Office of Commissioner of Insurance and Safety Fire
Protect | Enforce | Educate | Inform

Interlocal Risk Management Agency Annual Renewal Check Sheet

Name of IRMA: _____

Contact: _____

Email: _____

☐ Statutory Financial Statement

☐ Citizenship Affidavit – GID-276-E - If there has been a change to the individual who filed this affidavit with the last submission, this form must be filed. If there was no change, this affidavit is not required to be refiled.

Please contact our office at regservices@oci.ga.gov or 404-657-0992 if assistance in needed.