Government of the United States Virgin Islands

Office of the Commissioner – Division of Banking, Insurance and Financial Regulation #5049 Kongens Gade, Charlotte Amalie, St. Thomas, V.I. 00802

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FAX-340-774-5590 FAX-340-719-3801



Appointment of Producer

	, issue, deliver and place policies or contracts of direct insurance upon risks
	The above producer is hereby authorized to solicit, accept applications, issue, deliver and place policies or contracts of direct insurance upon risks
	(Please print full legal name of Insurance Company)
(To be	e signed by an authorized signatory designated to appoint and/or terminate producers in the United States Virgin Islands)

Date

Commissioner of Insurance

STATEMENT OF AGREEMENT TO SERVE AS INSURANCE PRODUCER

to serve as producer	of
	int full legal name of Insurance Company)
	in and for the Virgin Islands of the
(Company's State of Domicile)	in the for the fight islands of the
United States, and further agree	that I will not rebate any part of the premium or
commission or offer any valuable	e consideration as an inducement to take insurance
other than that clearly expressed	in the policy.
·	my address as shown on my license, during all
policies of insurance placed by o	or through me pursuant to Title 22, Section 781, of
the Virgin Islands Code, and wil	l not sign any policies in blank to be issued outside
my office.	
	Signature of Producer Authorized Signatory
Subscribed and sworn to be fore	me thisday of,
20at	
	(Notary Public)