



COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE

APPLICATION FOR RENEWAL
YEAR 20__ - 20__

- Contract Services Provider
- Automobile Club
- Foreign Insurer
- Rating or Advisory Organization
- Fraternal Benefits Society
- Reinsurer
- Surplus Lines Insurer

Date _____

We present the following information in order to obtain the aforesaid renewal of our certificate of authority:

Name of applicant		
Corporate Social Security No or FEIN		Check "√" if different from the one on file.
Postal address		
Home office address		
Phone number		
<p>_____</p> <p><i>(Signature of President or Vice President)</i></p> <p>_____</p> <p><i>(Name)</i></p> <p>_____</p> <p><i>(Title)</i></p>		

NOTE: Please send this form in duplicate, including a check or money order for the corresponding amount, payable to the Secretary of the Treasury.

**GOVERNMENT OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE**

TO ALL FOREIGN INSURERS, FRATERNAL BENEFITS SOCIETIES, RATING ORGANIZATIONS, ADVISORY ORGANIZATIONS, FOREIGN INSURERS ACTING EXCLUSIVELY AS REINSURERS, SURPLUS LINES INSURERS, AUTOMOBILE CLUBS, NON RESIDENT PRODUCERS, NON RESIDENT AUTHORIZED REPRESENTATIVES, AND CONTRACT SERVICES PROVIDERS .

General Instructions for the Renewal of the Certificate of Authority

Section 7.010(1) of the Insurance Code of Puerto Rico establishes, as a condition to continue to be authorized to solicit or transact any kind of insurance in Puerto Rico, that the persons or entities so authorized shall pay, **not later than June 30th of each year**, a single annual contribution.

In light of the above, and in accordance with Sections 7.010 (1)(i), (k), (l), (m), (n), (o), (p) and 21.260 of the Insurance Code of Puerto Rico, the annual contribution to be paid is the following:

1. For each **Foreign Insurer**, the renewal fee shall be \$6,309.00
2. For each **Fraternal Benefit Society**, the renewal fee shall be \$2,103.00
3. For each **Rating Organization**, the renewal fee (per each line of authority) shall be \$2,103.00
4. For each **Advisory Organization**, the renewal fee shall be \$525.00
5. For each **Foreign Insurer** acting exclusively as **Reinsurers**, the renewal fee shall be \$2,103.00
6. For each **Automobile Club**, the renewal fee shall be \$525.00
7. For each **Contract Services Provider**, the renewal fee shall be \$500.00
8. For each **Surplus Lines Insurer**, the renewal fee shall be \$1051.00

To that effect, and in order to renew the certificate of authority, the entity must complete and submit the enclosed form to this Office, together with a check or money order for said amount, payable to the Secretary of Treasury, and a pre-addressed letter-size manila envelope. The application shall be mailed to the **Office of the Commissioner of Insurance of Puerto Rico, B5 Tabonuco Street Suite 216, PMB 356, Guaynabo, Puerto Rico 00968-3029**, on or before **June 30th**.

Applications received not later than **May 21st**, will be guaranteed processing and issuance of certificate before the deadline. Applications received after May 21st, will be processed in the order they are received but OCI staff can not warrant the issuance of their certificate by June 30th.

Strict compliance with the above is required.