



Department of Consumer and Business Services

Insurance Division — 3

P.O. Box 14480, Salem, OR 97309-0405

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350 Winter St. NE, Salem, Oregon

www.insurance.oregon.gov

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

- Affiliate
- Designate responsible producer
- Remove affiliation
- Remove responsible producer

Category: Producer Adjuster Consultant

This form does **not** change any address or employer information. **Please read the instructions on page 2.**

Name of individual being affiliated/designated/removed

Oregon producer license no.

Business name

Social Security no.

Business address

Business entity license number or FEIN

City, state, ZIP

Business e-mail address

Affiliation – use this section to affiliate or remove the affiliation of a licensed producer, adjuster, or consultant.

Classes to which affiliating/removing:

- Property
- Casualty
- Personal lines
- Surplus lines
- Variable life
- Credit (credit life, credit health, credit involuntary unemployment, GAP, mechanical breakdown, mortgage, and motor vehicle physical damage)
- Trip Travel (baggage, trip cancellation, trip interruption, and travel ticket health)
- Crop
- Surety
- Title
- Life
- Health

ORS 744.068 (5) 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.

Designated responsible producer – use this section to designate or remove a responsible producer for the agency.

Classes to which affiliating/removing:

- Designate the individual listed above as the responsible producer for the named agency
- Remove the individual listed above as the responsible producer for the named agency.

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.

Owner or officer (please print or type)

Date of affiliation /removal/designation

Signature:

Owner or officer

Date of signature



440-2139 (7/10/COM)

No fee required.

To confirm that an affiliation has been added or removed, please go to our website, www.insurance.oregon.gov; select Information for Insurance Producers, then Search Pages, then search by name or license number.

Instructions:

This form may be used to add or remove agency affiliations or responsible producers.

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.

The expiration of either the individual or the business entity license will remove any active affiliations. These affiliations are **not** automatically added back if the license is reinstated. This form will need to be submitted to reactivate any affiliations that are removed as a result of an expired license.

This form may be mailed to the address at the top of the form, faxed to 503-378-4351, or scanned and e-mailed to web.insagent@state.or.us.

To confirm the affiliation request has been processed, visit our website, www.insurance.oregon.gov. Select Information for Insurance Producers, then Search Pages, then search by name or license number.

Responsible producer information is not currently verifiable online. Please contact our office to verify this information.