

17:22-6.70 to 17:22-6.83

LEGISLATIVE HISTORY CHECKLIST

NJSA: 17:22-6.70 to 17:22-6.83

"New Jersey
Surplus Lines
Insurance
Guaranty Fund
Act"

LAWS OF: 1984

CHAPTER: 101

Bill No: A2273

Sponsor(s): Adubato and others

Date Introduced: June 25, 1984

Committee: Assembly: /////

Senate: Labor and Industry

Amended during passage: No

Date of Passage: Assembly: June 25, 1984

Senate: June 28, 1984

Date of Approval: July 27, 1984

Following statements are attached if available:

Sponsor statements: Yes

Committee statement: Assembly: No

Senate: Yes

Fiscal Note: No

Veto Message: No

Message on Signing: Yes

Following were printed:

Reports: No

Hearings: No

See newspaper clipping (attached):

"Shaky insurer owes million to Jerseyans," Star Ledger, 6-24-84

"Bill will help pay \$12M in claims against Vt. insurance firm," Trenton Times,
7-28-84.

(over)

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ASSEMBLY, No. 2273

STATE OF NEW JERSEY

INTRODUCED JUNE 25, 1984

By Assemblymen M. ADCBATO, GALLO, KARCHER, DEVERIN,
S. ADUBATO, LOVEYS, LA ROCCA, OTLOWSKI, CUPROW-
SKI, THOMPSON, Assemblywoman GARVIN, Assemblymen
VAINIERI, BROWN, FLYNN, MARSELLA, GORMAN,
DOBIA, CHARLES, RANIERI, GIRGENTI, PELLECCCHIA and
SCHWARTZ

AN Act concerning the insolvency of certain surplus lines insurers,
creating a New Jersey Surplus Lines Insurance Guaranty Fund,
amending P. L. 1974, c. 17 and supplementing sections 6 through
31, of P. L. 1960, c. 32 (C. 17:22-6.40 through 17:22-6.65).

1 BE IT ENACTED *by the Senate and General Assembly of the State*
2 *of New Jersey:*

1 1. (New section) This act shall be known and may be cited as
2 the "New Jersey Surplus Lines Insurance Guaranty Fund Act."

1 2. (New section) The purpose of this act is to provide a mecha-
2 nism for the payment of covered claims under certain insurance
3 policies issued by eligible surplus lines insurers; to avoid excessive
4 delays in the payment of the covered claims against insolvent
5 eligible nonadmitted insurers; and to avoid financial loss to
6 claimants or policyholders because of the insolvency of an eligible
7 nonadmitted insurer.

8 This act shall apply to all lines of direct insurance authorized
9 under R. S. 17:17-1, except workers' compensation insurance,
10 title insurance, surety bonds, credit insurance, mortgage guaranty
11 insurance, municipal bond coverage, fidelity insurance, investment
12 return assurance, and Ocean marine insurance. This act shall also
13 not apply to reinsurance of any kind.

Matter printed in italics thus is new matter.

3 Insurance Guaranty Association created pursuant to P. L. 1974,
4 c. 17 (C. 17:30A-1 et seq.).

5 b. "Covered claim" means an unpaid claim, including for
6 unearned premiums, which arises out of and is within the coverage,
7 and not in excess of the applicable limits of an insurance policy to
8 which this act applies, and which is issued by a member insurer
9 determined to be an insolvent insurer on or after the effective date
10 of this act, if (1) the claimant or policyholder is a resident of this
11 State at the time of the occurrence of the insured event for which
12 a claim has been made, or (2) the property from which the claim
13 arises is permanently located in this State. "Covered claim" shall
14 not include any amount due any reinsurer, insurance pool or
15 underwriting association, as subrogation recoveries or otherwise,
16 except that a claim for any such amount, asserted against a person
17 insured under a policy issued by a member insurer which has
18 become an insolvent insurer, which, if it were not a claim by or
19 for the benefit of a reinsurer, insurer, insurance pool, or under-
20 writing association, would be a "covered claim," may be filed
21 directly with the receiver of the insolvent insurer, but in no event
22 may any such claim be asserted in any legal action against the
23 insured of that insolvent insurer. "Covered claim" shall also not
24 include amounts for interest on unliquidated claims, punitive
25 damages unless covered by the policy, counsel fees for prosecuting
26 suits for claims against the fund, and assessments or charges for
27 failure by an insolvent insurer to have expeditiously settled claims.
27 failure by an insolvent insurer to have expeditiously settled claims.

27A c. "Fund" means the New Jersey Surplus Lines Insurance
27B Guaranty Fund created pursuant to section 4 of this act.

28 d. "Insolvent insurer" means an insurer which was an eligible
29 surplus lines insurer at the time the insurance policy was issued
30 or when the insured event occurred, and which is determined to be
31 insolvent by a court of competent jurisdiction. "Insolvent insurer"
32 does not include an admitted insurer issuing insurance pursuant to
33 section 10 of P. L. 1960, c. 32 (C. 17:22-6.44).

34 e. "Member insurer" means an eligible nonadmitted or surplus
35 lines insurer required to be a member of, and that is subject to
36 assessments by the fund.

37 f. "Net direct written premiums" means direct gross premiums
38 on insurance policies written by a surplus lines insurer to which
39 this act applies, less return premiums thereon and dividends paid
40 or credited to policyholders on that direct business. If a policy

43 subject to the premium receipts tax levied in accordance with
44 section 25 of P. L. 1960, c. 32 (C. 17:22-6.59). "Net direct written
45 premiums" do not include premiums on contracts between insurers
46 or reinsurers.

47
48 g. "Surplus lines insurer" means a nonadmitted insurer ap-
49 proved as an eligible nonadmitted or unauthorized insurer pursuant
50 to section 11 of P. L. 1960, c. 32 (C. 17:22-6.45).

1 4. (New section) There is created a private nonprofit unincor-
2 porated legal entity to be known as New Jersey Surplus Lines
3 Insurance Guaranty Fund. All surplus lines insurers shall be and
4 remain member insurers of the fund as a condition of their con-
5 tinued eligibility pursuant to section 11 of P. L. 1960, c. 32
6 (C.17:22-6.45). Membership in the fund shall be a condition for
7 eligibility issued on or after the effective date of this act. The fund
8 shall be managed and administered by the New Jersey Property-
9 Liability Insurance Guaranty Association. The association shall
10 exercise all of the powers vested in the fund under this act, and
11 such other powers as may be necessary or appropriate to the
12 fulfilling of its responsibilities under this act. The association shall
13 administer the affairs of the fund in accordance with its plan of
14 operation adopted pursuant to section 9 of P. L. 1974, c. 17
15 (C. 17:30A-9) insofar as the provisions of that plan are not
16 inconsistent with the provisions of this act, and subject to any
17 amendments to the plan as may be necessary or appropriate to
18 effectuate the purposes of this act.

1 5. (New section) a. The fund shall:

2 (1) be obligated to the extent of the covered claims against an
3 insolvent insurer incurred prior to or 30 days after the determina-
4 tion of insolvency, or before the policy expiration date, if less than
5 30 days after that determination, or before the policyholder re-
6 places the policy or causes its cancellation, if he does so within 30
7 days of the determination. The fund's obligation for covered claims
8 shall not be greater than \$300,000.00 per occurrence, subject to any
9 applicable deductible contained in the policy. The commissioner
10 may adjust the payments for covered claims based on the monies
11 available in the fund. In no event shall the fund be obligated to a
12 policyholder or claimant in excess of the limits of liability of the
13 insolvent insurer stated in the policy from which the claim arises;

14 (2) be deemed the insurer to the extent of its obligation on the
15 covered claims and to such extent shall have all rights, duties, and

16 obligations of the insolvent insurer as if the insurer had not become
17 insolvent;

18 (3) assess member insurers in accordance with section 6 of this
19 act in amounts necessary to pay:

20 (a) obligations of the fund under paragraph (1) of this
21 subsection,

22 (b) expenses of handling covered claims,

23 (c) any other expenses incurred in the implementation of
24 the provisions of this act;

25 (4) investigate claims brought against the fund and adjust,
26 compromise, settle, and pay covered claims to the extent of the
27 fund's obligation and deny all other claims, and may review
28 settlements, releases and judgments to which the insolvent insurer
29 or its policyholders were parties to determine the extent to which
30 the settlements, releases and judgments may be properly contested;

31 (5) notify those persons as the commissioner directs under
32 section 8 of this act.

33 (6) handle claims through the association's employees; and

34 (7) pay the other expenses of the association in administering
35 the provisions of this act.

36 b. The fund may:

37 (1) sue or be sued;

38 (2) negotiate and become a party to those contracts which are
39 necessary to carry out the purpose of this act;

40 (3) perform those other acts which are necessary or appropriate
41 to effectuate the purpose of this act; and

42 (4) refund to the member insurers in proportion to the contribu-
43 tion of each member insurer that amount which the commissioner
44 determines to be in excess of the needs of the fund.

1 6. (New section) a. In order to provide the monies necessary to
2 meet the fund's obligations and expenses under this act:

3 (1) each member insurer including a surplus line insurer made
4 eligible on or after the effective date of this act, shall make an
5 initial one time payment of \$25,000.00 to be made to the fund
6 within 60 days of the effective date of this act; and

7 (2) each member insurer shall be assessed in any year in which
8 assessments are required, in the proportion that the net direct
9 written premiums of the member insurer for the calendar year
10 preceding the assessment bear to the net direct written premiums
11 of all member insurers for that calendar year. The amount of the
12 assessment shall be determined by the commissioner in accordance
13 with the obligations and expenses of the fund, except that the
14 initial annual assessment for 1984 under this paragraph shall be

15 4% of each member insurer's net direct written premiums for the
16 calendar year preceding the assessment, which assessment shall be
17 remitted to the fund for the full year by each member insurer
18 within 60 days of the effective date of this act. Assessments made
19 pursuant to this paragraph shall not in any year exceed 4% of a
20 member insurer's net direct written premiums for the calendar
21 year preceding the assessment. After December 31, 1984, one
22 quarter of the annual assessment shall be remitted by each member
23 insurer to the fund very three months, as prescribed by the com-
24 missioner. Each member insurer shall be notified of the assessment
25 not later than 30 days before it is due. The amount of the assess-
26 ment may be, from time-to-time, adjusted, terminated or reinsti-
27 tuted by the commissioner, as he may deem necessary to meet the
28 current and projected obligations and expenses of the fund.

29 b. The fund may, from time-to-time, borrow monies from the
30 New Jersey Property-Liability Insurance Guaranty Association
31 to pay the fund's obligations and expenses under this act which
32 are in excess of the monies available to the fund therefor. The
33 aggregate amount owed by the fund to the association shall at no
34 time exceed \$10,000,000.00, exclusive of interest charges. Monies
35 borrowed under this subsection shall be paid back to the association
36 in accordance with a payment schedule approved by the commis-
37 sioner. An interest charge of 6% per annum shall be levied on all
38 monies borrowed under this subsection.

1 7. (New section) The commissioner may, after notice, suspend
2 the eligibility of a member insurer that fails to pay an assessment
3 under section 6 of this act when due, or any interest accruing
4 thereon, or fails to comply with the applicable provisions of the
5 plan of operations. The commissioner may, after notice and hearing
6 in accordance with the "Administrative Procedure Act," P. L. 1968,
7 c. 410 (C. 52:14B-1 et seq.), withdraw the eligibility of that insurer.

8 Interest shall be charged on the amount of unpaid assessment
9 subject to the provisions of this section. The interest charge shall
10 be at the current market rate of interest, using an index or indexes
11 to be selected by the commissioner, and shall be payable at the
12 time the unpaid assessment is paid to the fund.

13 Eligibility of a surplus lines insurer shall not be restored or
14 reissued until all monies owing under this section have been paid
15 to the fund.

1 8. (New section) The commissioner shall:

2 a. notify the fund of the existence of an insolvent insurer not
3 later than three days after he receives notice of the determination
4 of the insolvency. The fund shall be entitled to a copy of any

5 complaint seeking an order of liquidation with a finding of insol-
6 vency against a member insurer at the same time that such com-
7 plaint is filed with a court of competent jurisdiction;

8 b. order the termination of all in force policies of an insolvent
9 insurer within 30 days of the date of determination of the insol-
10 vency;

11 c. upon request, provide the fund with a statement of the net
12 direct written premiums of each member insurer; and

13 d. order surplus lines agents to notify, within five days of the
14 date of the order, the policyholders of the insolvent insurer and
15 any other interested parties of the determination of insolvency and
16 of their rights under this act. Notification shall be by mail at their
17 last known address, where available, but if sufficient information
18 for notification by mail is not available, notice by publication in a
19 newspaper of general circulation shall be sufficient.

20 9. (New section) a. Any person recovering under this act shall
21 be deemed to have assigned his rights under the policy from which
22 the claim arose to the fund to the extent of his recovery from the
23 fund. Every policyholder or claimant seeking the protection of
24 this act shall cooperate with the fund to the same extent as that
25 person would have been required to cooperate with the insolvent
26 insurer. The fund shall have no cause of action against the
27 policyholder of the insolvent insurer for any sums it has paid out,
28 except for those causes of action as the insolvent insurer would
29 have had if the sums had been paid by the insolvent insurer. In
30 the case of an insolvent insurer operating on a plan with an assess-
31 ment liability, payments of claims by the fund shall not operate to
32 reduce the liability of policyholders to the receiver, liquidator, or
33 statutory successor for unpaid assessments.

34 b. The receiver, liquidator, or statutory successor of an insolvent
35 insurer shall be bound by settlements of covered claims by the fund
36 or its representatives. The court having jurisdiction shall grant the
37 covered claims paid by the fund priority, against the assets of the
38 insolvent insurer, over any claims against the assets of the insolvent
39 insurer by claimants having received any payment from the fund
40 for the covered claims, to the extent of the amount of the payments
41 made by the fund. The expenses of the fund in handling claims
42 shall be accorded the same priority as the liquidator's expenses.

43 c. The fund shall periodically file with the receiver or liquidator
44 of the insolvent insurer statements of the covered claims paid by
45 the fund and estimates of anticipated claims on the fund which shall
46 preserve the rights of the fund against the assets of the insolvent
47 insurers.
48

29 9. The liquidator, receiver, or statutory successor of an insolvent
30 insurer covered by this act shall permit access by the fund or its
31 representative to all of the insolvent insurer's records which would
32 assist the fund in carrying out its functions under this act with
33 regard to covered claims. In addition, the liquidator, receiver, or
34 statutory successor shall provide the fund or its representative
35 with copies, or permit copies to be made of the insolvent insurer's
36 records upon request, and at the expense of the fund.

1 10. (New section) Any person having a covered claim that may
2 be recovered from more than one insurance guaranty association
3 or its equivalent, shall seek recovery first from the association in
4 the place of residence of the policyholder at the time of the insured
5 event, except that if it is a first party claim for damage to property
6 with a permanent location, he shall seek recovery first from the
7 association of the jurisdiction in which the property is located. Any
8 recovery under this act shall be reduced by the amount of recovery
9 from any other insurance guaranty association; except that, if
10 recovery is denied or deferred by that association, a person may
11 proceed to recover from any other insurance guaranty association
12 from which recovery may be legally sought.

1 11. (New section) In the event the commissioner has sufficient
2 basis to believe that the financial condition of a member insurer is
3 hazardous to the policyholders or the public, the commissioner
4 shall request the appropriate regulatory authority of the domici-
5 liary jurisdiction of that member insurer to examine and report
6 back to the commissioner on the financial condition of the member
7 insurer.

1 12. (New section) The fund shall be subject to examination and
2 regulation by the commissioner. The association, on behalf of the
3 fund, shall submit, not later than March 31 of each year, a financial
4 report for the preceding calendar year in a form approved by the
5 commissioner.

1 13. (New section) There shall be no liability on the part of, and
2 no cause of action of any nature shall arise against any member
3 insurer, the fund, the association or its board of directors, or agents
4 or employees, or the commissioner or his representatives for any
5 action taken by them in the performance of their powers and duties
6 under this act.

1 14. (New section) A member insurer shall include on the applica-
2 tion and on the face of the policy or certificate for insurance
3 subject to this act, a notice stating that the policy coverage has the
4 protection of the New Jersey Surplus Lines Insurance Guaranty
5 Fund, if the eligible surplus lines insurer becomes bankrupt or

6 insolvent. A member insurer or an agent or broker may advertise
7 that policy coverages offered by a member insurer and subject to
8 the provisions of this act are protected by the New Jersey Surplus
9 Lines Insurance Guaranty Fund should the surplus lines insurer
10 become bankrupt or insolvent.

1 15. Section 6 of P. L. 1974, c. 17 (C. 17:30A-6) is amended to
2 read as follows:

3 6. There is created a private nonprofit unincorporated legal
4 entity to be known as the New Jersey Property-Liability Insurance
5 Guaranty Association. All insurers defined as member insurers
6 in section 5 f. shall be and remain members of the association as
7 a condition of their authority to transact insurance in this State.
8 The association shall perform its functions under a plan of opera-
9 tion established and approved under section 9 and shall exercise
10 its powers through a board of directors established under section 7.

11 *The association is also authorized and shall have all of the powers*
12 *necessary and appropriate for the management and administration*
13 *of the affairs of the New Jersey Surplus Lines Insurance Guaranty*
14 *Fund in accordance with the provisions of the "New Jersey Sur-*
15 *plus Lines Insurance Guaranty Fund Act," P. L. , c.*
16 *(C.) (now pending before the Legislature as this*
17 *bill).*

1 16. This act shall take effect immediately.

STATEMENT

The purpose of this bill is to deal with the imminent declaration of insolvency of the Ambassador Insurance Company, as recommended by the Commissioner of Banking and Insurance of the State of Vermont.

Although domiciled in Vermont, the Ambassador Insurance Company, prior to its placement in receivership on November 10, 1983 by Vermont's Commissioner of Banking and Insurance, wrote approximately 25% of its property and casualty book of business in New Jersey as a surplus lines carrier. Following placement of the Ambassador Insurance Company in receivership, it has been determined that, to date, there are 3,144 outstanding claims involving New Jersey policyholders or claimants. The dollar amount of these claims have been estimated to be between \$10 million and \$12 million. The policyholders involved run the gamut from individual homeowners, to small retail establishments to several hundred governmental entities, including municipal police departments, housing authorities and improvement authorities.

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SPONSORS' STATEMENT

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A2273(1984)

Based on the report of Vermont's Commissioner of Banking and Insurance to the Vermont court, it is clear that the total value of the claims outstanding against Ambassador Insurance Company are substantially in excess of the assets of that company. It is this fact that has prompted Vermont to seek a declaration of insolvency against Ambassador. Ambassador's insolvency would of course jeopardize the chances of substantial recovery of the claim amounts of New Jersey claimants, as well as, in the case of liability claims, materially injure Ambassador's New Jersey policyholders.

The bill is patterned after the "New Jersey Property-Liability Insurance Guaranty Association Act," and is designed to give to New Jersey claimants and insureds under certain property and casualty policies issued by Ambassador and, if needed, other eligible surplus lines insurers, the same protections afforded insureds and claimants of admitted property and liability insurers.

This bill requires all eligible nonadmitted (surplus lines) insurers, present and future, to be members of the New Jersey Surplus Lines Insurance Guaranty Fund, and to be subject to fund levies. Initial levies by the fund are as follows. Each member insurer shall be subject to:

- (1) an immediate one-time \$25,000 levy; and
- (2) a first year (1984) assessment of 4% of a member insurers net direct written premiums for the calendar year preceding the assessment, which amount shall be paid in full within 60 days of the enactment of this bill. Assessments thereafter shall be paid on a quarterly basis and may be adjusted by the Commissioner of Insurance in accordance with the needs of the fund.

In addition, the fund is authorized to borrow \$10 million immediately from the New Jersey Property-Liability Insurance Guaranty Association for the purpose of meeting its start-up costs.

SENATE LABOR, INDUSTRY AND PROFESSIONS
COMMITTEE

STATEMENT TO

ASSEMBLY, No. 2273

STATE OF NEW JERSEY

DATED: JUNE 28, 1984

This bill creates the New Jersey Surplus Lines Insurance Guaranty Fund to provide some protection to policyholders of eligible surplus lines insurers which become insolvent. The bill applies to lines of direct insurance, with certain exceptions.

All eligible surplus lines insurers with whom New Jersey insurance business is placed will be member insurers of the fund and will make an initial one time payment of \$25,000.00 each and be assessed in any year in which assessments are required on the member insurer's net direct written premiums in the State for the calendar year preceding the assessment. The assessment for the first year will be 4% and thereafter the assessment will be determined each year but it can't exceed 4%. The bill also allows the fund to borrow up to \$10,000,000.00 from the New Jersey Property-Liability Insurance Guaranty Association which administers the guaranty fund which protects property and liability policyholders of domestic or licensed insurers which become insolvent. Any loan will be paid back by the fund in accordance with a payment schedule approved by the commissioner. The interest charge is 6% per annum.

A covered claim under the bill is an unpaid claim, including unearned premiums, which arises out of and is within the coverage of a policy issued by an eligible surplus lines insurer who becomes insolvent on or after the effective date of this bill if the claimant or policyholder is a resident of this State at the time of the occurrence of the insured event for which a claim has been made, or the property from which the claim arises is permanently located in this State.

The funds obligation for covered claims is limited to \$300,000.00 per incident, subject to any deductible contained in the policy. The Commissioner of Insurance may adjust the payments for covered claims based on the moneys available in the fund. The fund, of course, will subrogate the rights of the protected claimant or policyholder to the extent of his recovery from the fund.



OFFICE OF THE GOVERNOR

NEWS RELEASE

CN-001

Contact: CARL GOLDEN
609-292-8956

TRENTON, N.J. 08625

Release: FRIDAY, JULY 27, 1984

Governor Thomas H. Kean today signed legislation to aid some 3,000 persons in New Jersey in collecting \$12 million in claims owed to them by the Ambassador Insurance Company of Vermont, a firm in danger of being declared insolvent.

The bill, A-2733, was sponsored by Assemblyman Michael Adubato, D-Essex.

Under the bill, policyholders could receive up to \$300,000 for any outstanding claim, less any deductible in the policy. The company insured approximately 40 police departments, 80 municipalities and several thousand individuals in New Jersey.

The bill will raise about \$1.5 million by having each of the 60 surplus line companies doing business in New Jersey pay \$25,000 per year into a special fund. It would also permit these companies to increase rates by 4 percent per year to produce another \$2.4 million. The remainder of the fund would come from borrowing \$10 million from the existing property casualty guaranty fund which currently has a surplus of some \$35 million.

All the money raised from these sources will be used to pay claims to New Jerseyans who hold policies with the Ambassador firm.

#



STATE OF VERMONT
DEPARTMENT OF BANKING AND INSURANCE
MONTPELIER 05602
TEL. 802-828-3301

DIVISIONS OF:
BANKING
INSURANCE
SECURITIES

IMPORTANT

August 15, 1980

TO: All Surplus Lines Brokers

ELIGIBILITY LIST (Title 8 V.S.A. Section 5026)

Enclosed is the list of current Eligible Surplus Lines Companies.

All surplus lines insurers were notified of the new license fee of \$100 due August 1, 1980. Insurers who have not submitted the fee are no longer considered eligible and have been deleted from the list.

In addition to the initial fee, an annual license fee of \$100 is due and payable before April first of each year. Failure to pay the annual fee, when due, will also mean automatic removal from the eligible surplus lines list.

Surplus lines brokers may not use any insurer who is not deemed eligible by the Commissioner of Banking and Insurance.

BROKER'S REPORTS (Title 8 V.S.A. Section 5024)

On or before the end of each month next following each calendar quarter, each surplus lines broker shall file with the Commissioner, on forms prescribed by him, a verified report of all surplus lines insurance transacted during the preceding calendar quarter.

The quarterly reports are due in this office on or before April 30, July 31, October 31, and January 31 of each year, and must be filed even if no business was written.

Failure to file reports on time will be subject to a penalty of \$10 per day for each day the report is late up to a maximum penalty of \$500 for the first offense. The second offense will result in a penalty of \$25 per day up to a maximum penalty of \$1,000.

Late filing of reports for a third offense will result in the maximum fine prescribed by law and the calling of a hearing for the purpose of suspending or revoking your surplus lines broker's license.

A copy of each quarterly report sent to this office must be sent to the Vermont Department of Taxes together with a check for any premium taxes that are due for the quarter.

Edward E. Meehan, CFE
Chief Examiner

NAME & ADDRESS OF:

Insured _____
Insurance Company _____
Brokerage House or Agency _____
Individual dealt with in brokerage house _____

POLICY DATES: From _____ to _____

LINE OF INSURANCE	#	_____
GROSS PREMIUM CHARGES	\$	_____
GROSS RETURN PREMIUM	\$	_____
NET GROSS PREMIUM	\$	_____

NAME & ADDRESS OF:

Insured _____
Insurance Company _____
Brokerage House or Agency _____
Individual dealt with in brokerage house _____

POLICY DATES: From _____ to _____

LINE OF INSURANCE	#	_____
GROSS PREMIUM CHARGES	\$	_____
GROSS RETURN PREMIUM	\$	_____
NET GROSS PREMIUM	\$	_____

NAME & ADDRESS OF:

Insured _____
Insurance Company _____
Brokerage House or Agency _____
Individual dealt with in brokerage house _____

POLICY DATES: From _____ to _____

LINE OF INSURANCE	#	_____
GROSS PREMIUM CHARGES	\$	_____
GROSS RETURN PREMIUM	\$	_____
NET GROSS PREMIUM	\$	_____

NAME & ADDRESS OF:

Insured _____
Insurance Company _____
Brokerage House or Agency _____
Individual dealt with in brokerage house _____

POLICY DATES: From _____ to _____

LINE OF INSURANCE	#	_____
GROSS PREMIUM CHARGES	\$	_____
GROSS RETURN PREMIUM	\$	_____
NET GROSS PREMIUM	\$	_____

NAME & ADDRESS OF:

Insured _____
Insurance Company _____
Brokerage House or Agency _____
Individual dealt with in brokerage house _____

POLICY DATES: From _____ to _____

LINE OF INSURANCE	#	_____
GROSS PREMIUM CHARGES	\$	_____
GROSS RETURN PREMIUM	\$	_____
NET GROSS PREMIUM	\$	_____

LINE

PREMIUM SUMMARY
BY COMPANY AND LINE

COMPANY (Alphabetically)	FIRE & E.C. (1)	S M P & PKG. (2)	INL. MAR. (3)	AUTO- PRIM. (4)	AUTO- EXCESS (5)	GEN. LIAB. (6)	PROD. (7)	LIQUOR LIAB. (8)	UMBR. (9)	PROF. LIAB. (10)	E & O (11)	BURG. CRIME (12)	D.I.C. (13)	GLASS (14)	OTHER (15)	TOTALS
1.																
2.																
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