



**Insurance Premium Finance Company
Convenience and Advantage Instructions**

1. Applicant: Name _____

Street (Line-1) _____ Street (Line-2) _____

City _____ County _____ State _____ Zip _____

FEIN # _____ Email Address _____ Phone _____ Fax _____

2. Principal area of state to be served by the above named Company. (State by Counties or give other reasonable description of area.)

3. State statistics of last two censuses of area to be served and any other related information. Recent Prior

4. Total number of premium finance companies in area of state to be served. (Area as stated in question #2.) _____

5. State source of business. (If through insurance broker or agent, give the number and general location by city to be served as stated in question #2. Use separate attachment if necessary.)

6. Project growth for each of the next three years in dollars. Year 1 Year 2 Year 3

7. Will all sales personnel work out of home office? YES NO If not, give general location and territory served.

8. Will the public benefit if the license is issued? Explain.

9. Attach any other relevant information to this application.

10. Georgia Office :

Street _____ City _____

State _____ Zip _____ Phone _____ Fax _____ County _____

11. Georgia Manager:

Name _____ Title: _____

Street _____ City _____

State _____ Zip _____ Phone _____ Fax _____ Email _____

ATTESTATION

Under penalties of perjury, the below named, affirms that all the foregoing information submitted, including any accompanying documentation, was completed in good faith, is true, complete and correct to the best of my knowledge.

Name of Attestator: _____ Position or Title of Attestator: _____ Date: _____

**Instructions for Insurance Premium Finance Company
Convenience and Advantage Instructions**

To reduce paper, please do not submit printed instructions with this form.

Question 2. Must operate in at least ten (10) Georgia Counties.

Question 3. Enclose your own statement of the population growth, if any, and potential for additional premiums to be financed in the area to be served by your company. Also, enclose documentation used to prepare your statement. Such documentation might include statements on projected population and economic growth, charts, graphs and any historical data that can be obtained from governmental agencies, etc.

Question 5. Source of business. List only Georgia Agents. Include immediate source of business plus any new sources you anticipate acquiring during the next three years relative to the projected growth in Question 6.

Question 6. Insurance premiums to be financed in Georgia.

Question 8. Answer question on form. Then, from the area as stated in Question 2, enclose a minimum of fifty (50) letters from agents and some of their clients stating that they have experienced difficulties or delays in obtaining financing of their insurance premiums. We particularly want to know the frequency and over what period of time the problem occurred and if the problem still exists. We recommend that an applicant submit several letters from the heads of professional organizations, for example, Chambers of Commerce, Independent Agents Association, etc. Also, submit testimonial letters from several civic club presidents in the area you will be serving. This information is to prove that the services to be rendered, which are not now available to those citizens in the area you are planning to serve, will be a convenience and advantage to the public. This requirement is pursuant to Georgia Insurance Code 33-22-4(b) (4).

Question 9. Enclose any other information your company can obtain that will demonstrate to the Commissioner that the licensing of your company as an insurance premium finance company will be a convenience and advantage to the public.