemed payment to that provider when received.

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Applicant **must** check “Yes” or “No” answers to all questions below. Give full explanation of all “Yes” answers on attached sheet.

1. During the preceding registration period, has the applicant or any of its directors, partners, or officers:
 - (a) Had any application for registration as a legal expense organization denied by any public authority in any state?
 Yes No
 - (b) Had any professional, vocational or business license denied, suspended, revoked or restricted by any public authority in this or any other state?
 Yes No
 - (c) Been subjected to a civil penalty or a fine for activities under any professional, vocational, or business license?
 Yes No
 - (d) Withdrawn or surrendered any professional, vocational, or business license in order to avoid disciplinary action?
 Yes No
 - (e) Incurred any adverse judgment in any court of any jurisdiction of the United States for its activities relating to the transaction of business as a legal expense organization?
 Yes No
 - (f) Been declared insolvent or discharged from bankruptcy?
 Yes No
2. Have any of the organization’s directors, officers, or partners been convicted in a criminal proceeding (excluding minor traffic violations) within the past 10 years?
 Yes No

I certify that all statements and information in this registration are true and correct and that I have the authority to execute and file this application for renewal of the registration for the legal expense organization. I take notice of the prohibition under ORS 731.260 against false or misleading filings with the Insurance Commissioner.

Signature of authorized person for applicant

Date of signature

Subscribed and sworn to before me this ____ day of _____, 20 ____.

Notary public in and for the state of: _____

My appointment expires: _____